

I might say on behalf of the committee we are indeed grateful to you, and all the members of the panel, for the outstanding job that you have done on behalf of this committee.

At the appropriate time, we will make the proper acknowledgments of all the members of that panel. Thank you very much. You are excused.

Chairman STOKES. Mr. Blakey.

**NARRATION BY G. ROBERT BLAKEY, CHIEF COUNSEL AND  
STAFF DIRECTOR**

Mr. BLAKEY. Thank you.

Mr. Chairman, our next witness, Capt. James J. Humes, received an M.D. degree from Jefferson Medical College in 1948 and completed his residency in pathology at the Armed Forces Institute of Pathology in 1956.

Captain Humes became the chief of anatomic pathology at the National Naval Medical Center in Bethesda, Md. in 1960. He became the director of the laboratories at the National Medical Center in 1961.

In that capacity, he conducted an autopsy of President Kennedy. In 1965, he attained the rank of Captain and he retired from the Navy with that rank in 1967.

Currently, he is a clinical professor of pathology at Wayne State University School of Medicine and director of laboratories and vice president of medical affairs at St. John Hospital in Detroit.

It would be appropriate now, Mr. Chairman, to call Captain Humes.

Chairman Stokes. Captain Humes, will you please stand and be sworn. Raise your right hand.

Do you solemnly swear the testimony you will give before this committee is the truth, the whole truth and nothing but the truth, so help you God?

Dr. Humes. I do.

**TESTIMONY OF CAPT. JAMES J. HUMES, M.D., CLINICAL PROFESSOR OF PATHOLOGY, WAYNE STATE UNIVERSITY SCHOOL OF MEDICINE, DIRECTOR OF LABORATORIES AND VICE PRESIDENT OF MEDICAL AFFAIRS, ST. JOHN HOSPITAL, DETROIT, MICH.**

Chairman STOKES. Thank you. You may be seated.

Dr. Humes. Thanks.

Chairman STOKES. The Chair recognizes staff counsel Gary Cornwell.

Mr. CORNWELL. Thank You, Mr. Chairman.

Dr. Humes?

Dr. HUMES. Mr. Cornwell.

Mr. CORNWELL. In 1965, you were the director of laboratories of the National Medical School, Naval Medical School, Naval Medical Center at Bethesda; is that correct?

Dr. HUMES. That is correct.

Mr. CORNWELL. Very briefly, what was the nature of your responsibility in connection with that position?

Dr. HUMES. In that role, I had overall responsibility for all of the activities of the clinical laboratories of the Naval Medical Center,

overall supervision of the conduct of laboratory examinations, both in the field of clinical pathology, which embraces hematology, bacteriology, chemistry, and so forth, and supervision of the anatomic pathology section, which deals in post mortum examinations, examination of surgical specimens and so forth, and responsible for the training of young physicians and young technical people in laboratory medicine, et cetera.

Mr. CORNWELL. You, of course, prior to that had been certified by the American Board of Pathology and you had received special education and training in the field of pathology; is that correct?

Dr. HUMES. That is correct, yes, sir.

Mr. CORNWELL. You personally conducted the autopsy of President John Kennedy on November 22; is that accurate?

Dr. HUMES. Yes; with the assistance of Commander Boswell and Colonel Finck.

Mr. CORNWELL. What was your specific responsibility in connection with that autopsy?

Dr. HUMES. Well, I was summoned from my home late in afternoon of that day by the Surgeon General of the Navy and the Commanding officer of the Naval Medical Center, and the Commanding Officer of the the Naval Medical School, and much to my surprise, was told that the body of the late President was being brought to our laboratories and that I was to examine the President and ascertain the cause of death.

Mr. CORNWELL. Approximately what time of the day or night did the autopsy begin?

Dr. HUMES. Well, the President's body, as I recall, arrived about 7:35, 7:40 in the evening and after some preliminary examinations, about 8 or 8:15.

Mr. CORNWELL. Just very briefly, in what order or sequence did you conduct the autopsy?

Dr. HUMES. Well, the first thing we did was make many photographs which we knew would obviously be required for a wide variety of purposes, took basically whole body X-rays and then proceeded with the examination of the two wounds that we very shortly detected were present, starting with the wound in the head and proceeding to the wound in the back of the neck, upper thorax.

