

**EVALUATION OF THE MEDICAL, PATHOLOGICAL AND
RELATED EVIDENCE PERTAINING TO THE DEATH OF
PRESIDENT JOHN F. KENNEDY**

(BY THE FORENSIC PATHOLOGY PANEL)

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EVALUATION OF THE EVIDENCE

(191)* Dr. Loquvam prepared the initial draft and conclusions of this report. Subsequently it was redrafted and edited by Dr. Weston at the Center of Forensic and Environmental Science, School of Medicine, University of New Mexico, Albuquerque, N. Mex.

(203) The charge addressed to the members of the Panel within the appointing letter of August 8, 1977 was as follows:

1. To determine whether there are fundamental conclusions within the field of forensic pathology on which all or most of the consultants can agree;
2. To write a report containing descriptions and interpretations of the medical evidence and detailed explanations supporting any conclusions;
3. To compile recommendations regarding those matters deemed to be outside the expertise of forensic pathologists; and
4. To conduct a detailed, objective critique of the professional manner in which the autopsy on President Kennedy was conducted.

(204) In accordance with the wishes of the committee, this report is divided into several parts, as follows:

- I. Procedures followed by the forensic pathology panel;
- II. Recommendations for additional examinations, procedures and consultations by nonpathology disciplines;
- III. Observations and conclusions derived from the examination of the available evidence, interviews, specifically requested ancillary procedures, and consultations;
- IV. Critique of the earlier examination, with presentation of suggested procedures to be followed in performing an investigation and examination on the remains of a gunshot victim;
- V. Suggested procedures to be followed in the event of subsequent assassinations of Federal officials;
- VI. Dissenting view to the forensic pathology panel report, submitted by Cyril H. Wecht, M.D., J.D.
- VII. Majority response to the dissent of Cyril H. Wecht, M.D., J.D.
- VIII. Glossary of terms (those appearing in the glossary are denoted in the text by an asterisk (*)).

Various addenda and the footnotes follow part VIII.

PART I: PROCEDURES FOLLOWED BY THE FORENSIC PATHOLOGY PANEL

(205) The larger subpanel, which had not previously reviewed the medical evidence, convened initially on Sept. 15, 1977, at the House Office Building, Annex II; on Sept. 16 and 17, 1977 at the National Archives; and on Sept. 18, 1977, at the House Office Building, Annex II. The material listed in addendum A to this report was made available to the subpanel at the initial meeting. The material listed in addendum B was made available the second and third days at the National Archives.

*Paragraphs (192) to (202) represent duplicated materials.

(206) The second subpanel convened initially on Sept. 22, 1977, at the House Office Building, Annex II; and on the next day, Sept. 23, 1977, at the National Archives; and, subsequently at the House Office Building, Annex II. The material listed in addendum A was made available to this subpanel at the initial meeting. The material listed in addendum B was made available at the second meeting at the National Archives. All members of both subpanels were allowed unlimited access to these materials for individual examination.

(207) On September 17, members of the larger subpanel met with Drs. James J. Humes and J. Thornton Boswell, who had performed the autopsy on Nov. 22, 1963, and with Dr. J. Lawrence Angel, a forensic anthropologist with the Smithsonian Institution, to discuss the procedures followed during President Kennedy's autopsy and the degree of fragmentation of the President's skull. On Sept. 22, 1977, the second subpanel was afforded the opportunity to hear the tape recording of the interview of Drs. Humes and Boswell conducted by the first subpanel. Both subpanels were shown a film and slide presentation of the assassination prepared by Robert Groden, which included the Zapruder film.

(208) The larger subpanel met on the afternoon of Sept. 18, 1977, at the House Office Building, Annex II, to discuss the individual findings and to commit to writing its opinions relative to the evidence viewed. At that meeting, it became apparent that the members were in substantial agreement with respect to the interpretation of the evidence.

(209) Members of the other subpanel met on the afternoon of Sept. 24, 1977, at the House Office Building, Annex II, to discuss their findings and opinions relative to their examination and reexamination of the evidence. Members of this group, who had previously publicly expressed differing interpretations of the evidence, were not in agreement as to the interpretation of all the evidence.

(210) The two subpanels selected Dr. Loquvam and Dr. Weston, respectively, to draft preliminary working reports. Dr. Weston subsequently drafted a report that incorporated the views of both subpanels.

(211) The members of the subpanels met together on Friday, Mar. 10, 1978, at the National Archives. Drs. Weston, Loquvam, and Baden also met with members of the photographic evidence panel that day to review selected photographs that had been enhanced using a photographic reexposure* technique, as well as several other photographs arranged in pairs to permit stereoscopic visualization.* Following that, all members of the forensic pathology panel met with members of the photographic panel to hear presentations concerning the photographic panel's interim work that might be relevant to that of the forensic pathology panel.

(212) The reports of the two pathology subpanels, being in essential agreement as to the pathology evidence, were then combined, with the understanding that any panel member not concurring with any statement could express a dissenting opinion that would be noted and incorporated in the body of the report.

(213) On Saturday, Mar. 11, 1978, members of the forensic pathology panel met again at the National Archives and deposed Dr.

John H. Ebersole, the radiologist who had taken the autopsy X-rays, and subsequently Dr. Pierre A. Finck, one of the pathologists who assisted in the autopsy. The pertinent portions of their testimony is summarized in section III of this report.

(214) During the early evening of Saturday, Mar. 11, members of the forensic pathology panel met with members of the photographic evidence and firearms panels, other experts, and members of the select committee staff to discuss and present each panel's findings and observations.

(215) On Sunday, March 12, members of the panel once again met at the House Office Building, Annex II, and discussed joint observations and the report previously prepared by Dr. Loquvam. During the discussion, Dr. Finck was interviewed at his request because of his concern that the views he expressed during his deposition the previous day may have been misunderstood. The panel adjourned in midafternoon on that date with the understanding that members of the photographic panel, assisted by either or both Drs. Petty and Coe, if necessary, would attempt to enhance further selected photographs of the President's posterior head and neck, anterior neck, and back, while Dr. Weston would represent the panel at a preliminary review of the computer-assisted image enhancement of selected photographs* and X-rays. It was further agreed that Dr. Weston would prepare a second draft of the panel's report on behalf of the entire panel, using Dr. Loquvam's earlier draft and incorporating new information and suggestions from panel members and the committee.

PART II: RECOMMENDATIONS FOR ADDITIONAL EXAMINATIONS, PROCEDURES, AND CONSULTATIONS BY NONPATHOLOGY DISCIPLINES

(216) The initial review of evidence available, listed in addenda A and B, led members of the subpanels and then the panel as a whole to offer the following suggestions for additional procedures, examinations and consultations to be conducted by specialists in nonpathology disciplines, with the understanding that such evidence might have significance in the panel's final observations and conclusions:

(217) 1. Photographic experts should examine the individual photographs to insure that none of them has been retouched or otherwise altered.

(218) 2. The X-rays identified as those taken of President Kennedy prior to and during the course of the autopsy, and of Governor Connally during his hospitalization, should be examined by a photographic expert and subsequently by a forensic odontologist* and a radiologist for the following purposes:

- To insure validity of the identity of these X-rays by comparison with in-life* films;
- To insure that the X-rays have not been altered since being taken, except as otherwise noted.
- To evaluate more completely, in order to determine their significance, the somewhat randomly distributed, small, radiopaque particles visible in the X-ray of the soft tissues lateral to the right, lower cervical spine of John F. Kennedy;
- To provide interpretation by a radiologist with experience in the examination of gunshot wounds.