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MORNING DIGEST

Foreign Media Reaction

March 31, 1981

SPECIAL: ASSASSINATION ATTEMPT

Available media comment today was extensive in expression of deep concern over the attempt on the President's life as well as sympathy. Many commentators worried over international consequences of the crime, deplored what some saw as endemic violence in America recalling the assassinations of John F. Kennedy and other Presidents, and puzzled over the motives for the attack.

Some analysts suggested that President Reagan would emerge politically stronger as America closed ranks behind the Administration.

Special press editions and extended radio and television broadcasts covered the incident and the President's surgery. The events came too late for comment or even news treatment in many areas of the world.

"'Honey, I Forgot to Duck'"

Among headlines in London today were, "President Reagan: Bullet Removed From Lung--'Honey, I Forgot to Duck--Don't Worry About Me, I'll Make It'" (Times of London), "President Jokes on Way to Surgery" (liberal Guardian), and "Reagan Inch From Death" (conservative Daily Express).

Coverage in the British press included recaps of violence against political figures in America.

"Expect Americans to Rally Around the President"

Today's Times spoke of the "shock at another attempt to assassinate a President of the United States. This episode will be taken, not unreasonably, as a symptom of the violence that seems to be endemic in American life...

"The sense of sympathy will do much to determine the immediate political consequences of the shooting. Within the United

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International Communication Agency

States there will be a wave of feeling in which it will be much harder for anyone to criticize either the President personally or his policies....This will apply to Congress, to the press and to the general public. The mood is likely to be one in which it is a national emotional requirement to rally behind the President...

"At the same time, it may be more difficult to order the lines of command within the Administration....Yet this judgment should be tempered by...the wave of sympathy towards the President...within the Administration as well as outside" and "the natural tendency will be to rally around the President at this time..."

The paper predicted that the White House staff, "led by Mr. Ed Meese and Mr. Jim Baker," would "exercise correspondingly greater sway so long as Mr. Reagan is out of action. Others...will find it hard to contest their decisions unless they are able to gain access to the President."

"The Most Grievous Consequences for Us All"

The conservative Daily Telegraph observed that "a question mark is thrown over the way in which the Western world and its leaders go about their business....What if we are now compelled to change this style? What happened outside a hotel in Washington yesterday, taken in conjunction with what happened in Dallas within this generation, must alter the odds, no matter how brave a face respective heads of state may choose to put on them. And that can only have, for us all, most grievous consequences."

"A Matter of Concern to the Western World"

Today's conservative nationalistic Daily Mail said the President "will survive the assassin's bullets. But what of America? How long can this country, so trusting, so liberal, so full of genuine generosity--as the whole of postwar Western Europe can testify to--continue to descend in the pitiless abyss of violence and destruction?

"It is a matter of concern to everyone in the Western world. What use is a higher standard of living, of affluence, of leisure and comfort and fulfillment if violent death is a constant companion?....It is to be hoped that President Reagan will make a full recovery and resume his office before too long a time elapses. When he does, he must address himself to this, the biggest of all the problems which face his country."

"Good Name of the U.S. Is at Stake"

The conservative Daily Express asked, "How many more Americans, prominent and humble, must be shot or killed before the United States Congress reforms the law (on gun control)? The good name of the United States is at stake."

British radio and television coverage commented on what was deemed panic displayed by the Secret Service.

Today's French newspapers ran streamer headlines and extensive front and inside-page reports and backgrounders.

"America Will Close Ranks"

Independent Quotidien de Paris ran an article by a foreign affairs writer who said: "...We know nothing of the man who tried to change the world situation by shooting the U.S. President....On the other hand, we know that if Ronald Reagan survives--and this is what we wish, not only for humanitarian reasons but for world peace--he will gain from the tragedy a hitherto unreached level of popularity....In any case, as always in the darker hours of its history, America will close ranks around the Star-Spangled Banner...because Ronald Reagan embodies more than a temporary political fashion...more than a temporary reaction of national pride after the setback of Vietnam and the failure in Tabas (Iran).

