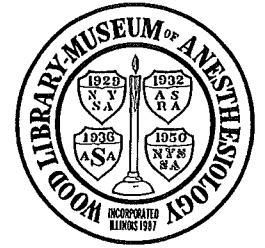




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# BULLETIN OF ANESTHESIA HISTORY



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## John F. Kennedy and M.T. "Pepper" Jenkins: A Moment in Dallas that Lasted 29 Years

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### Introduction

John F. Kennedy, the thirty-fifth President of the United States, was shot in Dallas, November 22, 1963. He was taken to Parkland Memorial Hospital, where a team of doctors tried unsuccessfully to resuscitate him. M.T. "Pepper" Jenkins was one of those doctors. The purpose of this article is to describe the events of that day, emphasizing the roles played by the doctors; to describe the controversy which consumed thousands of hours of Dr. Jenkins' time during subsequent years, and to describe the resolution of the controversy in Dr. Jenkins' mind in 1992.

### JFK in Dallas

President John F. Kennedy came to Dallas to heal a rift between his Vice-President, Lyndon Johnson, who was Texan, and John Connally, the democratic Governor of Texas. His reception was enthusiastic and the streets along his motorcade route were lined with noisy crowds. He and his wife, Jackie, were in the back seat of the open-top presidential limousine. John Connally and his wife, Nellie, were riding in the fold-up seats between the front and back seats. The Vice-President was in the following car. Nellie Connally testified to the Warren Commission, "I said, 'Mr. President, you can't say now that Dallas doesn't love you.' Seconds later he was shot through the neck and the brain." The police radioed the operator at Parkland Memorial Hospital and the motorcade departed at high speed for the hospital, which was only five minutes away.

### Dr. Pepper Jenkins and Parkland Memorial Hospital

Dr. Pepper Jenkins founded the department of anesthesiology at Parkland Hospital and at Southwestern Medical School in September, 1948, after he completed his residency

at Massachusetts General Hospital under Dr. Henry Beecher. Dr. Jenkins started the residency program at Parkland, which by 1998 had trained over 600 anesthesiologists. He established the first recovery room west of the Mississippi. His most important medical scientific innovation was the suggestion in 1950 that balanced salt solutions be used for the resuscitation of traumatic shock and for intra-operative, intravenous fluid therapy in surgical patients. He was widely recognized for his accomplishments and his work in organized medicine. He was an honorary Fellow of the Faculty of Anaesthetists of the Royal College of Surgeons of London and Ireland. He would become President of the

American Society of Anesthesiologists, the Rovenstine Lecturer, and winner of the ASA Distinguished Service Award. He worked tirelessly for the American Medical Association and won its Distinguished Service Award. He was the first anesthesiologist ever to win this distinction. In spite of all of his accomplishments, history will remember him as one of the doctors who unsuccessfully tried to resuscitate President Kennedy.

### JFK Arrives at Parkland Hospital

I was in the main dining room of Parkland Memorial Hospital discussing a research project with Dr. Jenkins, when the call came

*Continued on Page 4*



*Parkland Memorial Hospital in 1963*

## JFK. . . *Continued from Page 1*

over the hospital's public address system, "Dr. Shires to the emergency room STAT." This was very strange. Dr. Shires was the Chairman of the Department of Surgery and was never paged stat. Only interns and residents were paged stat. Dr. Ron Jones, a surgery resident, went to the telephone, called the operator and learned that the wounded President was on his way to our emergency room. Dr. Jenkins said that he would go directly to the emergency room and he instructed me to go to the operating room to fetch a cardiac monitor and anesthesia machine. The time was 12:30 p.m.

