

A29DN (BJT)

PMS BUDGET

ASSASSINATION DOCTORS (450)

AUSTIN, TEX., JAN. 25 (AP)—DALLAS DOCTORS WHO TREATED PRESIDENT JOHN F. KENNEDY SAY THAT A MASSIVE HEAD AND BRAIN INJURY KEPT THEM FROM FANNING A FAINT HEART BEAT BACK TO LIFE.

THE CURRENT ISSUE OF THE TEXAS STATE JOURNAL OF MEDICINE CARRIES SEVEN SEPARATE STATEMENTS FROM RESIDENT PHYSICIANS OF PARKLAND HOSPITAL WHO TREATED KENNEDY NOV. 22.

DR. M. T. JENKINS, 46, ONE OF THE PHYSICIANS, SAID THAT IT IS HIS PERSONAL FEELING "THAT ALL METHODS OF RESUSCITATION WERE INSTITUTED EXPEDITIOUSLY AND EFFICIENTLY. HOWEVER, THE CRANIAL AND INTRACRANIAL DAMAGE WAS OF SUCH MAGNITUDE AS TO CAUSE IRREVERSIBLE DAMAGE."

THE MEDICAL JOURNAL ARTICLE, ENTITLED "THREE PATIENTS AT PARKLAND," ALSO DESCRIBES THE TREATMENT GIVEN TEXAS GOV. JOHN CONNALLY, WHO WAS WOUNDED IN THE NOV. 22 ATTACK, AND THAT GIVEN LEE HARVEY OSWALD, THE ACCUSED ASSASSIN WHEN HE WAS SHOT IN THE DALLAS POLICE STATION NOV. 24. NIGHT CLUB OPERATOR JACK RUBY HAS BEEN HELD WITHOUT BOND IN OSWALD'S DEATH AND IS SCHEDULED FOR TRIAL FEB. 17.

THE REPORT SAID OSWALD WAS SHOT THROUGH THE SPLEEN, PANCREAS, THE KIDNEY, THE LIVER AND THE STOMACH. HE DIED ABOUT 1 1/2 HOURS LATER ON THE PARKLAND HOSPITAL OPERATING TABLE. "THE TRAUMA (SHOCK) WHICH PATIENT OSWALD HAD SUSTAINED WAS TOO GREAT FOR RESUSCITATION," JENKINS SAID.

JENKINS ALSO SAID THAT IN HIS OPINION OSWALD SUFFERED A PERIOD OF CEREBRAL HYPOXIA OR ANOXIA (OXYGEN DEFICIENCY) BETWEEN THE TIME HE WAS SHOT AND THE TIME HE REACHED THE HOSPITAL WHICH "IRREPARABLY DAMAGED" MANY VITAL CENTERS, INCLUDING THE HEART SYSTEM.

A30DN

THE DOCTORS SAID CONNALLY REGAINED CONSCIOUSNESS AFTER A THREE-HOUR AND 15-MINUTE OPERATION ON HIS CHEST, ARM AND LEG "SAYING HE FELT WELL BUT HE WAS SOMEWHAT RESTLESS." CONNALLY IS NOW RECUPERATING AT THE MANSION AND EXPECTS TO RETURN TO HIS OFFICE THE FIRST OF FEBRUARY.

THE MEDICAL JOURNAL SAID IT ASKED THE DALLAS DOCTORS TO RECORD THEIR EXPERIENCES WITHIN HOURS AFTER THE SHOOTINGS. "BECAUSE A TEXAS HOSPITAL AND TEXAS PHYSICIANS FIGURED PROMINENTLY IN THIS TRAGEDY, THE TEXAS STATE JOURNAL OF MEDICINE RECORDS FOR ITS READERS OF THE MEDICAL PROFESSION A FULL ACCOUNT OF TREATMENT GIVEN A NEVER-TO-BE FORGOTTEN TRIO," THE ARTICLE SAID.



EACH PHYSICIAN GAVE A SEPARATE ACCOUNT WITH CONSIDERABLE DUPLICATION.  
DR. CHARLES J. CARRICO, 28, FIRST PHYSICIAN TO SEE KENNEDY  
SAID "WHEN THE PATIENT ENTERED THE EMERGENCY ROOM ON AN AMBULANCE  
CARRIAGE (ABOUT 12:30 P. M. CST) HE HAD SLOW AGONAL RESPIRATORY  
EFFORTS AND OCCASIONAL CARDIAC BEATS DECTABLE BY AUSCULATION."

THERE WERE TWO EXTERNAL WOUNDS NOTED, ONE IN THE NECK AND THE OTHER  
A MASSIVE HEAD AND BRAIN INJURY. "NO PULSE OR BLOOD PRESSURE WERE  
PRESENT." A TUBE WAS INSERTED IN THE TRACHEA PAST THE RAGGED WOUND  
AND MECHANICAL RESPIRATION BEGAN. AT THE SAME TIME INTRAVENOUS INFUSIONS  
WERE MADE IN THE RIGHT LEG AND LEFT ARM. RESPIRATION ALSO BEGAN  
WITH AN ANESTHESIA MACHINE.

