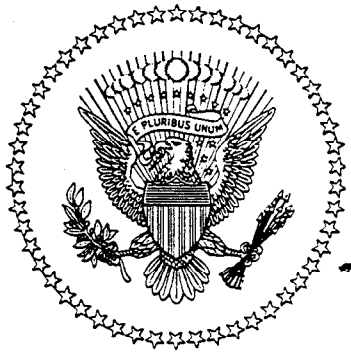


REPORT OF
THE PRESIDENT'S COMMISSION ON THE
ASSASSINATION OF
President John F. Kennedy



UNITED STATES
GOVERNMENT PRINTING OFFICE
WASHINGTON, D.C.

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John F. Kennedy -
 BIRTH AND BLOOD 22 Nov 63 DOCTOR:
 13⁰⁰ to 13⁰² hrs -

A Teacher's Day was being celebrated
by Mr. Percy, Carter and 20° Chas. Law
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was being given. Mr. Van Hatten is
making the people who should be
and not see. In 1900 were changed
to 1901 and the night was celebrated on
off.

The Truck was completed and I
added the end-truck and took a little
of the load into ground at the end -
The machine was used to measure the
load. The truck was passed into the station
at the same time.

561

ADMISSION NOTE

The 4th morning, there is a lot of snow
and the ground is frozen. The weather is
very cold and the wind is very strong. The
ground is very hard and the snow is very
deep. The ground is very hard and the snow
is very deep.

The 5th morning, there is a lot of snow
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very cold and the wind is very strong. The
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very cold and the wind is very strong. The
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The 7th morning, there is a lot of snow
and the ground is frozen. The weather is
very cold and the wind is very strong. The
ground is very hard and the snow is very
deep. The ground is very hard and the snow
is very deep.

J. J. Smith and

22 Nov 1963

1615 hrs -

531

COMMISSION EXHIBIT No. 392—Continued

REPORT OF
THE PRESIDENT'S COMMISSION ON THE
ASSASSINATION OF
President John F. Kennedy



UNITED STATES
GOVERNMENT PRINTING OFFICE
WASHINGTON, D.C.

000458

SUMMARY

The President arrived at the Emergency Room at 12:48 P.M., the 22nd of November, 1963. He was in the back seat of his limousine. Governor Connally of Texas was also in this car. The first physician to see the President was Dr. James Carrico, a Resident in General Surgery.

Dr. Carrico noted the President to have slow, agonal respiratory efforts. He could hear a heartbeat but found no pulse or blood pressure to be present. Two external wounds, one in the lower third of the anterior neck, the other in the occipital region of the skull, were noted. Through the head wound, blood and brain were extruding. Dr. Carrico inserted a cuffed endotracheal tube. While doing so, he noted a ragged wound of the trachea immediately below the larynx.

At this time, Dr. Malcolm Perry, Attending Surgeon, Dr. Charles Baxter, Attending Surgeon, and Dr. Ronald Jones, another Resident in General Surgery, arrived. Immediately thereafter, Dr. M. T. Jenkins, Director of the Department of Anesthesia, and Doctors Giesecke and Hunt, two other Staff Anesthesiologists, arrived. The endotracheal tube had been connected to a Bennett respirator to assist the President's breathing. An Anesthesia machine was substituted for this by Dr. Jenkins. Only 100% oxygen was administered.

A cutdown was performed in the right ankle, and a polyethylene catheter inserted in the vein. An infusion of lactated Ringer's solution was begun. Blood was drawn for type and crossmatch, but unmatched type "O" RE negative blood was immediately obtained and begun. Hydrocortisone 300 mgms was added to the intravenous fluids.

Dr. Robert McClelland, Attending Surgeon, arrived to help in the President's care. Doctors Perry, Baxter, and McClelland began a tracheostomy, as considerable quantities of blood were present from the President's oral pharynx. At this time, Dr. Paul Peters, Attending Urological Surgeon, and Dr. Kemp Clark, Director of Neurological Surgery, arrived. Because of the lacerated

SUMMARY
Page 2

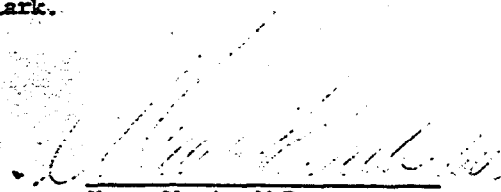
trachea, anterior chest tubes were placed in both pleural spaces. These were connected to sealed underwater drainage.

Neurological examination revealed the President's pupils to be widely dilated and fixed to light. His eyes were divergent, being deviated outward; a skew deviation from the horizontal was present. No deep tendon reflexes or spontaneous movements were found.

There was a large wound in the right occipitoparietal region, from which profuse bleeding was occurring. 1500 cc. of blood were estimated on the drapes and floor of the Emergency Operating Room. There was considerable loss of scalp and bone tissue. Both cerebral and cerebellar tissue were extruding from the wound.

Further examination was not possible as cardiac arrest occurred at this point. Closed chest cardiac massage was begun by Dr. Clark. A pulse palpable in both the carotid and femoral arteries was obtained. Dr. Perry relieved on the cardiac massage while a cardiograph was connected. Dr. Fouad Bashour, Attending Physician, arrived as this was being connected. There was electrical silence of the President's heart.

President Kennedy was pronounced dead at 1300 hours by Dr. Clark.


Kemp Clark, M.D.
Director
Service of Neurological Surgery

KC:aa

cc to Dean's Office, Southwestern Medical School
cc to Medical Records, Parkland Memorial Hospital

COMMISSION EXHIBIT No. 392—Continued

INVESTIGATION OF
THE ASSASSINATION OF PRESIDENT JOHN F. KENNEDY

HEARINGS
Before the President's Commission
on the Assassination
of President Kennedy

PURSUANT TO EXECUTIVE ORDER 11130, an Executive order creating a Commission to ascertain, evaluate, and report upon the facts relating to the assassination of the late President John F. Kennedy and the subsequent violent death of the man charged with the assassination and S.J. RES. 137, 88TH CONGRESS, a concurrent resolution conferring upon the Commission the power to administer oaths and affirmations, examine witnesses, receive evidence, and issue subpoenas

Volume

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UNITED STATES GOVERNMENT PRINTING OFFICE

WASHINGTON, D.C.