"He symbolizes the return of the United States to its original values": faith in God, belief in man and in individual initiative and love for the homeland. Hence it would be vain to expect a weakening of America. Those beyond the iron curtain... are perfectly aware of this and will be unlikely to try to exploit the situation..."

TV Correspondents Stay on the Air

Washington correspondents of French radio and TV stayed on the air until late last night to give information on the progress of President Reagan's surgery. President Giscard d'Estaing, participating in a special electoral program on TV Antenne 2, was informed during a live interview of the assassination attempt on President Reagan.

"U.S. in a State of Shock"

Commentator Etienne Mougeotte said on Paris-based commercial Europe One radio that Mr. Reagan was "cool" and showed a "good

sense of humor....After a few weeks of unavailability, the President will be back on the job. But this morning, the United States is in a state of shock. Eighteen years after President Kennedy's assassination in Dallas, the dossier is not closed....The free sale of arms in some states favors violence but does not explain it....The worst is the fragility of power..."

TV Film Footage and Updates

West German television newscasts last night opened with early factual reports of the attack on the President. TV One after its regular newscast turned to special programming with excerpts from U.S. TV material and running updates with subtitles. TV Two extended its midnight news show to include a filmed report by a Washington correspondent.

The assassination attempt was the lead news story today in late-deadline West German papers, which also carried texts of telegrams to the President from President Carstens, Chancellor Schmidt, Foreign Minister Genscher and others.

In West Berlin the attack was bannered in all papers except the tiny Communist paper Die Wahrheit, which ran the news under a front-page subhead.

"Tragedy If This Held Up Reagan Program"

Leading independent Tagesspiegel remarked that "once again there has occurred in the person of the assailant that neurotic explosion which is nursed by the idea that political ideas or one's own visions would materialize if one attacked public figures..."

"It would be a tragedy if the attempt prevented President Reagan from carrying out his intended policy to which the voters agreed in a landslide election. A new trauma has imposed itself on U.S. policy, with all the implications for the common interest of the Western world."

Continuous TV Reporting

The assassination attempt dominated Italian media. Last night's scheduled TV programs were interrupted by announcements and continuous reporting from Washington. Videotapes were carried on late-night newscasts. Italian President Pertini's expressions of regret were transmitted from Costa Rica, where he was on a visit.

Radio newscasts this morning reported that President Reagan was in good condition after a successful operation and that he would be back on his feet in two weeks and able to carry on his duties.

"A Part of U.S. History"

Influential centrist Corriere della Sera of Milan said in a front-page editorial: "This great free nation on which so much of the fate of the world depends has a history of solitary deeds (of this type) whose consequences make nations and even blocs of nations tremble. Blood has always been a part of U.S. history...a secret component of violence which explodes periodically like a sleeping volcano....We have but one wish: May Reagan soon return to the White House."

Pro-Communist Paper: "Fruit of the Cult of Arms"

Pro-Communist Paese Sera of Rome ran a byliner's view that "the least one can say of this attempted assassination...is that it is largely the fruit of the cult of arms that has spread over the United States and has its most dogged defenders in those very states that boast about having sent their man to Washington....Despite the current frustrations and uncertainties, however, most Americans have more moderate and reasonable attitudes than in the past."

Communist Paper: "A Sinister Shadow on the World"

Communist L'Unita of Rome declared: "...The tragedy of Dallas is far back in time; the time is different but the person hit is the same, a man, the President of the United States, who represents and holds immense power, who is at the pinnacle of world power. Why should we not be concerned, particularly when we believe that the world is crisscrossed with gigantic dangers?...These shots project another sinister shadow on the world and scare those who believe that intelligence, reason and civilization can defeat outbursts of irrationality and barbarism!"

"Event Should Block Possible Invasion of Poland"

Moscow correspondent Jas Gawonski reported on Italian radio newscasts this morning: "Moscow announced the news with unusual speed but there has been no reaction yet. Certainly, this attempted assassination of President Reagan should have the effect of blocking a possible Soviet invasion of Poland. It would be an error (for the Soviets) to believe that Ameri-

ca is weaker now. Reagan has been one of the American Presidents most attacked by the Soviets. There will be no attacks for a while but presumably Soviet propoganda will take advantage of this event to paint the United States in somber colors."

