

# THE MANTIK VIEW

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A CONVERSATION  
WITH  
JOHN EBERSOLE M.D.



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Edited by David W. Mantik, M.D., Ph. D

## THE MANTIK VIEW

*[Editor's note: John Ebersole, M.D., was the Navy medical officer in charge of radiology during the autopsy of JFK, though the actual X-rays were taken by Jerrol Custer, an enlisted medical technician. Having discovered that the X-rays have been fabricated by imposing a patch over a massive blowout in the back of the head (in the case of the lateral) and by adding a 6.5 mm metallic object (in the case of the anterior/posterior), David W. Mantik, M.D., Ph.D., was eager to discuss the X-rays with Ebersole. Fortunately, Ebersole was willing to talk with him... up to a point... and Mantik has transcribed their extremely interesting conversation, which occurred but a few months prior to his death.]*

*On 2 November 1992, in response to my letter to John Ebersole, the autopsy radiologist, Ebersole phoned me at my office and we discussed the JFK autopsy for about 10 to 15 minutes, at most. I promised that I would phone him back, which I did on 2 December 1992 (at his home). This second conversation was recorded; the entire conversation is transcribed here. I donated a copy of this tape to the ARRB.*

**Female voice** (*Mrs. Ebersole?*): Hello.

**Mantik:** Hi. This is Dr. Mantik calling for Dr. Ebersole.

**Female voice:** Just a moment, please. (*Pause*)

**Ebersole:** Hello.

**Mantik:** Hi. This is Dr. Mantik.

**Ebersole:** Yeah.

**Mantik:** I'm sorry I haven't had a chance to call sooner. We've gotten really busy out here.

**Ebersole:** Uh-huh.

**Mantik:** All these snowbirds keep coming over here and trying to see us. You probably never had that problem over there.

*[Mantik note: Ebersole and I shared the same specialty of radiation oncology. He was practicing in Lancaster, PA, at that time.]*

**Ebersole:** No

**Mantik:** Yeah. Well, I thought I'd follow up on my letter and see if there was a chance that we could get together sometime soon.

**Ebersole:** Ah, I don't think so. I would really like to drop this whole subject.

**Mantik:** Oh, I'm a little surprised. OK.

**Ebersole:** Yeah, I think everything you need to know is contained in the two articles in IAMA, the articles by Boswell and Humes (*sic*) and the one by Finck.

*[Mantik note: These were actually written by Dennis Breo.]*

**Mantik:** OK, OK, so you basically support what they said there?

**Ebersole:** Yeah, absolutely, across the board. I think they've got everything there. After all, they are pathologists, and they were carrying out the specialty of pathology. As a radiologist, I was there only to help them, not to perform the thing. But I don't, I don't really care to carry this on, you know, any further.

**Mantik:** Oh, OK, I...

**Ebersole:** Everything's been said that's...

**Mantik:** I understand then.

**Ebersole:** ...been said. Ah, unfortunately, I wish Jim and J. Boswell had published much earlier.

**Mantik:** Oh, it would have been wonderful. I've always wanted to talk to somebody who was there. That's why I was so excited about being able to talk to you a little bit.

**Ebersole:** I would think that I would have very little to add, if any, really nothing to add to what you can get from those articles.

**Mantik:** Uh-hmm. So your impression, too, when you saw that head wound was that the shot was from the back.

**Ebersole:** Oh yes.

**Mantik:** Yeah.

**Ebersole:** Back and above...

**Mantik:** Back and above, uh-huh. And the back wound...

**Ebersole:** I had Pierre Finck as an instructor at AFIP

**Mantik:** Did you?

**Ebersole:** And he was, you know, adamant about that, because *[garbled]* was always on the side of the wound of entrance.

**Mantik:** So when you looked at the back of the head, what did you see there?

**Ebersole:** Saw a wound...

**Mantik:** Yeah.

**Ebersole:** ...saw a big wound.

**Mantik:** It was pretty big on the back?

**Ebersole:** Well, the exit (sic) wound was big. They... it had chopped up the skull.

**Mantik:** Yeah, in the occipital...

**Ebersole:** The wound was a single beveled wound.

**Mantik:** If you looked at him from the back, like if he was standing in front of you, could you see the big exit wound?

**Ebersole:** Yeah...

**Mantik:** Uh-hmm...

**Ebersole:** Sure...

**Mantik:** How wide was it? That's what I've always wanted to ask somebody.

**Ebersole:** Ah, I can't remember.

**Mantik:** You just don't remember. The other thing you mentioned last time, about the back wound, was about T4... That about right...