000461

Mr. SPECTER. Have you set forth here today the same information which you gave to the FBI?

Dr. PERRY. Yes, I think this is considerably in more detail, being essentially the same thing.

Mr. SPECTER. Have you now told me about all of the talks you have had with representatives of the Federal Government prior to today?

Dr. PERRY. I think I have.

Mr. SPECTER. And did you and I sit down and talk about the purpose of this deposition and the questions which I would be asking you on the record, before this deposition started?

Dr. PERRY. Yes; we did.

Mr. SPECTER. And did you give me the same information which you provided on the record here today?

Dr. PERRY. I have.

Mr. SPECTER. Do you have anything to add which you think might be helpful in any way to the President's Commission?

Dr. PERRY. No, sir.

Mr. SPECTER. Dr. Perry, we appreciate your coming for your deposition today, and I have given you a letter requesting your presence in Washington on Monday morning at 9 o'clock and I would ask you, for the record, to acknowledge receipt of letter, if you will, please.

Dr. PERRY. Yes; I have the letter here and I will be there.

Mr. SPECTER. Thank you, very much, sir. Let me ask you one more question, Dr. Perry, for the record, before we terminate this deposition. What experience have you had, if any, with gunshot wounds?

Dr. PERRY. I think in the course of my training here at Parkland, which is a city-county hospital and handles the great majority of the trauma cases that occur in Dallas County, that I have seen a fairly considerable number of traumatic wounds caused by knives, automobile accidents, gunshot wounds of various types.

Mr. SPECTER. Have you had any experience with gunshot wounds, in addition to that obtained here at Parkland?

Dr. PERRY. You mean, in the service?

Mr. SPECTER. Yes, sir.

Dr. PERRY. No, I had occasion to see only one gunshot wound while I was in the service.

Mr. SPECTER. Can you estimate how many gunshot wounds you have seen while you have been at Parkland?

Dr. PERRY. Probably it would be numbered in the hundreds.

Mr. SPECTER. Have you had any formal training in ballistics?

Dr. PERRY. No, other than the fact that I do some hunting and amateur hand loader.

Mr. SPECTER. Amateur what?

Dr. PERRY. Amateur hand loader—hand load ammunition.

Mr. SPECTER. Thank you very much.

Dr. PERRY. All right. Thank you.

W. Kemp Clark
Kemp Clark

TESTIMONY OF DR. WILLIAM KEMP CLARK

a 3-25-1964

The testimony of Dr. William Kemp Clark was taken at 11:50 a.m., on March 21, 1964, at Parkland Memorial Hospital, Dallas, Tex., by Mr. Arlen Specter, assistant counsel of the President's Commission.

Mr. SPECTER. Would you stand up please, Dr. Clark, and raise your right hand?

Do you solemnly swear that the testimony you will give before the President's Commission on the Assassination of President Kennedy in this deposition

proceeding will be the truth, the whole truth, and nothing but the truth, so help you God?

Dr. CLARK. I do.

Mr. SPECTER. You may be seated.

Dr. CLARK. Thank you.

Mr. SPECTER. The President's Commission is investigating all facts related to the Assassination of President Kennedy, and you have been asked to testify in this deposition proceeding relating to the medical treatment received by President Kennedy at Parkland Memorial Hospital and all facts incident thereto.

Dr. Clark, have you received a letter from the President's Commission enclosing a copy of the Executive Order establishing the Commission and a copy of a Senate and House Joint Resolution about the Commission, and a letter relating to the taking of testimony by the Commission?

Dr. CLARK. I have.

Mr. SPECTER. And are you willing to proceed with this deposition today, even though 3 days have not elapsed between the time you received the letter and this morning?

Dr. CLARK. Yes.

Mr. SPECTER. Would you state your full name for the record, please?

Dr. CLARK. William Kemp Clark.

Mr. SPECTER. Will you outline in a general way your educational background, please?

Dr. CLARK. Yes. I graduated from the University of Texas in Austin, 1944. I graduated from the University of Texas Medical Branch at Galveston in 1948. I interned at Indiana University Medical Center and was a resident in surgery there from 1948 to 1950. I spent 2 years in the Air Force and then took my residency in neurological surgery at Columbia Presbyterian Hospital in New York City. This was from 1953 to 1956, at which time I came to the University of Texas, Southwestern Medical School, as chairman of the division of neurological surgery.

Would you like the professional qualifications?

Mr. SPECTER. Yes; may I have the professional qualifications in summary form, if you will, please.

Dr. CLARK. I am board certified by the American Board of Neurological Surgery. I am a Fellow with the American College of Surgeons. I am a member of the Harvey Cushing Society.

Mr. SPECTER. What is the Harvey Cushing Society, by the way?

Dr. CLARK. It is the largest society of neurological surgeons in the world.

Mr. SPECTER. And what do your duties consist of with respect to the Southwestern Medical School of the University of Texas?

Dr. CLARK. I am in charge of the division of neurological surgery and carry the responsibility of administering this department or this division, to arrange the instruction of medical students in neurological surgery and to conduct research in this field.

Mr. SPECTER. What were your duties back on November 22, 1963?

Dr. CLARK. Essentially these. I also, as chairman of the division, have the responsibility as director of neurological surgery at Parkland Memorial Hospital which is the major teaching hospital of the medical school.

Mr. SPECTER. Did you receive notification on November 22, 1963, that the President had been wounded and was en route to this hospital?