Mr. CORNWELL. Would it be accurate to state that the photographs and the X-rays were taken not only to document the condition of the body at the time you examined it, but also to provide a record of that event?

Dr. HUMES. I think that's obvious, yes, sir.

Mr. CORNWELL. About what time of the night was the autopsy finally concluded?

Dr. HUMES. Oh, I would estimate around midnight.

Mr. CORNWELL. You, I believe, have been at the hearing today, at least part of the time and, therefore, are aware of the fact that the committee has chosen and had work for them a panel of forensic pathologists?

Dr. HUMES. Yes, indeed.

Mr. CORNWELL. You may have heard part of the testimony which reflected that the panel reviewed your report of the autopsy and, of course, as you know, the panel also spoke with you on one prior occasion.

With respect to the ultimate findings that this committee will, of course, need to wrestle with, there is apparently, from the testimony today, one possible major area of disagreement, and that is with respect to the location of a bullet wound in the back of the President's head or possibly, depending upon the total body of the evidence, whether there was one or more than one bullet holes in the back of the President's head. That is principally what we wish to discuss with you at this time.

Let me ask you first, your autopsy report reflected that there was one and only one bullet wound to the back of the President's head, that it did enter in the rear, exited the front. Is that report accurate on those three points, to the best of your knowledge?

Dr. HUMES. Absolutely.

Mr. CORNWELL. I would like to show you what has been admitted into evidence as JFK exhibit F-48 during these hearings, a drawing of the back of the President's head.

The committee has received evidence from Miss Ida Dox today that that drawing is an accurate representation of photographs taken during the autopsy and I believe the drawing represents photographs from the autopsy numbered 15, 16, 42, and 43, but apart from the testimony of Miss Dox, have you had an opportunity to compare that drawing with those photographs to determine if its fairly and accurately duplicates the photographs?

Dr. HUMES. Yes, I have, Mr. Cornwell, and I believe that it does.

Mr. CORNWELL. The particular photograph that this drawing represents, I take it, would have been taken as part of the normal procedure of the autopsy and for the same reasons that you previously described all of the photographs were taken, is that correct?

Dr. HUMES. Correct, to document the positioning and appearance of the wounds.

Mr. CORNWELL. In the process of examining that, among the other available documentary evidence in the case, our panel of forensic pathologists, of course, were not present during the autopsy, did not have access to the body and, therefore, you and your colleague who were there are in a unique position to provide testimony as to the nature of the wounds to the President.

In that connection, as you recall, the panel invited you, and you responded voluntarily, in fact, as I recall, on very short notice, you responded to an invitation to come speak to them informally.

They, I guess, we could say, interviewed you as to your knowledge on the subject of the autopsy in the National Archives.

In pertinent part, the transcript which was made from the tape recording of that interview at pages 12 to 13 reflects that you reviewed not only that drawing, but an X-ray of the President's head and identified the small droplet in the lower portion of the photograph as a wound of entry and that that was the only wound of entry.

Later in the transcript, at pages 39 to 40, the following colloquy occurred: Dr. Petty of the panel said, going back to the earlier discussion, "Can I go back to another interpretation which is very important to this committee? I don't really mean to belabor the point, but we need to be certain, as certain as we can be, and I am showing you now photograph 15"—that, of course, was a photograph from which that drawing was made—"and here to put it in

the record is the posterior hairline or margin of the hair of the late President and there near the midline in just a centimeter or two above the hairline is an area that you refer to as the in-shoot wound".

That, in other words, was a verbalization of the description of the location of the small droplet near the bottom of the head.

You replied, Dr. Humes, "Yes sir."

Dr. Petty then continued, "Also on this same photograph is a ruler and approximately 2 centimeters or so down the ruler and just to the right of it is a second apparent area of defect, and this has been enlarged and is shown to you in an enlargement, I guess No. 16, which shows you right opposite the 1 centimeter mark on the ruler this defect or what appears to be a defect."

Thereafter, skipping a small portion and going to the very next page, 40, you replied, "I don't know what that is. No. 1, I can assure you that as we reflected the scalp to get to this point, there was no defect corresponding to this in the skull at any point. I don't know what that is. It could be to me clotted blood. I don't, I just don't know what it is, but it certainly was not any wound of entrance."