**Ebersole:** Ah, T4, yeah.

**Mantik:** Yeah. Did you use a radio-opaque marker to identify that?

**Ebersole:** No.

**Mantik:** Oh, just clinical...

**Ebersole:** That was a clinical impression.

**Mantik:** ...a clinical observation... About the level of the scapular spine or so...

**Ebersole:** Yeah.

**Mantik:** Yeah. That sounds about what I would have guessed from that, too. So, oh, I know, there was one question I was really hoping I could ask you. You say that there was five or six skull X-rays that were taken?

*[Mantik note: The official collection contains only three; Ebersole had recalled five or six in our first telephone conversation, also. Curiously enough, this is also the (independent) recollection of Jerrol Custer, the technologist. He has confirmed that to me directly.]*

**Ebersole:** Yeah.

**Mantik:** Ah, do you remember if any X-rays were taken right after they removed the brain from the skull?

**Ebersole:** No, I don't.

**Mantik:** Just don't remember.

**Ebersole:** ...don't remember, and I doubt if any were.

**Mantik:** Uh-hmm.

**Ebersole:** X-rays were taken, in general, whole body X-rays were taken before the autopsy...

**Mantik:** Um-hmm.

**Ebersole:** ...you know, right away.

**Mantik:** Right, that's what I understood.

**Ebersole:** And a chest was taken again after the autopsy was complete.

**Mantik:** Right, OK. The head wasn't manipulated at all between, I mean, just, even moving it up in any direction, like when you put the cassette in there behind, there was not much movement of the head, was there?

**Ebersole:** Umm, there was the usual movement...

**Mantik:** Nothing unusual.

**Ebersole:** ...Lateral position versus the AP...

**Mantik:** Yeah, no major movement of fragments or tissue?

**Ebersole:** No.

**Mantik:** Yeah, that's what I wanted to know. Yeah, that's what I assumed. You didn't take any X-rays of bullet fragments that night or the next day, did you?

**Ebersole:** I took an X-ray of a large bone fragment that was sent up from Dallas.

**Mantik:** That was on the evening of the 22nd?

**Ebersole:** Yeah.

**Mantik:** And anything the next day, at all, that happened?

**Ebersole:** What's that?

**Mantik:** Did anything happen at all the next day?

**Ebersole:** *[Slight pause]* No, not really.

**Mantik:** Nothing at all, no more X-rays?

**Ebersole:** *[Mantik note: Inaudible; my impression at the time was that he had clearly implied that the answer was, "No."]*

**Mantik:** Did you use some metal on the skull for magnification? Do you remember that?

**Ebersole:** No, did not.

*[Mantik note: There is a visible metal strip that Custer, the technologist, recalled, but it does not contain identifiable marks that could be used for determining magnification.]*

**Mantik:** Did not use any, huh?

**Ebersole:** Did not...

**Mantik:** And you saw...

**Ebersole:** ...and that presented a problem because I could not remember the type of the source to film distance, and so on.

*[Mantik note: He is describing his later trip to the White House to review the X-rays, in which the question of magnification arose. This odd escapade is described in my essay in Assassination Science.]*

**Mantik:** You saw the posterior wound in the skull yourself?

**Ebersole:** Yes.

**Mantik:** Yeah, so you could see the beveling yourself, or was that the pathologists' impression?

**Ebersole:** You could feel it.

**Mantik:** You could actually feel it?

**Ebersole:** Oh, yeah.

**Mantik:** Yeah. OK. The thing that puzzled me about that, you know, was that Boswell said in his testimony that they got these three *[bone]* fragments late in the autopsy and then they put this back together, and it was only then that he could see that entrance wound, and that's caused a lot of...

**Ebersole:** ...could have been.

**Mantik:** Yeah, that's caused a lot of confusion. So you think that could have happened that way then?

**Ebersole:** Ah, could have.

**Mantik:** Yeah, OK. Jeez...

**Ebersole:** I don't remember after what...

**Mantik:** That's, that's what I keep saying to myself: gee, why, why didn't somebody write this all down within a year or two?

**Ebersole:** Humes had his notes

*[Mantik note: which have never appeared anywhere in the record], and ah...*

**Mantik:** Yeah, did he take notes at the autopsy?

**Ebersole:** Yes.

**Mantik:** Yeah, did he have a diagram there, too?

**Ebersole:** I don't know, I...

**Mantik:** ...don't know, huh? *(Pause)* Hmm, do you have any photographs of these X-rays yet?

**Ebersole:** No.

**Mantik:** So you don't even have those, huh?

**Ebersole:** They were turned over immediately after processing, turned immediately over to Secret Service.

**Mantik:** Uh-hmm. Uh-hmm.

**Ebersole:** Or what I assumed to have been Secret Service.

**Mantik:** Interesting. You saw the tracheostomy, too, didn't you?

**Ebersole:** *(pause)* I saw, yeah...

**Mantik:** What did that actually look like? There seem to be some differing opinions on that...

**Ebersole:** Well, it looked like an explosive *(sic)* type of wound, with lipping, ah, but clean, you know, we assumed that it was a surgical wound.