Dr. CLARK. Yes, sir; I did.

Mr. SPECTER. Do you know at approximately what time you got that notification?

Dr. CLARK. Approximately 12:20 or 12:30.

Mr. SPECTER. And what action, if any, did you take as a result of receiving that notification?

Dr. CLARK. I went immediately to the emergency room at Parkland Hospital. I was in the laboratory at Southwestern Medical School when this word reached me by phone from the hospital.

Mr. SPECTER. And at approximately what time did you then arrive at the emergency room?

Dr. CLARK. I would estimate it took a minute and a half to two minutes, so I would guess that I arrived approximately 12:30.

Mr. SPECTER. And who was present, if anyone, upon your arrival, attending to the President?

Dr. CLARK. Dr. Jenkins, that is M. T. Jenkins, I suppose I ought to say, Dr. Ronald Jones, Dr. Malcolm Perry, Dr. James Carrico; arriving either with me or immediately thereafter were Dr. Robert McClelland, Dr. Paul Peters, and Dr. Charles Baxter.

Mr. SPECTER. What did you observe the President's condition to be on your arrival there?

Dr. CLARK. The President was lying on his back on the emergency cart. Dr. Perry was performing a tracheotomy. There were chest tubes being inserted. Dr. Jenkins was assisting the President's respirations through a tube in his trachea. Dr. Jones and Dr. Carrico were administering fluids and blood intravenously. The President was making a few spasmodic respiratory efforts. I assisted in withdrawing the endotracheal tube from the throat as Dr. Perry was then ready to insert the tracheotomy tube. I then examined the President briefly.

My findings showed his pupils were widely dilated, did not react to light, and his eyes were deviated outward with a slight skew deviation.

I then examined the wound in the back of the President's head. This was a large, gaping wound in the right posterior part, with cerebral and cerebellar tissue being damaged and exposed. There was considerable blood loss evident on the carriage, the floor, and the clothing of some of the people present. I would estimate 1,500 cc. of blood being present.

As I was examining the President's wound, I felt for a carotid pulse and felt none. Therefore, I began external cardiac massage and asked that a cardiotoscope be connected. Because of my position it was difficult to administer cardiac massage. However, Dr. Jones stated that he felt a femoral pulse.

Mr. SPECTER. What is a femoral pulse?

Dr. CLARK. A femoral artery is the main artery going to the legs, and at the junction of the leg and the trunk you can feel the arterial pulsation in this artery. Because of my position, cardiac massage was taken over by Dr. Malcolm Perry, who was more advantageously situated.

Mr. SPECTER. What did the cardiotoscope show at that time?

Dr. CLARK. By this time the cardiotoscope, we just call it a cardiac monitor for a better word—

Mr. SPECTER. That's a good word.

Dr. CLARK. The cardiotoscope had been attached and Dr. Fouad Bashour had arrived. There was transient electrical activity of the President's heart of an undefined type. Approximately, at this time the external cardiac massage became ineffectual and no pulsations could be felt. At this time it was decided to pronounce the President dead.

Mr. SPECTER. At what time was this fixed?

Dr. CLARK. Death was fixed at 1 p.m.

Mr. SPECTER. Was that a precise time or an approximate time, or in what way did you fix the time of death at 1 o'clock?

Dr. CLARK. This was an approximation as it is, first, extremely difficult to state precisely when death occurs. Secondly, no one was monitoring the clock, so an approximation of 1 o'clock was chosen.

Mr. SPECTER. Who was it who actually fixed the time of death?

Dr. CLARK. I did.

Mr. SPECTER. And did you have any part in the filling out of the death certificate?

Dr. CLARK. Yes.

Mr. SPECTER. And what did you do with respect to that?

Dr. CLARK. I filled out the death certificate at the request of Dr. George Burkley, the President's physician at the White House, signed the death certificate as a registered physician in the State of Texas, and gave this to him to accompany the body to Washington.

Mr. SPECTER. Did you advise anyone else in the Presidential party of the death of the President?

Dr. CLARK. Yes; I told Mrs. Kennedy, the President's wife, of his death.

Mr. SPECTER. And what, if anything, did she respond to you?

Dr. CLARK. She told me that she knew it and thanked me for our efforts.

Mr. SPECTER. Were any bullets or parts of bullets found in the President's body?

Dr. CLARK. Not by me, nor did I see any such missiles recovered at Parkland Hospital.

Mr. SPECTER. Were you a part of any press conference which followed on the day of the assassination?

Dr. CLARK. Yes, sir; I was.

Mr. SPECTER. And who made the arrangements for the press conference?

Dr. CLARK. Mr. Malcolm Kilduff, the Presidential press secretary.

Mr. SPECTER. At what time did the press conference occur?

Dr. CLARK. Approximately 2:30.

Mr. SPECTER. Where was it held?

Dr. CLARK. It was held in room 101-102, Parkland Hospital.

Mr. SPECTER. What mechanical instruments were used, if any, by the press at the conference?

Dr. CLARK. Tape recorders and television cameras, as well as the usual note pads and pencils, and so forth.

Mr. SPECTER. And who was interviewed during the course of the press conference and photographed?

Dr. CLARK. Dr. Malcolm Perry and myself.

Mr. SPECTER. No one else?

Dr. CLARK. No.

Mr. SPECTER. What, if anything, did you say then in the course of that press conference?

Dr. CLARK. I described the President's wound in his head in very much the same way as I have described it here. I was asked if this wound was an entrance wound, an exit wound, or what, and I said it could be an exit wound, but I felt it was a tangential wound.

Mr. SPECTER. Which wound did you refer to at this time?

Dr. CLARK. The wound in the head.

Mr. SPECTER. Did you describe at that time what you meant by "tangential"?

Dr. CLARK. Yes, sir; I did.

Mr. SPECTER. What definition of "tangential" did you make at that time?