Would it be accurate to state first, Dr. Humes, that at the point at which you made the statements we have just referred to, you were called rather unexpectedly from your normal occupation, came to Washington and with no preparation or no referral to prior notes immediately prior to that, were shown this and other evidence and made the statements that I have just referred to?

Dr. HUMES. That is correct, and I comment that I was similarly summoned on Tuesday of this week, 48 hours ago, for this appearance likewise with no attempt or no chance for preparation and no idea of what questions were to be directed toward me.

Mr. CORNWELL. And we apologize for the short notice in both cases.

Dr. HUMES. Fine. I hope we can straighten that out.

Mr. CORNWELL. I would like to ask you if you would agree to various portions of what are reflected on this photograph. First, in the original photograph, there was shown, as in the drawing, a ruler; is that correct?

Dr. HUMES. That's correct.

Mr. CORNWELL. And in addition, there were the hands which are shown which appear to be holding the scalp so as to expose some portion of the back of the head.

Dr. HUMES. That's correct.

Mr. CORNWELL. Would you also agree that in the original photograph, the hair in the upper portion appears to be wet, that in the lower portion appears to be relatively dry?

Dr. HUMES. I would indeed.

Mr. CORNWELL. Would you also agree that the hair is spread apart in the upper portion of the photograph, exposing portions of the scalp and that in the lower portion, the hair is in a relatively natural position?

Dr. HUMES. I would.

Mr. CORNWELL. And finally, would you agree that the relative center portion of the photograph has what you, upon initially being shown this photograph in the Archives by our panel, could not

identify, that's what you said might be a clot or some other item, and that is relatively off-center in the overall photograph the part you identified as being the wound of entry, the locations are as I described them.

Dr. HUMES. Yes, apparently.

Mr. CORNWELL. Now, I would like to ask you today if you have had at least a greater opportunity to look at the photographs along the lines that I have just indicated to you and if, after doing so, you have a more well-considered or a different opinion or whether your opinion is still the same; as to where the point of entry is?

Dr. HUMES. Yes, I think that I do have a different opinion. No. 1, it was a casual kind of a discussion that we were having with the panel members, as I recall it. No. 2, and I think before we talk about these photographs further, if I might comment, these photographs were made on the evening of November 22, 1963. I first saw any of these photographs on November 1, 1966, almost 3 years after the photographs were made, which was the first opportunity that I had to see those photographs.

At that point, Drs. Boswell, Finck and I were asked to come to the National Archives to categorize these photographs, label them, identify them and we spent many hours going through that.

It was not the easiest thing to accomplish, I might say, after 3 weeks short of 3 years. But we identified them and I think in light of the very extensive opportunity that various panels of very qualified forensic pathologists have had to go over them, we did a reasonably accurate job in cataloging these photographs.

So, I saw them on that occasion. I saw them again on the 27th of January of 1967 when we again went to the Archives and made some summaries of our findings.

I go back further to the original autopsy report which we rendered, in the absence of any photographs, of course. We made certain physical observations and measurements of these wounds. I state now those measurements we recorded then were accurate to the best of our ability to discern what we had before our eyes.

We described the wound of entrance in the posterior scalp as being above and to the right of the external occipital protuberance, a bony knob on the back of the head, you heard Dr. Baden describe to the committee members today. And it is obvious to me as I sit here how with this his markedly enlarged drawing of the photograph that the upper defect to which you pointed or the upper object is clearly in the location of where we said approximately where it was, above the external occipital protuberance; therefore, I believe that is the wound of entry. Its relative position to bony structure underneath it is somewhat altered by the fact that there were fractures of the skull under this and the President's head had to be held in this position thus making some distortion of anatomic structures to produce this picture.

By the same token, the object in the lower portion, which I apparently and I believe now erroneously previously identified before the most recent panel, is far below the external occipital protuberance and would not fit with the original autopsy findings.