"DESPITE THESE MEASURES BLOOD PRESSURE  
NEVER RETURNED. ONLY BRIEF ELECTRIC-CARDIOGRAPHIC EVIDENCE OF  
CARDIAC ACTIVITY WAS OBTAINED," CARRICO SAID.

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AUSTIN, TEX.--FIRST ADD ASSASSINATION DOCTORS (A29-30DN) X X X  
CARRICO SAID.

DR. CHARLES R. BAXTER, 34, SAID "NO PULSE WAS DETECTABLE AND INEFFECTUAL RESPIRATIONS WERE BEING ASSISTED. . .WHEN ALL THESE MEASURES WERE COMPLETE, NO HEART BEAT COULD BE DETECTED. . .DUE TO THE EXTENSIVE AND IRREPARABLE BRAIN DAMAGE WHICH EXISTED AND SINCE THERE WERE NO SIGNS OF LIFE, NO FURTHER ATTEMPTS WERE MADE AT RESUSCITATION."

DR. WILLIAM KEMP CLARK, 38, NOTED THAT "THE PATIENT HAD BLED PROFUSELY FROM THE BACK OF THE HEAD. THERE WAS A LARGE AMOUNT OF CEREBRAL TISSUE PRESENT ON THE (EMERGENCY ROOM) CART. . .MUCH OF THE RIGHT POSTERIOR SKULL, AT BRIEF EXAMINATION, APPEARED GONE. . . THE PRESIDENT WAS PRONOUNCED DEAD AT 1 P. M."

OSWALD WAS BROUGHT TO PARKLAND EMERGENCY ROOM TWO DAYS LATER, AT 11:32 A. M. HE WAS TAKEN TO THE MAIN OPERATING ROOM AT 11:42 A. M. AND P.

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JENKINS SAID A RESUSCITAT

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JENKINS SAID A RESUSCITATIVE TEAM WAS ALERTED WHILE OSWALD WAS EN ROUTE TO THE HOSPITAL AND THE TEAM WAS IN THE EMERGENCY ROOM WHEN OSWALD ARRIVED.

"IT WAS OBVIOUS THAT THE PATIENT WAS IN EXTREMIS AS JUDGED BY HIS GENERAL PALLOR, THE COLD EXTREMITIES, THE DUSKY OR ASHEN GRAY COLOR OF HIS NAIL BEDS, HIS GASPING RESPIRATION AND HIS DILATED PUPILS AND DRY CONJUNCTIVA (MEMBRANE ON THE INNER EYELID AND EYEBALL)," JENKINS SAID.

WHILE SOME MEMBERS OF THE TEAM BEGAN MECHANICAL RESPIRATION EFFORTS, THREE OTHERS MADE VENOUS INFUSIONS OF BLOOD. "IT WAS OBVIOUS THAT THIS PATIENT HAD SUSTAINED SUCH AN INJURY THAT HE WAS CONTINUING TO LOSE BLOOD INTERNALLY VERY RAPIDLY," JENKINS SAID.



OSWALD WAS MOVED TO THE MAIN OPERATING ROOM AND AN ABDOMINAL INCISION MADE 12 MINUTES AFTER HE WAS ADMITTED. THE DOCTORS FOLLOWED THE BULLET PATHWAY AND MANAGED TO CONTROL THE MAJOR BLEEDING. HOWEVER, AT 12:37 P. M. THE HEART BEAT BECAME WEAKER AND THE PULSE BECAME IMPERCEPTIBLE.

THE LEFT CHEST WAS OPENED FOR AN INJECTION OF 10 PER CENT CALCIUM CHLORIDE DIRECTLY INTO THE LEFT VENTRICLE, AND MANUAL HEART MASSAGE BEGAN. FOUR UNSUCCESSFUL ATTEMPTS WERE MADE TO RESTART THE HEART BEAT WITH ELECTRICAL STIMULUS.

AFTER OSWALD WAS DECLARED DEAD THE BULLET WAS REMOVED FROM BENEATH THE SKIN ON HIS RIGHT SIDE AND TURNED OVER TO OFFICERS.

DR. ROBERT R. SHAW, 58, PERFORMED THE CHEST SURGERY FOR CONNALLY. HE SAID HE REMOVED FRAGMENTS OF A RIB FRACTURED BY THE BULLET THEN SUTURED LACERATIONS IN THE RIGHT LUNG CAUSED BY THE BULLET AND BY THE BONE FRAGMENTS. DRAINS WERE PLACED IN THE CAVITY AND THE WOUND TREATED WITH PENICILLIN AND STREPTOMYCIN.

DR. CHARLES F. GREGORY, 44, SAID HE REMOVED TWO SMALL BONE FRAGMENTS FROM CONNALLY'S RIGHT WRIST ALONG WITH SEVERAL SMALL BITS OF METAL AND CLOTH. THE WRIST WAS CLOSED WITH SUTURES AND A LONG ARM CAST APPLIED WITH A TRACTION DEVICE, SIMILAR TO A RUBBER BAND, ATTACHED TO THE RIGHT THUMB AND INDEX FINGER. POSTOPERATIVELY THE ARM WAS SUSPENDED FROM AN OVERHEAD FRAME.

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