Dr. CLARK. As I remember, I defined the word "tangential" as being—striking an object obliquely, not squarely or head on.

Mr. SPECTER. Will you describe at this time in somewhat greater detail the consequences of a tangential wound as contrasted with another type of a striking?

Dr. CLARK. Let me begin by saying that the damage suffered by an organ when struck by a bullet or other missile—

Mr. SPECTER. May the record show that I interrupted the deposition for about 2 minutes to ascertain what our afternoon schedule would be here because the regular administration office ordinarily closes at 12 o'clock, which was just about 15 minutes ago, and then we resumed the deposition of Dr. Clark as he was discussing the concept of tangential and other types of striking.

Go ahead, Doctor.

Dr. CLARK. The effects of any missile striking an organ or a function of the energy which is shed by the missile in passing through this organ when a bullet strikes the head, if it is able to pass through rapidly without shedding any energy into the brain, little damage results, other than that part of the brain which is directly penetrated by the missile. However, if it strikes the skull at an angle, it must then penetrate much more bone than normal, therefore, is likely to shed more energy, striking the brain a more powerful blow.

Secondly, in striking the bone in this manner, it may cause pieces of the bone to be blown into the brain and thus act as secondary missiles. Finally, the bullet itself may be deformed and deflected so that it would go through or penetrate parts of the brain, not in the usual direct line it was proceeding.

Mr. SPECTER. Now, referring back to the press conference, did you define a tangential wound at that time?

Dr. CLARK. Yes.

Mr. SPECTER. And what else did you state at the press conference at 2:30 on November 22?

Dr. CLARK. I stated that the President had lost considerable blood, that one of the contributing causes of death was this massive blood loss, that I was unable to state how many wounds the President had sustained or from what angle they could have come.

I finally remember stating that the President's wound was obviously a massive one and was insurvivable.

Mr. SPECTER. What did Dr. Perry say at that time, during the course of that press conference, when the cameras were operating?

Dr. CLARK. As I recall, Dr. Perry stated that there was a small wound in the President's throat, that he made the incision for the tracheotomy through this wound. He discovered that the trachea was deviated so he felt that the missile had entered the President's chest. He asked for chest tubes then to be placed in the pleural cavities. He was asked if this wound in the throat was an entrance wound or an exit wound. He said it was small and clean so it could have been an entrance wound.

Mr. SPECTER. Did he say anything else that you can recollect now in response to the question of whether it was a wound of entrance or exit?

Dr. CLARK. No, sir; I cannot recall.

Mr. SPECTER. Were you a part of a second press conference, Dr. Clark?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And when did that second press conference occur?

Dr. CLARK. On Saturday, the 23d.

Mr. SPECTER. At about what time?

Dr. CLARK. Sometime in the morning, as I recall.

Mr. SPECTER. Going back to the first press conference for just a minute, which television networks were involved on that?

Dr. CLARK. Without sounding facetious, everyone, including some I had never heard of.

Mr. SPECTER. Can you recollect any besides the three major networks—ABC, CBS, and NBC?

Dr. CLARK. This is all I remember. I remember seeing in the room two reporters from Dallas newspapers whom I know and the radio and television stations were also present.

Mr. SPECTER. Now, going back to the second conference which I had started asking you about, had you had an opportunity to tell me what time of day that was?

Dr. CLARK. It was in the morning, as I recall.

Mr. SPECTER. And what television stations or networks were involved in that conference?

Dr. CLARK. Again, all three major networks, and I believe through our local affiliates. It does not seem as though this one was as jammed and as full as the first one.

Mr. SPECTER. And who arranged that press conference?

Dr. CLARK. That press conference was arranged by Mr. Steve Landregan, assistant administrator and public relations officer for the hospital. This is his office.

Mr. SPECTER. And who spoke at that press conference while the television cameras were grinding?

Dr. CLARK. Dr. Perry and myself.

Mr. SPECTER. And what did you say at that time?

Dr. CLARK. Essentially the same thing as I had on the first press conference, again defining tangential, and again describing the President's wound as being massive and unsurvivable.

Mr. SPECTER. And what did Dr. Perry, at that time, say?

Dr. CLARK. Dr. Perry said very little. He described the President's condition as he first saw him, when he was first called, and he described the manner in which he was called to the emergency room.

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Mr. SPECTER. Did he say anything about whether the neck wound was a point of entry or exit?

Dr. CLARK. I do not remember—I specifically discussed this—may I add something to what I said in the first press conference?

Mr. SPECTER. Yes; please do, if you find something that comes to mind, please feel free to add that.

Dr. CLARK. All right. Let me check what I remember Dr. Perry said at the first press conference. He was asked if the neck wound could be a wound of entrance or appeared to be a wound of exit, and Dr. Perry said something like "possibly or conceivably," or something of this sort.

Mr. SPECTER. And, did he elaborate as to how that projectory would have been possible in that press conference?

Dr. CLARK. He did not elaborate on this. One of the reporters with gestures indicated the direction that such a bullet would have to take, and Dr. Perry quite obviously had to agree that this is the way it had to go to get from there to the top of his head.

Mr. SPECTER. But that was a possible trajectory under the circumstances?

Dr. CLARK. Yes.

Mr. SPECTER. How would that have been postulated in terms of striking specific parts of the body?

Dr. CLARK. Well, on a speculation, this would mean that the missile would have had to have been fired from below—upward or that the President was hanging upside down.

Mr. SPECTER. Did Dr. Perry discuss anything with you prior to that second conference about a telephone call from Washington, D.C.?

Dr. CLARK. Yes; he did.

Mr. SPECTER. Would you relate briefly what Dr. Perry told you about that subject?

Dr. CLARK. Yes; Dr. Perry stated that he had talked to the Bethesda Naval Hospital on two occasions that morning and that he knew what the autopsy findings had shown and that he did not wish to be questioned by the press, as he had been asked by Bethesda to confine his remarks to that which he knew from having examined the President, and suggested that the major part of this press conference be conducted by me.