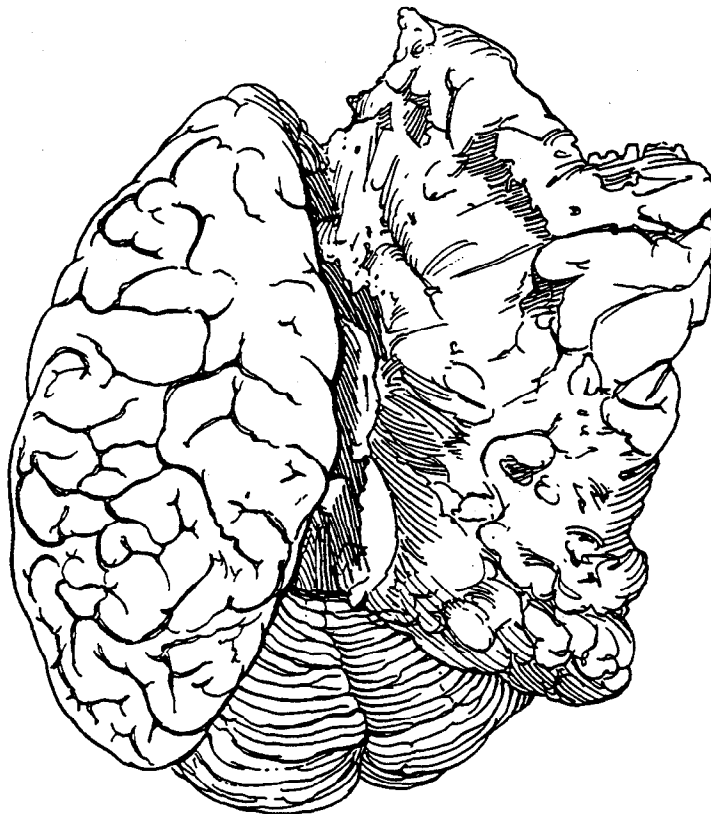
Mr. CORNWELL. I would like to show you, in addition to the photograph or the drawing which is now on the easel, what has

previously been admitted as JFK exhibits F-52 and F-53 and also what has previously been discussed as JFK exhibit F-302.

I don't believe, Mr. Chairman, that JFK exhibit F-302 was previously admitted into evidence and if it was not, I would ask that it be admitted at this time.

Chairman STOKES. Without objection, it may be entered into evidence at this point.

[The above-entitled document, JFK exhibit F-302, follows:]



JFK EXHIBIT F-302

Mr. CORNWELL. First, Dr. Humes, with respect to the X-rays, have you also today had an opportunity to look at those X-rays?

Dr. HUMES. Yes, sir.

Mr. CORNWELL. I would ask you if you would mind stepping to the easel and describing for us what your view, or your opinion, would be as to the location of the entry wound on that X-ray.

Dr. HUMES. OK.

I believe, particularly in this rather enhanced picture, I might say, it is a pleasure to have such because I didn't have anything of this kind formerly, that this would be the point of entrance.

Mr. CORNWELL. For the record simply, would you try to describe the point that you just indicated?

Dr. HUMES. Well, in this approximate area would be about where the external occipital protuberance would be, the knob we can feel in the back of our head. This would be above it. There is a great enlargement here, so it looks considerably further away than it

3 and also

would be on a standard size film or on the skull and I believe this is above the external occipital protuberance.

I think it also shows on the film that Dr. Baden was showing earlier. I think it shows even better in the in the A.P. view, the anterior-posterior view of the skull.

Mr. CORNWELL. So, you, in effect, would agree with the testimony of Dr. Baden that the entry wound on the X-rays is at the point in which there is, simply from a novice point of view, a dislocation or a jutting out.

Dr. HUMES. It is a fracture line that juts out from that.

Mr. CORNWELL. Thank you.

Dr. HUMES. If I might add, and more importantly, I had the opportunity, which none of the gentlemen had to do, to examine the President's skull from the inside when the brain was removed, with great care. There was one, and only one, wound of entrance.

I think we are in a somewhat of a semantic discussion as to where it was.

Mr. CORNWELL. And would you agree that the fragments shown in the upper portion of the skull would also be relatively consistent with the same entry location on the skull?

Dr. HUMES. Oh yes, however, this bullet was so disrupted, those fragments I think could virtually be any place.

Mr. CORNWELL. And referring to JFK exhibit F-302—

Dr. HUMES. Which is?

Mr. CORNWELL. The one on the very left, the drawing of the brain, would you also agree that the disruption of the brain, as shown in that drawing, is also in the upper portion and therefore would also be roughly consistent with the same entry location?

Dr. HUMES. Yes, sir, I do.