In Stockholm, special early morning radio and television news programs carried film of the assassination attempt and updated developments. Commentators elaborated on the line of succession in the White House and stressed violence in America and the ease of obtaining weapons.

"Americans Cannot Cope With This Violence"

Moderate Svenska Dagbladet of Stockholm observed that "since John F. Kennedy was assassinated in Dallas in 1963, violence in the United States has increased alarmingly and the list of politicians and leaders affected is frightening....But Americans have not been able to cope with this violence. Each attempt to make it more difficult for people to get hold of weapons has failed..."

"Concern Throughout the World"

Swiss Romande radio news opened today with a report that the President was out of danger. Later it carried a report on the attacker. A commentator said, "The news has caused concern throughout the world."

Independent La Suisse of Geneva devoted its entire front page to the story. Late editions of other papers ran banner headlines.

Spanish radio had special broadcasts and late night television ran film footage received by satellite for several hours.

"A Risk for All U.S. Presidents"

Independent El Pais of Madrid held that "no one is going to say that as a consequence of this attempt the Americans are not ready for self-government....To be shot to death will continue to be a risk for all U.S. Presidents who carry out their most elementary obligations..."

Diario 16 reported that King Juan Carlos telephoned the White House and sent a cable expressing support and sympathy of the Spanish people.

Tokyo television networks gave top coverage. All networks ran videotaped scenes of the shooting, and carried reports on the successful results of President Reagan's operation. Television commentators said the Japanese Government was shocked by the incident. Reports did not make the deadline for today's morning papers.

Concern About Reagan-Suzuki Talks

Publicly financed NHK television and other networks spoke of Prime Minister Suzuki's shock over the incident and quoted him as saying, "I will pray that the operation will be successful and that the President will recover as soon as possible." TBS television said he had sent a cable of sympathy to President Reagan. The network stated that attention in Japan is now focusing on whether the planned Reagan-Suzuki talks in May can take place as scheduled.

NHK cited Foreign Minister Ito as expressing hope for the President's quick recovery and as adding that he expects the incident will not have any great effect on U.S. foreign policy.

The Kyodo News Service reported that Emperor Hirohito sent a cable of sympathy. In a separate report, the news agency asserted that the Japanese Government had expressed concern that the assassination attempt on the President might affect the Government's plan to settle the U.S.-Japan auto problem before Prime Minister Suzuki's U.S. visit.

The news agency cited International Trade and Industry Minister Tanaka as saying that he did not expect the incident to have a significant impact on the Reagan Administration's policy on the auto problem or on other issues but that everything "now depends" on the President's condition. The news agency added that Japanese business leaders had also expressed shock over the assassination attempt.

South Korea: Extra Editions Issued

Seoul papers were dominated by news coverage of the shooting. Morning papers issued extras on the subject, and some reports carried apprehensive comments on the President's health and the future of America. Conservative Donga Ilbo described the event as a tragedy caused by the sickness of the American spirit. Several papers ran reports that George Bush had started acting for the President.

Taiwan: Official Message

Agence France-Presse, in a Taipei-dated dispatch, reported today that Taiwan President Chiang Ching-Kuo "condemned as a 'barbarous and criminal' act the assassination attempt on President Ronald Reagan yesterday. In a cable sent to the U.S. President, President Chiang said such an act should be 'condemned and deplored' by the whole civilized world."

Australia: "An Injury to All Americans"

Australian electronic media gave straight news coverage of the event, much of it from U.S. network coverage.

The Canberra Times published a special mid-day edition devoted almost entirely to the assassination attempt. In an editorial the paper expressed shock over the incident and sympathy for the President, his family, and for "the men and women who serve the President so closely, in a physical sense, that they have to bear the real and constant danger of that proximity....In a sense, the shooting of the President becomes an injury to all the people of the United States."

The editorial went on to express concern over a possible lengthy convalescence of the President which, it said would provide "intolerable leadership for a great country which has to be decisive about itself, domestically and internationally. The separation of powers among Executive, Legislative and Judicial has been inhibiting U.S. policy and performance for a long time. If the Executive, on its own, also became divided, with a Vice President like the young Mr. Bush increasingly frustrated by the lingering ineffectiveness of his President, the United States would be gravely at risk. For political as well as human reasons, we must wish President Reagan a conventionally speedy recovery."

