

## OUTSIDE CONTACT REPORT

FEBRUARY 27, 1978.

## I. IDENTIFYING INFORMATION

Name: Dr. William B. Seaman.  
 Telephone: \_\_\_\_\_  
 Address: Columbia Presbyterian Hospital, New York City.  
 Type of Contact: Telephone.  
 Person.  
 Contact By: Andy Purdy  
 Mark Flanagan

## II. SUMMARY OF CONTACTS

Dr. Seaman examined the JFK and Connally X-rays in the presence of Dr. King, Dr. Michael Baden, Mark Flanagan, and Andy Purdy. He made his preliminary observation before his attention was focused on areas of particular interest to the medical panel.

JFK—Regarding the lateral skull X-ray, Dr. Seaman said pieces of metal were strewn in a track-like manner. Fractures were evident through the upper part of the right eye, including the top and bottom of the right orbit. The bottom of the frontal sinus was fractured. At the upper rear skull point of possible defect in the skull, Dr. Seaman said it could be an entrance wound and could not be a missile exit wound. He said he could not denote leveling of the skull at that point.

## III. RECOMMENDED FOLLOW-UP (IF ANY)

He found inferences difficult to draw from the extensive damage to the top of the skull, which includes overlapping skull pieces. The lower head was fairly intact, with no evidence of entrance or exit in the region ("very unlikely"). The upper point (mentioned earlier), "suggests entry, but is not conclusive."

Regarding the neck X-ray, Dr. Seaman said there was a fragment-like object present near the transverse process which is too dense to be bone ("fairly confident"). He said the transverse process appears abnormal with air present (possibly by-pro of tracheotomy) calling it "\* \* \* highly suspicious compared with the other side." He thinks he can "\* \* \* see the fragment separate (also in No. 9), and concludes there is a possible fracture in C-7.

*Connally—Wrist*—Comminuted fracture with fragments. He was not sure if the fragments were on the entrance (volar) or exit sides. Dr. Seaman concludes from the spatial orientation that they are fragments of metal.

*Thigh*—Dr. Seaman denoted a fragment of metal in the subcutaneous tissue, characterized by a tail-like end which make it recognizable on both thigh X-rays and insures it is not bone. There is no metal fragment in the femur.

*Chest*—Dr. Seaman noted an area of consolidation and fluid in the right chest. In the fifth rib he noted a fracture and fragment of bone in the anterior axillary line with evidence of hemorrhage, and air in the axilla.

Regarding the possible existence of a higher fracture in the fifth rib, Dr. Seaman said he was a "little skeptical" of it as a fracture, because he couldn't see it fractured all the way as evidenced in a subsequent (even now) X-ray might provide more information about exactly what happened. Dr. Seaman found no evidence of metal fragments in the chest, and couldn't form an opinion as to the nature of the object visible on the left side.

Dr. Seaman had no one to recommend who is an expert in forensic radiology. He did say Dr. Juan Taveras, of Massachusetts General Hospital (Boston) is a skull expert who might have something to contribute.