Mr. SPECTER. Was anyone else present when he expressed those thoughts to you?

Dr. CLARK. I believe that Mr. Price and Dr. Shires were present. I could be wrong on that.

Mr. SPECTER. Now, were you a part of a third press conference?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And when did that occur?

Dr. CLARK. During the following week—I have forgotten exactly the day.

Mr. SPECTER. And what networks were involved at that time?

Dr. CLARK. It was CBS.

Mr. SPECTER. Was that a television conference?

Dr. CLARK. Yes; this was filmed.

Mr. SPECTER. And who arranged that conference?

Dr. CLARK. Again, Mr. Landregan.

Mr. SPECTER. And who spoke at that conference?

Dr. CLARK. Dr. Shaw, Dr. Shires, Dr. Baxter, Dr. McClelland, Dr. Jenkins, Dr. Gieseke, and myself.

Mr. SPECTER. Was Dr. Perry there at that time?

Dr. CLARK. Yes; Dr. Perry was there.

Mr. SPECTER. Would you outline briefly what you said at that time, if it differed in any way from what you said before?

Dr. CLARK. No, sir; it did not.

Mr. SPECTER. What did Dr. Perry say at that time?

Dr. CLARK. Essentially the same thing that he had said before, describing the wound in the throat, describing the condition of the President, how he was called and so forth.

Mr. SPECTER. Did he comment at that time as to whether it was an entrance wound or an exit wound or what?

Dr. CLARK. I don't remember.

Mr. SPECTER. And what did Dr. Shaw say at that time?

Dr. CLARK. Dr. Shaw described Governor Connally's chest wound. He described what was done for him, the operation in some detail. He described the fact that Governor Connally was conscious up until the time he was anesthetized in the operating room.

Mr. SPECTER. And what did Dr. Shires say at that time?

Dr. CLARK. Dr. Shires described the wounds suffered by Oswald and what was done in an attempt to save him.

Mr. SPECTER. And how about Dr. Gieseke, what did he say?

Dr. CLARK. Dr. Gieseke corroborated Dr. Shaw's statements regarding Governor Connally's condition and his remaining conscious until he was anesthetized by Dr. Gieseke.

Mr. SPECTER. What did Dr. Baxter say at that conference?

Dr. CLARK. Dr. Baxter described President Kennedy's condition as he saw it, stated that he had assisted in the placing in the chest tubes on President Kennedy, and that he had been present at Oswald's operation.

Mr. SPECTER. Did Dr. Baxter describe the neck wound that President Kennedy suffered with specific respect as to whether it was point of entry or exit?

Dr. CLARK. I don't remember—I don't believe he did.

Mr. SPECTER. Now, have we covered all the doctors who spoke at that press conference?

Dr. CLARK. Except Dr. Jenkins.

Mr. SPECTER. And what did Dr. Jenkins say at that time?

Dr. CLARK. Dr. Jenkins described being called to attend President Kennedy, how he got there with his anesthesia machine, that he found an endotrachea tube had already been inserted. He hooked up and he described the activities in the emergency room, operating room No. 1, and he described the stopping of the President's heart and the decision to pronounce him dead. He went ahead to describe the operation on Mr. Oswald and the extent of blood loss, etc., which he had sustained.

Mr. SPECTER. Now, were you involved in still a subsequent press conference?

Dr. CLARK. Yes, sir; I was.

Mr. SPECTER. And with whom was that press conference?

Dr. CLARK. This was with NBC and was approximately 2 weeks after the assassination.

Mr. SPECTER. And who arranged that press conference?

Dr. CLARK. Mr. Landregan.

Mr. SPECTER. And was that filmed?

Dr. CLARK. Yes, that was also filmed.

Mr. SPECTER. And who spoke at that time?

Dr. CLARK. I spoke alone as a representative of the department and so stated in the conference.

Mr. SPECTER. And what did you say at that time?

Dr. CLARK. Essentially the same thing as had been stated before.

Mr. SPECTER. Now, were you a part of still another press conference?

Dr. CLARK. Yes.

Mr. SPECTER. When was that?

Dr. CLARK. The week after the assassination.

Mr. SPECTER. And with whom was that press conference?

Dr. CLARK. With BBC.

Mr. SPECTER. Who arranged that?

Dr. CLARK. Mr. Landregan, again.

Mr. SPECTER. And did anyone else participate in that press conference with you?

Dr. CLARK. No.

Mr. SPECTER. And was that televised, filmed, or simply recorded?

Dr. CLARK. It was simply recorded.

Mr. SPECTER. And what did you say at that time?

Dr. CLARK. Exactly the same thing as I have said at the previous conferences, describing the President's condition, his wound, and what transpired after I arrived.

Mr. SPECTER. At any of the press conferences were you asked about a hole on the left side of the President's head?

Dr. CLARK. Yes.

Mr. SPECTER. At which conference or conferences?

Dr. CLARK. I was asked about this at the CBS conference and I stated that I personally saw no such wound.

Mr. SPECTER. And who asked you about it at that time, if you recall?

Dr. CLARK. The man who was conducting the conference. This was brought up by one of the physicians, I think Dr. McClelland, that there was some discussion of such a wound.

Mr. SPECTER. Did Dr. McClelland say that he had seen such a wound?

Dr. CLARK. No.

Mr. SPECTER. What was the origin, if you know, as to the inquiry on the wound, that is, who suggested that there might have been a wound on the left side?

Dr. CLARK. I don't recall—I don't recall.

Mr. SPECTER. Had there been some comment that the priests made a comment that there was a wound on the left side of the head?

Dr. CLARK. I heard this subsequently from one of the reporters who attended the press conference with NBC.