In concluding, the editorial decried the violence in this country and said, "It is sad indeed today to recall the words of the chief lobbyist of the Citizens Committee for the Right to Keep and Bear Arms: 'I would say Reagan is the most pro-gun President since Theodore Roosevelt.'"

Thailand: PM's Message

Bangkok domestic radio reported today that Thai Prime Minister General Prem Tinsulanonda "extended his regrets to the U.S. President Reagan soon after learning about the news of the assassination attempt....He wishes the U.S. President a quick recovery."

India: Gandhi Statement

Agence France Presse today ran a report from New Delhi which said "Prime Minister Indira Gandhi today expressed shock at the 'senseless attempt' on the life of U.S. President Ronald Reagan and wished him a speedy recovery."

Egypt: Sadat Cable

Cairo's Middle East News Agency reported yesterday that President Sadat "sent an urgent cable to President Reagan" which said, "I received with extreme alarm and deep sorrow the report of the criminal attempt you were subjected to today. While condemning this criminal action, which has shocked the sentiments of the entire world, I implore God Almighty to grant you the blessing of a speedy recovery so that you will resume the leadership of your great and free country."

Yemen Arab Republic: President's Message

Sanaa domestic radio reported today that President Salih had sent a cable to Mr. Reagan "in which he expressed his strong denunciation of the heinous incident to which President Reagan was subjected yesterday. (President Salih) expressed happiness over his safety and wished him a speedy recovery."

Israel: "Need a Remedy for This Affliction"

Independent Maariv of Tel Aviv declared: "No measures in the world are sufficient to protect the President's life when a mentally deranged man is free to buy and carry a gun. That is one of the grave effects of the concept of individual freedom as practiced in the United States....The responsibility resting on the shoulders of the greatest power which has just begun to reassert its role as the leader of the free world calls for a remedy for this affliction, even at the cost of exaggerated liberty..."

"Soviet Union Stands to Gain"

Left-of-center Al Hamishmar believed that "the heart of American democracy and of the entire free world" had been threatened and feared that "these shots may bring back the uncertainty and apprehensions of the mid-Sixties and early Seventies..." The paper also said that the "Soviet Union stands to gain by the assassination attempt" because "the world's attention will now be diverted from Poland to the Washington hospital."

A writer for independent Yediot Aharonot said that the incident "may be expected to heighten the feud between Vice President Bush...and Secretary of State Haig. Relations between them have not been of the best and are bound to become more strained and affect the course of American foreign policy..."

Brazil: "Another Symptom of World Wave of Violence"

Nationalistic Diario Popular of Sao Paulo saw the attempt as "another symptom of the frightening wave of violence into which our world has plunged" and said that while it disagreed with many of the new President's policies, "this is not the moment to discuss his rashness and certain mistakes he committed in analyzing Brazilian policy..."

Soviet Union: "The Question Which Worries Americans"

Moscow TASS in English provided an account of the shooting, the arrest of a suspect, and Vice President Bush's return to Washington. It also carried the text of President Brezhnev's telegram to Mr. Reagan.

Moscow domestic radio reported from Washington that "now, after the first hours of confusion that seized the U.S. capital at the news of the attempt on Ronald Reagan's life, the press here is raising a difficult question which is worrying Americans: How could it happen that another U.S. President has become the victim of crime?...Many papers today recall that four Presidents in American history have fallen victim to murderers....After the attempt on President Reagan, his brother Neil told reporters, I expected this to happen; such is the society in which we are living. The scale of terror is staggering and frightening, stated Senator Claiborne Pell. From year to year terror flourishes more and more in our country, stressed Edward Kennedy."

China: News Treatment

The Xinhua news agency in English carried news reporting of the shooting and the arrest of a suspect.

Yugoslavia: "The Blind Alley of Terrorism"

Social Alliance paper Delo of Ljubljana today called the attack "another dreadful incident so characteristic of our time and, we admit, of our world. We don't know what the motives of the would-be assassin were. Whatever they were--his and similar deeds, memories of which are still painfully fresh on this side of the Atlantic--lead inevitably to the blind alley of terrorism."