**Mantik:** Looked like a scalpel incision?

**Ebersole:** Yeah.

**Mantik:** Uh-huh. Was it the size you would expect for a tracheostomy?

**Ebersole:** Yeah, except it was, you know, too transverse. I wouldn't want to do a tracheotomy like that. *(said with some feeling)*

**Mantik:** Um-hmm. OK, that's an interesting comment. Was it open when you first saw it, or was it sutured?

**Ebersole:** It was open.

**Mantik:** It was open, not sutured. Uh-hmm. OK. Fascinating. Burkley was there, too, at the autopsy, wasn't he? *(Pause)* Admiral Burkley?

**Ebersole:** I don't remember...

**Mantik:** ...don't remember him.

**Ebersole:** I don't remember him being there.

**Mantik:** Let me tell you what puzzles me about him. He was the only doctor who was at Dallas and also at the autopsy and he certainly must have known about that anterior neck wound, and I just can't understand why he didn't tell Humes about that.

**Ebersole:** I don't, frankly... I don't remember his being there.

**Mantik:** You don't actually remember him...

**Ebersole:** I wouldn't say he wasn't...

**Mantik:** OK.

**Ebersole:** ...but I don't remember his being there.

**Mantik:** Yeah.

**Ebersole:** And it was, oh, 10:30 at night before we got the communication from Dallas.

*[Mantik note: Ebersole had told me during our first conversation that they had learned about the throat wound from Dallas that night. In prior conversations, he had also stated that he had learned of the projectile wound to the throat during the autopsy... that, in fact, he had stopped taking X-rays after that intelligence had arrived, because the mystery of the exit wound... corresponding to the back-entrance wound... was solved.]*

**Mantik:** Uh-hmm. Uh-hmm.

**Ebersole:** I think Burkley may well have been with the President's wife.

**Mantik:** Yeah, that could be, couldn't it? Your job was mainly to look for the bullets, as I understand it, on the X-rays?

**Ebersole:** Yes, because for a while everyone, investigating officers and so on, felt there was an entry wound, i.e., in the back, and no exit wound...

**Mantik:** Sure.

**Ebersole:** ...ah, but that was later proven to be wrong.

**Mantik:** Yeah, so you, ah, you really didn't see any big fragments on the X-ray, then, I gather... on the skull X-ray?

**Ebersole:** Any what?

**Mantik:** Did you see any big bullet fragments at all on the skull X-ray?

**Ebersole:** No. No.

**Mantik:** Nothing, nothing big at all?

**Ebersole:** The bullet did a typical thing, it smashed into, ah, and you know, ah, hundreds of pieces...

**Mantik:** Uh-hmm. Uh-hmm.

**Ebersole:** ...once inside the skull...

**Mantik:** Yeah. Where, where was that track? That was the other curious thing, I wasn't quite sure.

**Ebersole:** Oh, roughly, it was from the occiput up forward.

*[Mantik note: This is also what Humes said in his official report, but the trail is actually more than 10cm higher than this on the X-rays. Ebersole recalled drawing straight lines on the X-rays with a*

*pencil during his visit to the White House. While at the National Archives, I was able to confirm that these two pencil lines are still present... and that they are located on only one side of the lateral X-ray film. In other words, the current X-rays are not 'copies of those that Ebersole saw at the White House; such copies would not show pencil markings on only one side. We can be confident, therefore, that the current X-rays are the same ones that Ebersole viewed at the White House. An entirely separate question, though, is whether the current X-rays are identical to those at the autopsy. In this very interview, Ebersole denies seeing any large metal-like fragments on the X-rays, but that cannot be true of the current X-rays. Since the 6.5 mm object is a (nearly complete) cross section of a (purported Mannlicher-Carcano) bullet, it must have considered to be a large fragment. The eyewitness evidence suggests that the X-rays were altered promptly after the assassination (similar to the photographs). Most likely, Ebersole was recalled to the White House for the sole purpose of verifying that he would not dispute the altered X-rays. The cover story... of needing measurements for a bust... is absurd; pre-mortem X-rays existed for this purpose, as if anyone would ever use X-rays at all for such a purpose.]*

**Mantik:** ...From the external occipital protuberance...

**Ebersole:** Yeah.

**Mantik:** It was down that far, huh?

**Ebersole:** Well, I don't want to say that for sure.

**Mantik:** OK.

**Ebersole:** It was, basically, from occiput, looking at the lateral view, as I remember, from occiput up toward the right forehead.