Mr. CORNWELL. Dr. Humes, you have indicated that you, of course, worked under the handicap, which, of course, was caused by conditions beyond your control, during the autopsy and the writing of the report, of not having autopsy photographs to work with; is that correct?

Dr. HUMES. Nor the X-rays by the time we were writing the report.

Mr. CORNWELL. Nor the X-rays.

Your initial autopsy report indicated that, as you have just stated, the wound was, indeed, above, I believe the report is worded in terms of "slightly above," the external occipital protuberance.

The testimony today indicates that the panel places that at approximately 10 centimeters above that external occipital protuberance. Would that discrepancy be explainable?

Dr. HUMES. Well, I have a little trouble with that; 10 centimeters is a significant—4 inches.

Mr. CORNWELL. I would like to simply ask you a few specific questions in order to determine—

Dr. HUMES. I go back to the fact there was only one, period.

Mr. CORNWELL. To determine whether we can understand how such a discrepancy might have occurred. The autopsy was completed late at night; is that correct?

Dr. HUMES. That's correct.

Mr. CORNWELL. After it was over, what did you do next?

000219

Dr. HUMES. We stayed to assist the morticians and their associates to prepare the President's body.

Mr. CORNWELL. How many hours did that take?

Dr. HUMES. Until about 5 o'clock in the morning.

Mr. CORNWELL. Then, what did you do?

Dr. HUMES. After the President's body was removed, half an hour or so later, I went home.

Mr. CORNWELL. Did you get any sleep?

Dr. HUMES. Not too much. I had to take one of my children to a religious function that morning, but then I returned and made some phone calls and got hold of the people in Dallas, which was unavailable to us during the course of the examination, as you heard from Dr. Baden, and I couldn't agree more with the apparent findings of his panel as to problems that we had had and hoped they would never be repeated, and spoke with Dr. Perry and learned of the wound in the front of the neck and things became a lot more obvious to us as to what had occurred.

Mr. CORNWELL. And you finally began to write the autopsy report at what time?

Dr. HUMES. It was decided that three people couldn't write the report simultaneously, so I assumed the responsibility for writing the report, which I began about 11 o'clock in the evening of Saturday, November 23, having wrestled with it for 4 or 5, 6 hours in the afternoon, and worked on it until 3 or 4 o'clock in the morning of Sunday, the 24th.

Mr. CORNWELL. Did you have any notes or records at that point as to the exact location of the—

Dr. HUMES. I had the draft notes which we had prepared in the autopsy room, which I copied.

Mr. CORNWELL. Was the distance between the wound and the external occipital protuberance noted on those notes?

Dr. HUMES. It was not noted in any greater detail than appears in the final report.

Mr. CORNWELL. So, the exact distance, then, above the external occipital protuberance was not noted—

Dr. HUMES. Was not noted, with the feeling, of course, that the photographs and X-rays that we had made would, of themselves suffice to accurately locate this wound.

Mr. CORNWELL. I only have one final question.

First, however, the notes are no longer in existence; is that correct?

Dr. HUMES. The original notes which were stained with the blood of our late President, I felt, were inappropriate to retain to turn in to anyone in that condition. I felt that people with some peculiar ideas about the value of that type of material, they might fall into their hands.

I sat down and word for word copied what I had on fresh paper.

Mr. CORNWELL. And then destroyed them?

Dr. HUMES. Destroyed the ones that were stained with the President's blood.

Mr. CORNWELL. The final question is, you were present throughout the entire embalming operation; is that correct?

Dr. HUMES. I was in the morgue from 7:30 in the evening until 5:30 in the morning. I never left the room.



heir asso-

Mr. CORNWELL. During that period, were there efforts made to reconstruct the President's head?

Dr. HUMES. Yes, indeed.

Mr. CORNWELL. Would it be accurate to state that those efforts entailed handling of the head over a long period of time?

Dr. HUMES. Very accurate.

Mr. CORNWELL. Dr. Baden testified that exhibit 302 and the other photographs which we have of the brain may not be entirely complete, although they show nearly the entire circumference in all directions, but you would have become familiar during that period of time with all of it, I suppose, exterior of the head in order to reconstruct it; is that correct?

Dr. HUMES. That's correct.