Mr. SPECTER. Were priests actually in trauma room 1?

Dr. CLARK. Yes, sir.

Mr. SPECTER. Where were they in relation to the President at that time?

Dr. CLARK. They were on the right side of the President's body.

Mr. SPECTER. Now, you described the massive wound at the top of the President's head, with the brain protruding; did you observe any other hole or wound on the President's head?

Dr. CLARK. No, sir; I did not.

Mr. SPECTER. Did you observe, to make my question very specific, a bullet hole or what appeared to be a bullet hole in the posterior scalp, approximately 2.5 cm. laterally to the right, slightly above the external occipital protuberant, measuring 15 by 6 mm.

Dr. CLARK. No, sir; I did not. This could have easily been hidden in the blood and hair.

Mr. SPECTER. Did you observe any bullet wounds or any other wound on the back side of the President?

Dr. CLARK. No, sir; I did not.

Mr. SPECTER. Was the President ever turned over while he was in the emergency room?

Dr. CLARK. Not in my presence; no, sir.

Mr. SPECTER. And did you leave before, with, or after all the other doctors who were in attendance?

Dr. CLARK. I left after all the other doctors who were in attendance, because I stayed with Dr. Burkley until we had the death certificate signed and the arrangements had been made to transport the President's body out of Parkland Hospital.

Mr. SPECTER. You say Dr. Burkley or Buckley?

Dr. CLARK. Dr. Burkley.

Mr. SPECTER. That's the President's private physician?

Dr. CLARK. Yes.

Mr. SPECTER. Dr. Clark, would your observations be consistent with some other alleged facts in this matter, such as the presence of a lateral wound measuring 15 by 6 mm. on the posterior scalp approximately 2.5 cm. laterally to the right and slightly above the external occipital protuberant—that is to say, could such a hole have been present without your observing it?

Dr. CLARK. Yes, in the presence of this much destruction of skull and scalp above such a wound and lateral to it and the brief period of time available for examination—yes, such a wound could be present.

Mr. SPECTER. The physicians, surgeons who examined the President at the autopsy specifically, Commander James J. Humes, H-u-m-e-s (spelling); Commander J. Thornton Boswell, B-o-s-w-e-l-l (spelling), and Lt. Col. Pierre A. Finck, F-i-n-c-k (spelling), expressed the joint opinion that the wound which

I have just described as being 15 by 6 mm. and 2.5 cm. to the right and slightly above the external occipital protuberant was a point of entrance of a bullet in the President's head at a time when the President's head was moved slightly forward with his chin dropping into his chest, when he was riding in an open car at a slightly downhill position. With those facts being supplied to them in a hypothetical fashion, they concluded that the bullet would have taken a more or less straight course, exiting from the center of the President's skull at a point indicated by an opening from three portions of the skull reconstructed, which had been brought to them—would those findings and those conclusions be consistent with your observations if you assumed the additional facts which I have brought to your attention, in addition to those which you have personally observed?

Dr. CLARK. Yes, sir.

Mr. SPECTER. Dr. Clark, in the line of your specialty, could you comment as to the status of the President with respect to competency, had he been able to survive the head injuries which you have described and the total wound which he had?

Dr. CLARK. This, of course, is a question of tremendous importance. Just let me state that the loss of cerebellar tissue would probably have been of minimal consequence in the performance of his duties. The loss of the right occipital and probably part of the right parietal lobes would have been of specific importance. This would have led to a visual field deficit, which would have interfered in a major way with his ability to read, not the interpretation of reading matter per se, but the acquisition of information from the printed page. He would have had specific difficulty with finding the next line in a book or paper. This would have proven to be a specific handicap in getting information on which, as the President of the United States, he would have to act.

How much damage he would have had to his motor system, that is, the ability to control or coordinate his left extremities, I would not know. This conceivably could have been a problem in enabling him to move about, to appear in public, et cetera. Finally, and probably most important, since the brain, as far as at its higher levels, largely as a unit, the loss of this much brain tissue likely would have impaired his ability in abstract reasoning, imagination; whereas, the part of the President's brain struck is not that part specifically concerned with these matters. The effect of loss of considerable brain tissue does affect the total performance of the organ in these matters. There would be grave doubts in my mind as to our ability as physicians to give a clear answer regarding his ability to function as President of the United States.

Our ability to judge this is sometimes sorely tried when dealing with people with considerably less intellectual and moral demands made upon them.

Mr. SPECTER. Doctor, did you prepare certain written reports based on your participation in the treatment of President Kennedy?

Dr. CLARK. Yes, sir; I did.

Mr. SPECTER. And I now show you a document which has been supplied to the President's Commission, which we have marked as Commission Exhibit No. 392, and I now show you the second and third sheets, which purport to be the summary made by you and ask if that was prepared by you?

Dr. CLARK. Yes, sir; it was.

Mr. SPECTER. And, are the facts set forth in those two sheets true and correct?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And I now show you a 2¾-page summary which purports to bear your signature, being dated November 22, 1963, and I ask you if that, in fact, is your signature?

Dr. CLARK. Yes; it is.

Mr. SPECTER. And, was, in fact, this report made in your own hand concerning the treatment which you rendered to the President?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And are the facts set forth therein true and correct?

Dr. CLARK. Yes, sir.

Mr. SPECTER. Have you made any other written report or other writings of any sort concerning this matter?

Dr. CLARK. No; I have not.

Mr. SPECTER. Have you been interviewed or discussed this matter with any Federal representative prior to today?

Dr. CLARK. Yes, sir; I have.

Mr. SPECTER. And whom did you talk to?

Dr. CLARK. I talked to an FBI agent a few days after the assassination, in Mr. Jack Price's office.

Mr. SPECTER. And who is Mr. Price, for the record at this point?