The first doctor to see the President on his arrival to Trauma Room One was James Carrico.<sup>1</sup> He saw several agonal respiratory gasps. He saw the small wound in the lower anterior neck and the large avulsive wound of the right side of the head. Dr. Carrico had just completed a rotation on anesthesiology and had performed over 50 endotracheal intubations. He judged that the president needed ventilatory support through an endotracheal tube. During his laryngoscopy he noted that light came through the anterior neck wound into the trachea. He advanced the tube past the wound. Dr. Malcolm Perry, a member of the surgical attending staff, was next to arrive and converted the neck wound to a tracheotomy. Pepper Jenkins arrived next



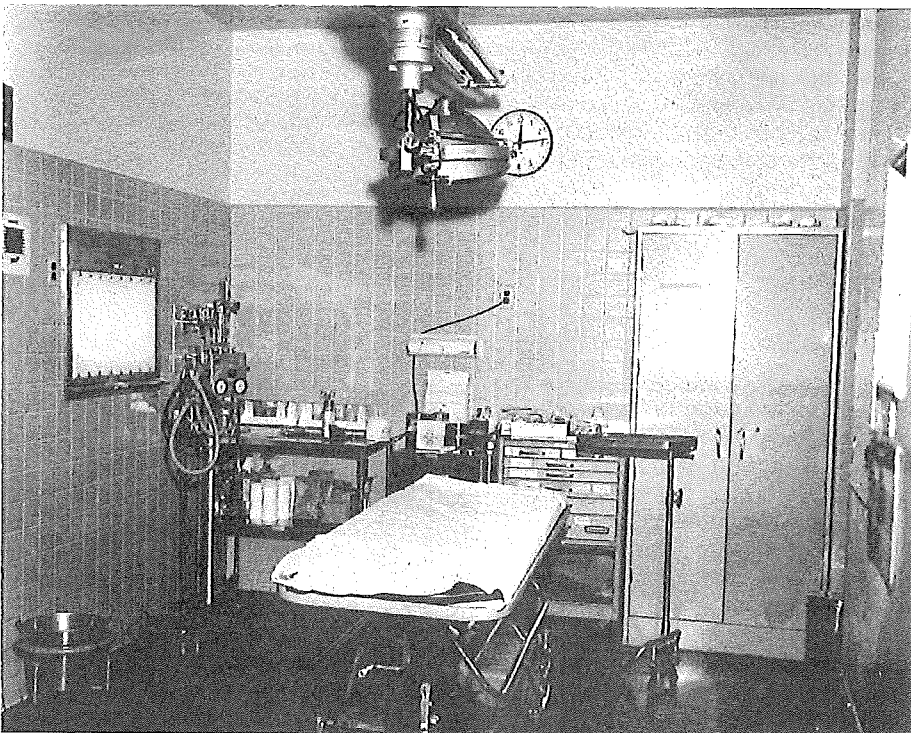
*Dr. Jenkins, right, attends a patient in the recovery room at Parkland Memorial Hospital with Lurlene Lamb, nursing supervisor of the recovery room from 1950 until 1985.*

and connected the endotracheal tube and subsequently the tracheotomy tube to the Bennett automatic ventilator.

I arrived with the ECG monitor and anesthesia machine. The monitor required needle electrodes. A weird sensation of numbness came over me, when I pushed the needles

into the President's skin. Insertion of the needles brought no withdrawal. The monitor showed a flat line. Dr. Kemp Clark, chairman of neurosurgery, arrived. He and Dr. Perry began external cardiac massage. Dr. Jenkins connected the anesthesia machine to the tracheotomy tube and ventilated manually during the cardiac massage. Drs. Carrico and Jones successfully started an IV in the left forearm. Remembering that the President had a history of Addison's disease, Dr. Jenkins suggested the addition of hydrocortisone to the IV solution. I was called to help across the hall in Trauma Room Two where Governor Connally lay wounded in the right chest, the right wrist and the left thigh. The remainder of my day was spent with the Governor.

Back in Trauma Room One, Dr. Charles Baxter, a member of the surgical staff and director of our burn unit, inserted chest tubes bilaterally. Dr. Jenkins, who was by the head, requested Dr. Clark to examine the head wound, which he did while Dr. Perry continued external cardiac massage. Dr. Clark declared that the massive wound was not survivable and pronounced the President dead at 1:00 p.m., 25 minutes after he arrived at the hospital. Lyndon Johnson ordered the body removed immediately over the objection of Dr. Earl Rose, the county coroner. The autopsy was performed in Bethesda, Maryland, by Drs. Hume, Boswell and Fink. Lyndon Johnson took the oath of office of President aboard Air Force One at 2:38 p.m., two hours and eight minutes after the first shot was fired. The alleged assassin, Lee Harvey Oswald, was shot and killed by Jack



*Trauma Room One as it appeared in 1963. Note the Bennett automatic ventilator in the background on the left.*

Ruby on Sunday November 24, 1963, during a transfer from one jail building to another. Ruby was tried and convicted of murder but died at Parkland of carcinoma of the lung before he could serve his sentence.