Mr. CORNWELL. And based upon that, is there any question about the fact that there were no other bullet holes entering the head?

Dr. HUMES. I was absolutely convinced at that time that there were no such. I have had no reason to change my opinion in the intervening 15 years.

Mr. CORNWELL. I have no further questions. Thank you.

Chairman STOKES. Thank you, counsel.

Are there any members of the committee that would seek recognition?

[No response.]

Chairman STOKES. Dr. Humes, under the rules of our committee, any witness may have 5 minutes in which to explain or in any way expand upon his testimony before our committee. I extend to you at this time such time as you so desire.

Dr. HUMES. Thank you very much, Mr. Chairman.

I certainly don't choose to avail myself of 5 minutes. Having heard most of what Dr. Baden said, and the findings of his committee on forensic pathologists, I think the committee was very well advised to gather such a distinguished group. I wish I had had the availability of that many people and that much time to reach the conclusions that I and my associates were forced to reach in approximately 36 hours.

I hope that the committee, in its wisdom, will make recommendations to appropriate authorities to preclude such a difficulty in the future.

I would say that our testimony—and my associates and I are quite elated, in fact, that the findings, to the best of my knowledge, the substantive findings of all the various panels that have examined these materials in such great detail, are in basic accordance with what we originally ascertained to be the situation. We are pleased by that.

Our testimony before the Warren Commission is quite lengthy, as I am sure some of the committee members are aware. However, I feel it also was hampered by our inability, No. 1, to never have seen, after about midnight of that night, the X-rays, to never have seen at any time until a year or two after the Warren Commission the photographs which we made. I think had we had those opportunities, some of the confusion and difficulties which seem to have arisen might not have arisen.

I will be pleased to answer any other questions from you, sir, or any other members of the committee.

Chairman STOKES. Dr. Humes, we certainly want to say to you, I think all of us can understand the very trying circumstances and conditions under which you were called into action after this very tragic event, and we are indeed appreciative of the testimony that you have given here this afternoon and the other cooperation you have shown with our panel.

For that, we, at this time, wish to thank you very much, and you are now excused.

Dr. HUMES. Thank you, Mr. Chairman, I appreciate the opportunity to be of help.

Chairman STOKES. Thank you.

The Chair recognizes Professor Blakey.

**NARRATION BY G. ROBERT BLAKEY, CHIEF COUNSEL AND  
STAFF DIRECTOR**

Mr. BLAKEY. Thank you, Mr. Chairman.

Our next witness, the one dissenting member of the autopsy panel, Dr. Cyril Wecht, received an M.D. degree from the University of Pittsburgh School of Medicine in 1956 and an LL. B. from the University of Maryland School of Law in 1962, and a J.D. from the University of Pittsburgh School of Law in 1962.

Dr. Wecht currently serves as coroner of Allegheny County, Pa. He holds numerous editorial positions on the boards of medical and legal publications, and he has written on a wide variety of medical and legal subjects, and in particular, the assassination of President Kennedy.

It would be appropriate at this time, Mr. Chairman, to call Dr. Wecht.

Chairman STOKES. The committee calls Dr. Wecht.

Will you please stand and raise your right hand to be sworn?

You solemnly swear the testimony you will give before this committee is the truth, the whole truth, and nothing but the truth, so help you God,

Dr. WECHT. I do.

**TESTIMONY OF DR. CYRIL H. WECHT, CORONER, ALLEGHENY  
COUNTY, PA.**

Chairman STOKES. Thank you. You may be seated.

The Chair recognizes staff counsel, Donald A. Purdy, Jr.

Mr. PURDY. Thank you, Mr. Chairman.

Dr. Wecht, did you request to testify today?

Dr. WECHT. Yes, I did.

Mr. PURDY. Dr. Wecht, what are the major conclusions of the forensic pathology panel with which you are in disagreement?

Dr. WECHT. The major disagreement is the single-bullet theory which I deem to be the very essence of the Warren Commission report's conclusions and all the other corroborating panels and groups since that time.

It is the sine qua non of the Warren Commission report's conclusions vis-a-vis a sole assassin. Without the single-bullet theory, there cannot be one assassin, whether it is Oswald or anybody else.

I am in disagreement with various other conclusions of the panel. I am most unhappy and have been extremely dismayed by their failure to insist upon the performance of appropriate experi-