Historical Museum, USA) of the Kennedy assassination. (DTI/Photo Stephanie Price/Panhandle-Plains Historical Museum, USA)

Few people are granted the opportunity to become an active part of historical events. Seventy-six-year-old Dr Don T. Curtis, a former dentist and oral surgeon from Amarillo in Texas, is one of them. As a resident in oral and maxillofacial surgery at Parkland Memorial Hospital in Dallas, he was one of the first doctors to have performed emergency treatment on US President John F. Kennedy after he was shot on November 22, 1963. DTI Group Editor Daniel Zimmermann had the opportunity to speak with him about that day and the reason he thinks there was more to the assassination than a lone gunman.

DTE A feature film about the events at Parkland Memorial Hospital, produced by Tom Hanks and starring Billy Bob Thornton, has just been released on the 50th anniversary of the Kennedy assassination. Have you seen it, and does it stay true to the events, in your opinion?

Dr Don T. Curtis: I have not seen it but I have heard criticism that it paints a sensationalised picture of the events. I guess I would go see it if it were shown here in Amarillo.

You began working at Parkland Memorial Hospital in 1963. What was your position back then?

At that time, I was half way through my first year of residency in oral and maxillofacial surgery. Before I took a residency there, I also completed an internship. I became interested in the field while working as a surgical technician in a general hospital during my time in dental school at the Texas A&M University Baylor College of Dentistry in Waco.

Were you aware of the president being in Dallas on November 22, 1963? I was not aware of that and was surprised when they brought him to the hospital. I had a surgery scheduled for later that day and was on my way to have lunch. The way to the lunch-room however required me to leave the building and walk across the receiving area of the emergency room, where I noticed police cars and the presidential limousine, which had blood on it and roses that were given to the First Lady, Jacqueline Kennedy, when she arrived at the airport. When I looked up later, the room was filled with the senior chiefs of all surgical departments at Parkland. There were also some people I did not know.

Don T. Curtis speaking at a recent event on the occasion of the 50th anniversary of the assassination. (DTI/Photo Stephanie Price/Panhandle-Plains Historical Museum, USA)

"My personal belief is that there were of course multiple shooters and that Oswald did not do it alone."

I was a doctor, I said yes. He then replied that the president was hurt and escorted me to the trauma room where President Kennedy was.

In what condition was Kennedy when you arrived?

When I got there, it was obvious that the president was in extremis. He tried to breathe but was unable to do so. Dr Charles James Carrico, a Parkland resident surgeon, had placed an endotracheal tube in an attempt at ventilation. However, that did not work because there was a blockage of the president’s airway, so he decided to do a tracheostomy.

I helped the nurse to undo the president’s tie and remove his shirt to prepare him for the procedure. Then Dr Malcolm Perry, a senior surgeon, came into the room and it was decided that he should do the tracheostomy. Dr Carrico assisted Dr Perry, and I performed a cut-down on the left leg to provide for intraabdominal replacement of blood. When I looked up later, the room was filled with the senior chiefs of all surgical departments at Parkland. There were also some people I did not know.

Where you aware that the president had been the subject of an assassination attempt?

I was unaware of the nature of the injury to the president because his head was on a pillow and I could not see a wound. I remember the chief of neurosurgery, Dr Kemp Clark, rotating Kennedy’s head to the left, revealing that the posterior part of his skull had been radically fractured. He then said, “Stop; this injury is incompatible with life.”

What was the atmosphere in the room?

I performed a cut-down on the left leg to provide for intravenous replacement of blood. According to eyewitnesses, discussions broke out about who was authorised to do the autopsy. Did you notice any of that?

I did not because I left the trauma room soon after the president had been pronounced dead and went back to the clinic to see my patient in the operating room. However, I found that all scheduled surgeries for that day had been cancelled and all patients had been sent back to the ward. Only a few surgeries were underway at that time, including that of Governor John Bowden Connally, who had also been injured during the shooting.

I told my patient that her surgery had been postponed. She understood that. Since there was nothing else for me to do, I then cleared my business in the clinic and went home. There, we spent the weekend watching television and listening to the news on the radio. We were relieved that...
President Lyndon B. Johnson had made it safety back to Washing-

ton and that the government was uninterrupted. Finally on Sunday, we learned that the

suspect, Lee Harvey Oswald, had been shot, which indicated that there was something going on in addition to just a lone shooter.

The majority of Americans do not believe that Oswald acted alone, as concluded by the report of the Warren Commission appointed by the government to investigate the circumstances of the assassina-
tion. Did you observe any irregularities between this of-

ficial version and the events you witnessed?

The Warren Commission’s report reflected what the people wanted to hear, which was that Oswald acted alone and that there was no conspiracy. The doctors of Parkland however when wiping the blood from Kennedy’s neck for the tra-

cheotomy found a single bullet hole that was apparently an en-

trance wound, which meant that must have been a projectile that entered the president from the front. Because of its nature, the wound on the back of Kennedy’s head was an exit wound, so there must have been at least two bul-

lets that came through the front.

While all the doctors’ testimo-

nies, including mine, were includ-
ed in the report, their knowledge of the wounds did not have much influence on the Commission’s overall conclusion. Why it was interpreted that way has remained a mystery for the past 50 years.

What do you believe actu-

ally happened that day?

My personal belief is that there were of course multiple shooters and that Oswald did not do it alone. This would indicate however that there was in fact a conspiracy.

After the events, you stayed at Parkland Memorial Hospi-

tal for another two years. Were the events still discussed by the staff in the aftermath?

We actually never talked about it. This was something we just did not want to discuss. However, I left Parkland in 1965 for an exchange residency in London and Zurich,

where I often discussed the events with my colleagues abroad. Par-

ticularly in England, there was much interest in US politics and the assassination.

You recently went public with your knowledge after 58 years. What were your rea-

sons for doing so?

Everything that I would say is already in the literature about the assassination but I think there needs to be general knowledge of what people who were actually involved knew.

More than six million pages of classified evidence on the Kennedy assassination are go-

ing to be released by 2017. Are you interested in this knowl-

dge, or do you consider that chapter of your life closed?

There is a great deal of specu-

lation of what information these documents actually contain. I do not look forward to it but would be interested to know what could be learned from them.

Thank you very much for the interview.

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