Dr. CLARK. He is the administrator of Parkland Memorial Hospital. This agent asked me if I had recovered any missiles or fragments of missiles from the President's body. I said I did not, and he asked me if I knew of anyone in Parkland Hospital who had recovered such evidence and I assured him I did not.

Mr. SPECTER. Did he ask you anything further?

Dr. CLARK. No, sir.

Mr. SPECTER. Did you tell him anything further?

Dr. CLARK. No, sir. I offered to answer any questions he might have asked and he said that was all he wished to know.

Mr. SPECTER. And did you talk to any other representative of the Federal Government at any time before today?

Dr. CLARK. Yes; I talked to a member of the Secret Service approximately a month after the assassination. I talked to him on two occasions, once by phone, and he asked me if I had a copy of the written report submitted by Dr. Ronald Jones, and I told him I did not.

I subsequently talked to him in person. He showed me the summary that I prepared and sent to Dr. Burkley, the same document I just identified here, and my own handwritten report of the events of the afternoon of the 22d of November. He asked me if I prepared these and I told him I had. He asked me if I had any other written records. I told him I did not. He said, "Do you have any additional information than you have written?" I said I did not. He thanked me very much for coming.

Mr. SPECTER. Have you now summarized all of the conversations you have had with any representative of the Federal Government prior to today?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And have you had any conversations with any representative of the State government prior to today?

Dr. CLARK. No, sir.

Mr. SPECTER. Before you were sworn in to have your deposition taken, did you and I have a discussion about this matter?

Dr. CLARK. Yes, sir; a pleasant discussion of what the function of this Commission is.

Mr. SPECTER. And, also, all of what I would be asking once the record was open and we started taking your deposition?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And have we covered on the record with the court reporter transcribing all the subjects which you and I discussed informally and prior to the start of the more formal session here?

Dr. CLARK. Yes, sir.

Mr. SPECTER. Do you have anything which you would care to add, which you think might possibly be helpful to the Commission in any way, Dr. Clark?

Dr. CLARK. No, sir; I'm afraid I don't.

Mr. SPECTER. Thank you very much for coming. We surely appreciate it, Dr. Clark. Thank you, Dr. Clark.

Dr. CLARK. Thank you.

TESTIMONY OF DR. KEMP CLARK RESUMED

The testimony of Dr. Kemp Clark was taken at 12:05 p.m., on March 25, 1964, at Parkland Memorial Hospital, Dallas, Tex., by Mr. Arlen Specter, assistant counsel of the President's Commission.

Mr. SPECTER. May the record show that Dr. Kemp Clark has returned to have a few additional questions asked of him following the deposition which was taken on March 21.

Dr. Clark, the purpose of this additional deposition is the same as the first one, except that I am going to ask you a few additional questions based upon translation of an article which appeared in "L' Express", which has been provided to me since the deposition of last Saturday.

Would you please stand up again and raise your right hand?

Do you solemnly swear that the testimony you will give before the President's Commission in this deposition proceeding will be the truth, the whole truth, and nothing but the truth, so help you God?

Dr. CLARK. I do.

Mr. SPECTER. Dr. Clark, I have made available to you, have I not, what purports to be a translation from French of the "L' Express" issue of February 20, 1964?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And let me read for the record and for you this excerpt.

"On his part according to the New York Times of November 27, 'Dr. Kemp Clark, who signed the Kennedy death certificate, declared that a bullet hit him right where the knot of his necktie was.' He added," apparently referring to you, " 'this bullet penetrated into his chest and did not come out'. The surgeon went on to say that the second wound of the President was 'tangential' and that it had been caused by a bullet which hit 'the right side of his head' "

Dr. Clark, my first question is—what, if anything, did you say to a New York Times representative or anyone, for that matter, with respect to whether a bullet hit the President where the knot of his necktie was.

Dr. CLARK. I remember using the phrase to describe the location of a wound in the President's throat as being at the point of his knot of his necktie. I do not recall ever specifically stating that this was an entrance wound, as has been said before. I was not present when the President arrived and did not see this wound. If any statement regarding its entrance or exit was made by me, it was indicating that there was a small wound described there by the physicians who first saw the President.

A specific quotation regarding entrance or exit, I feel, is a partial quotation or incompletely quoted from me. The part pertaining to the bullet entering the President's chest rests on the reasons for the placing of the chest tubes which were being inserted when I arrived. It was the assumption, based on the previously described deviation of the trachea and the presence of blood in the strap muscles of the neck that a wound or missile wound might have entered the President's chest.

Mr. SPECTER. Well, what was there, Dr. Clark, in the deviation of the trachea and the presence of blood in the strap muscles of the neck which so indicated?

Dr. CLARK. Assuming that a missile had entered the pleural space, if there had been bleeding into the pleural space, the trachea would have been deviated or had there been leakage of air into the pleural space, the trachea would have been deviated, as it is the main conduit of air to the two lungs. Collapse of a lung would have produced, or will produce deviation of the trachea. There being a wound in the throat, there being blood in the strap muscles and there being deviation of the trachea in the presence of a grievously wounded patient without opportunity for X-ray or other diagnostic measures, Dr. Perry assumed that the findings in the neck were due to penetration of the missile into the chest. For this reason, he requested chest tubes to be placed.

Mr. SPECTER. Well, is the deviation of the trachea and the presence of bleeding on the strap muscles of the neck and the other factors which you have recited equally consistent with a wound of exit on the neck?

Dr. CLARK. Yes, sir. Furthermore, let me say that the presence of the deviation of the trachea, with blood in the strap muscles, are by no means diagnostic of penetration of the chest, and the placing of the chest tubes was prophylactic had such an eventuality occurred.

Mr. SPECTER. Was there any external indication that there was a missile in the chest?

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Dr. CLARK. No, sir.

Mr. SPECTER. Was it the preliminary thought that the missile might have been in the chest by virtue of the fact that this wound was noted on the neck?

Dr. CLARK. Yes; with the other factors I have enumerated.