#### **Dr. Pepper Jenkins, the Warren Commission and the Select Committee**

President Johnson appointed the Chief Justice of the Supreme Court, Earl Warren, to form a commission to investigate the assassination in December, 1963. The commission took testimony from everyone involved, including Dr. Jenkins. He testified in Dallas and later in Washington. He prepared carefully and extensively for his testimony. In 1964, the Warren commission issued its report, concluding that three shots were fired by a single gunman. Two of the three shots hit the President and the third missed. The first bullet went through the President's neck then through Governor Connally's chest, wrist and thigh and the second bullet hit the President's head. The suspected assassin, Lee Harvey Oswald, acted alone and was not part of any conspiracy. The report did not answer all of the lingering questions. It did not satisfy a growing crowd of people who believed that a conspiracy existed. Over 120 books were written about the assassination, each carrying a new conspiracy theory. The authors of these books requested and received interviews with Dr. Jenkins. He felt a responsibility to share his time with them and he answered their questions thoughtfully and conscientiously. The popularity of conspiracy theories grew, as did the clamor for a new investigation.

In 1979, Congress formed the Select Committee to investigate the assassination. The committee reviewed all of the testimony and findings of the Warren Commission. Once again, Dr. Jenkins was required to testify under oath in Dallas and in Washington. The Select Committee concluded that Oswald was probably not the only gunman and that the conspiracy probably included prominent figures from organized crime. One member of the Warren Commission, who had hoped for some resolution, stated, "the most notorious political murder of the twentieth century remains the source of bafflement, controversy and confusion."

#### **The Movie JFK and the Truth from JAMA**

Oliver Stone made a movie about the assassination called *JFK*. Mr. Stone asked Dr. Jenkins to be a consultant and to put together a replica of Trauma Room One. In addition, Dr. Jenkins played himself in the resuscitation scene. He did such a professional job that

nobody noticed or cared that he was 28 years older than he was at the time of the assassination. Dr. Jenkins participated in the movie even though he did not agree with the political agenda of the movie, which was to give credence to the conspiracy theory. "It is a great movie," he used to say, "but it is not a documentary."

The convincing evidence for Dr. Jenkins was published in the *Journal of the American Medical Association* in 1992.<sup>2</sup> Denis Breo, a reporter for the *JAMA*, was assigned by Dr. G.D. Lundberg to interview the three pathologists who did the autopsy and the doctors who attempted the resuscitation. The pathologists, who were now retired, agreed to be interviewed after 29 years of silence. They reviewed all of the drawings, photographs, radiographs, microscope slides and other evidence available. Mr. Breo interviewed the four principal doctors in the attempted resuscitation: Drs. Carrico, Jenkins, Perry and Baxter.<sup>3</sup> His report moved Dr. Lundberg to write an editorial saying that now we have "unequivocal forensic evidence without reservation that JFK was struck by two bullets fired from behind from one high velocity rifle, one gunman."<sup>4</sup>

In Dr. Jenkins' mind, the best analysis of the evidence was published by Gerald Posner in his book, *Case Closed*, which concluded that Oswald was the only gunman and that he was not part of any conspiracy.<sup>5</sup> Dr. Jenkins had several interviews with Mr. Posner and appeared with him on a few programs.

#### **Conclusion**

The purpose of this article is not to take sides in the conspiracy controversy but rather to report how Dr. Jenkins felt. He died in November, 1994, firmly convinced that no conspiracy existed. The assassination and the years that followed took an enormous amount of Dr. Jenkins' time and distracted him from the pressing duties of departmental chairman. For the department, the primary benefit was that for a brief time the attention of the entire world was focused on the excellence of Parkland Memorial Hospital and its departments of surgery and anesthesiology.

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