**Mantik:** Yeah, yeah, that's what Humes said, too, exactly what he said.

**Ebersole:** In fact, there was a little ecchymosis over the right, ah, right eye.

**Mantik:** Uh-hmm, yeah, I remember his saying that, too.

**Ebersole:** Otherwise, everything was intact, except for the tremendous wound.

**Mantik:** Yeah, now that big wound that we mentioned before, that went well behind the ear, didn't it?

**Ebersole:** Yeah.

**Mantik:** Over the parietal, parietal area behind the ear, didn't it? Ebersole: (*garbled*) it was multi-wound fragments.

**Mantik:** Uh-hmm, was that very close to that entry wound? Do you remember? (Pause) the big one and the little one...

**Ebersole:** Yeah, it was fairly close. Its most posterior margin was probably oh two, two and a half centimeters lateral to the entry wound.

*[Mantik note: This is a critical observation; he has just placed the large hole directly in the occipital bone... just where the photograph shows well-groomed hair.]*

**Mantik:** Oh, OK, that's interesting, yeah. Would it be close to the labroid suture... the junction of the occiput and parietal bones?

**Ebersole:** I wouldn't want to say.

**Mantik:** Just not sure about that one. Yeah, fascinating. Boy, I wish you guys had all written a book about this. This would have been fascinating.

**Ebersole:** Yeah, what fascinates me is why people are so fascinated by it.

**Mantik:** Because there are so many contradictory pieces of evidence. It's like a murder mystery.

**Ebersole:** Yeah, you can find that in the Borden case, in the Lindberg case, doctor, you can find it in any one of hundreds of criminal cases.

*[Mantik note: If I recall correctly, Ebersole had taken courses on writing detective stories and actually did write these as a hobby. I have never tried to determine if he was published.]*

**Mantik:** Yeah, well, maybe you're right, yeah.

**Ebersole:** Why this particular thing should become an obsession with people, I have no idea.

**Mantik:** Uh-huh.

**Ebersole:** It was a nut that decided to kill a man, and you can do it.

**Mantik:** Uh-hmm. Uh-hmm. Now, that wound, that big wound we were talking about, would that have gone far enough back, in the back of the head that you could even have seen the cerebellum?

**Ebersole:** I, I wouldn't want to say. I could not identify any cerebellum as such from what I saw.

**Mantik:** But the 'hole itself, would it have been low enough to see it?

**Ebersole:** I, I don't know. I don't want to say.

**Mantik:** OK.

**Ebersole:** That would have to be from the photographs, I would think, the stuff that's in the Archives.

**Mantik:** Oh yeah, you saw the photographs, didn't you?

**Ebersole:** Not entirely, no...

**Mantik:** Oh, I'm surprised; I'd thought you'd have seen those. You don't remember those, then?

**Ebersole:** No, I knew John, who took the photographs, an excellent civilian Yeah,

**Mantik:** John Stringer, yeah...

**Ebersole:** ...but I didn't see the finished product.

**Mantik:** You never saw those. I thought you might have seen those, ah, when you went back there to testify.

**Ebersole:** No, and I went back to test the X-rays were, in fact, the X-rays taken.

*[Mantik note: This curious episode is recounted in my essay in Assassination Science.]*

**Mantik:** Yeah, what did you think about that?

**Ebersole:** Hell, they were the X-rays I took.

**Mantik:** Yeah, OK. But you know what puzzles me about that, that...

**Ebersole:** A lot of things puzzle you, doctor.

**Mantik:** ...that, that Clark Panel report saw that 6.5 mm fragment.

**Ebersole:** Yeah *(change in tone of voice... almost like resignation, then a pause)*. Well, I tell you, I, ah, I don't know if you realize it or not, but I have a bronchogenic carcinoma with a metastasis to the cerebellum.

*[Mantik note: I have always found it striking that Ebersole chose this particular question at which to stop the interview. The question remained, of course, forever unanswered. The list of suspects for X-ray alteration is very short, with Ebersole at the top of the list. His activities in the radiology department, on Saturday, November 23rd (as recalled by Custer, the technologist) as well as Ebersole's subsequent, curious visit to the White House (to view the X-rays), is consistent with such illegal behavior.]*

**Mantik:** Oh, gosh...

*[Mantik note: At our national, specialty meetings in San Diego (between these two telephone calls), I had learned from a Pennsylvania technologist that Ebersole was receiving radiation treatment for lung cancer, but I had not known that he had developed brain metastases.]*

**Ebersole:** And I'm not doing well at all.

**Mantik:** Oh, jeez.

**Ebersole:** And I would really like to close out this discussion.

**Mantik:** Oh, we can stop anytime you like.

**Ebersole:** OK.

**Mantik:** Surely. Listen, thank you so much.

**Ebersole:** I know. Bye.

**Mantik:** Bye.

*[Mantik note: Ebersole died several months later. I believe that I was the last person to interview him about his role at the JFK autopsy.]*