Mr. SPECTER. And at that time, not knowing what the angle might have been or any of the surrounding circumstances, then you proceeded to take precautionary measures as if there might have been a missile in the chest at some point?

Dr. CLARK. That is correct. Measures were taken, assuming the worst had happened.

Mr. SPECTER. As the quotation appears in the issue of "L' Express," "This bullet penetrated into his chest and did not come out," would that then be an accurate quotation of something that you said, Dr. Clark?

Dr. CLARK. No, sir.

Mr. SPECTER. Dr. Clark, while you are here again, I would like to ask you a few additional questions.

Let the record show that since I have taken your deposition, I have taken the depositions of many additional witnesses and none has been transcribed, so I am not in a position to refer to a record to see what I asked you before or to frankly recollect precisely what I asked you before, so, to some extent these questions may be overlapping.

Did you observe the President's back at that time when he was in the emergency room?

Dr. CLARK. No, sir.

Mr. SPECTER. What was the reason for your not looking at his back?

Dr. CLARK. First, the duration of time that the President was alive in the emergency room was a brief duration. All efforts were bent toward saving his life rather than inspection for precise location of wounds. After his death it was not our position to try to evaluate all of the conceivable organs or areas of the body, knowing that an autopsy would be performed and that this would be far more meaningful than a cursory external examination here.

Mr. SPECTER. Was there any bleeding wound in the President's back?

Dr. CLARK. In the back of his head.

Mr. SPECTER. But how about on the back of his body, was there any bleeding wound noted?

Dr. CLARK. Since we did not turn the President over, I cannot answer that specifically. We saw none, as I previously stated.

Mr. SPECTER. Did you undertake any action to ascertain whether there had been a violation to a major extent of the back part of his body?

Dr. CLARK. No, sir.

Mr. SPECTER. That is, none was taken by you personally?

Dr. CLARK. That's correct.

Mr. SPECTER. Dr. Carrico testified earlier today, being the first doctor to reach him, that he felt the President's back to determine whether there was any major violation of that area.

Would that be a customary action to take to ascertain whether there was any major wound, by the doctor who first examined the patient?

Dr. CLARK. Yes, sir.

Mr. SPECTER. Assuming that the President had a bullet wound of entry on the upper right posterior thorax, just above the upper border of the scapula, 14 cms. from the right acromion process, 14 cm. below the tip of the right mastoid process, would there have been a bloody type wound?

Dr. CLARK. I'm sorry—your question?

Mr. SPECTER. Would such a wound of entry by a missile traveling approximately 2,000 feet per second, approximately 6.5 mm. in diameter, cause a bloody type of a wound?

Dr. CLARK. No, sir. Such a wound could have easily been overlooked in the presence of the much larger wound in the right occipital region of the President's skull, from which considerable blood loss had occurred which stained the back of his head, neck and upper shoulders.

Mr. SPECTER. Dr. Clark, I want to ask you a question as it is raised here in "L' Express".

"How did the practitioner who signed the death certificate of the President fail to take the trouble to turn him over?"

Of course, that refers to you and will you give me your answer to that question, as the news media has posed it?

Dr. CLARK. Quite simply, as I previously stated, the duration of time the President was alive was occupied by attempts to save his life. When these failed, further examination of the patient's body was not done, as it was felt that little could be gained or learned that would be helpful in deciding the course of events leading up to his assassination, that is, examination by me, as I knew an autopsy would be performed which would be far more meaningful and revealing than any cursory external examination conducted in the emergency room by me.

Mr. SPECTER. Now, was the action taken by you in signing the death certificate based upon the examination which you made in accordance with what you believed to be good medical practice?

Dr. CLARK. Yes, sir.

Mr. SPECTER. So that the characterization here of "L' Express" that the failure to turn the President over would not constitute gross negligence in your professional judgment, as they have characterized it here.

Dr. CLARK. No, sir. One other point, if I may here?

Mr. SPECTER. Yes.

Dr. CLARK. In order to move the President's body to Bethesda where the autopsy was to be performed, a death certificate had to be filled out in conformance with Texas State law to allow the body to be transported. This is the second part of the signing of the death certificate.

Mr. SPECTER. Do you have anything to add, Dr. Clark, which you think might be helpful at all in the inquiry being made by the President's Commission?

Dr. CLARK. No; I don't think so.

Mr. SPECTER. And did you and I chat for just a moment or two about the questions I would ask you on this supplemental deposition before it went on the record?

Dr. CLARK. Yes, sir.

Mr. SPECTER. And have you talked to any representative of the Federal Government between the time I took your deposition last Saturday and this Wednesday morning?

Dr. CLARK. No, sir.

Mr. SPECTER. Thank you very much, Dr. Clark.

Dr. CLARK. All right.

Robert Nelson McClelland *Bob* *Robert Nelson McClelland*

TESTIMONY OF DR. ROBERT NELSON McCLELLAND

The testimony of Dr. Robert Nelson McClelland was taken on March 21, 1964, at Parkland Memorial Hospital, Dallas, Tex., by Mr. Arlen Specter, assistant counsel of the President's Commission. *UND 3-25-1964*

Mr. SPECTER. Will you raise your right hand?

Dr. McCLELLAND. Yes.

Mr. SPECTER. Do you solemnly swear that the testimony you give in these proceedings will be the truth, the whole truth, and nothing but the truth, so help you God?

Dr. McCLELLAND. I do.

Mr. SPECTER. Dr. McClelland, the purpose of this proceeding is to take your deposition in connection with an investigation which is being conducted by the President's Commission on the Assassination of President Kennedy, and the specific purpose of our requesting you to answer questions relates to the topic of the medical care which President Kennedy received at Parkland Memorial Hospital.

Dr. McClelland, will you tell us your full name for the record, please?

Dr. McCLELLAND. Robert Nelson McClelland.