## Statement 1974 By Doctors On Nixon NYTIMES Special to The New York Times

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LONG BEACH, Calif., Oct.
31—Following are a bulletin
on the condition of former
President Richard M. Nixon
issued at 10 A.M. today at
the Memorial Hospital Medical Center here by Dr. John
C. Lungren, cardiologist who
is Mr. Nixon's personal physician, and Dr. Eldon Hickman, cardiovascular surgeon
who headed Mr. Nixon's surwho headed Mr. Nixon's sur-gical team, and a statement by Dr. Lungren ata news conference this afternoon:

Morning Bulletin AM

Morning Bulletin Act

The former President of the United States spent a more restful night. His vital signs are now stable. His blood pressure is 140/80. His pulse is 80 and regular.

There has been a slight drop in his hemoglobin count of one-half gram since last night. The significance of this change is being evaluated this morning. It may represent normal hemo dilution, or we are keeping in mind the possibility of a slow oozing of blood into the retroperitoneal space.

Yesterday, former President

Yesterday, former President Nixon was given one additional unit of packed red blood cells.

His family is here from early morning until late evening and Mrs. Nixon visits

ing and Mrs. Nixon visits with her husband and Julie and Tricia visit with their dad briefly at hourly intervals.

His spirits and mental attitude are excellent. He is alert, oriented to everything going on around him, and cooperative.

Although he has remained stable, he has not been taken off the critical list yet. The possibility still exists for further complication.

He remains under intensive observation by physicians and critical-care nurses. It is still premature to offer a prognosis at this time.

Afternoon Statement

Ladies and Gentlemen. We have a most important report concerning Former President Nixon's health status to give you at this time. With me on the podium are Dr. Eldon Hickman and Dr. James Harper, members of the surgical team who operated on the former Presi-

At the outset please honor our request to limit your Q. and A. to 10 minutes. We all feel the grave responsibility to all our patients in

the hospital — and our time is limited.

At the last news conference, Dr. Hickman and I, on last Tuesday morning, described to you the successful surgical procedure which had been performed on a vein in the left pelvic area of the patient. The post operative period was uneventful until about 12:45 P.M. on Tuesday last when he suddenly developed vascular shock.

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With all the concentrated efforts of the doctor-nursing team with countershock measures, we were able to stabilize the condition within the next three hours. This condition has remained so even until the present hour but potential dangers are still imminent. He did develop a

but potential dangers are still imminent. He did develop a fairly common complication of this surgical procedure, a retro peritoneal hemorrhage. This, by all our parameters, now appears to be becoming smaller. However, this A.M. we noted some minor decrease in the hemoglobin of the blood over the midnight reading and at noontime today a drop in the platelet count. platelet count.
Accordingly, we again called

for consultation. At approximately 2:30 this afternoon Mr. Nixon was examined and his case reviewed by Dr. Donald Mulder, professor of surgery at the U.C.L.A. school of medicine. Dr. Mulder feels that at the present time the present course of therapy is the proper one.

He is inclined to feel that the bleeding has now stopped and that we should continue to follow the conservative therapy, namely to combat the blood volume loss and platelet decrease with fresh platelet concentrate and fresh whole blood. With the cowhole blood. With the co-operation of Memorial Hospital's blood bank and the Red Cross, this treatment has now been instituted.