MORNING DIGEST

Foreign Media Reaction

April 1, 1981

SPECIAL: ASSASSINATION ATTEMPT - II

Voluminous news coverage and comment kept the attempt on President Reagan's life and subsequent developments on front pages in many countries around the world.

Correspondents stressed Administration efforts to maintain continuity in a difficult time and reported that Mr. Reagan was "back at work" although confined to a hospital bed. Writers called attention to his coolness and good humor and some said he would emerge as a hero from this episode with enhanced general support.

Writers emphasized Vice President Bush's role in assuring that there would be no "power void" in the days ahead. In this connection, some commentators, particularly in Britain, expressed concern over what they saw as a power struggle in the White House immediately following the attack on the President.

An underlying feeling of uneasiness about violence in America appeared in much media discussion.

"A Country in Need of Heroes Has Found One"

U.S. editor Jurek Martin of the London Financial Times declared today that "a new element of potentially great significance has been introduced into American politics and society. A country in dire need of heroes has found one and he is the President of the United States. Ronald Reagan's coolness, courage and above all humor after his brush with death...is the stuff legends are made of. The old country cowboy actually did behave like John Wayne..."

"When the dust has settled, the battle first for influence in government and ultimately for the succession will begin in earnest. Actually it had already begun with the rebuff of Mr. Alexander Haig's power play for control of foreign policy only last week, and it surfaced again on Monday afternoon.

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"Technically Mr. Haig was quite right (in assuming control in absence of the President and Vice President), but maddeningly for his own reputation and typically he misstated the justification, confusing the executive chain of command...with the Constitutional order."

Martin asserted that the Vice President had "vaulted into prominence partly as a mechanism for putting down Mr. Haig and partly because he has earned the trust and respect of Mr. Reagan and the White House inner circle" and that his "relationship with the President has changed remarkably and partly accidentally in a very short space of time..."

"For the time being, he must serve as the Administration's front man. He assumes the responsibility in disturbed international circumstances, with the threat of Soviet intervention in Poland merely the most pressing of many problems."

"Day-to-Day Operations Will Probably Devolve on Meese"

Today's Times of London ran a report by Washington correspondents Patrick Brogan and David Cross that "quite without authority--gratuitously--Mr. Haig announced that he was in charge....Edwin Meese and...James Baker...were most unhappy at Mr. Haig's conduct over the proposal to make Mr. Bush chairman of the crisis committee. His assumption of authority yesterday is not going to please them....The day-to-day running of the Government will probably devolve upon Mr. Meese."

"Bush Can Expect Early Tests on Foreign and Domestic Fronts"

Washington correspondent Alex Brummer of the liberal Guardian wrote that the Vice President "took temporary control of the U.S. Government although there was no formal transfer of authority from President Reagan, who was alert in his hospital bed recovering from his operation. Mr. Bush can expect early tests on the foreign and domestic fronts.

"For a few grisly hours on Monday afternoon it was not quite clear who was in command....The Secretary of State...announced that he was in command. Technically, Mr. Haig was overreaching himself..."

"Trouble could come if a crisis is forced on the Administration in these early days of Mr. Reagan's recovery when he would clearly not be in a position to take part in high-tension meetings and Mr. Bush and Mr. Haig would lack the peculiar authority of the President.

"It was with this fear in mind that Mr. Haig marched into the White House on Monday announcing he was in command. As the State Department officials noted yesterday, he didn't want Moscow to get the wrong message."

"For a Time...Confusion Reigns"

Washington correspondent Frank Taylor of the conservative Daily Telegraph held that "for a time Monday afternoon the confusion which reigned on Connecticut Avenue...appeared to be reflected in the White House." Noting Secretary Haig's statement to the press that he was in control, Taylor reported, "Some journalists immediately jumped to the conclusion that General Haig...had seized the opportunity to wrest governmental initiative away from Mr. Bush....The air soon cleared....'It needed someone visibly in charge. Haig did that,' one White House informant said yesterday."

"Reagan's Toughness, Good Humor Will Increase His Support"

West Germany's national business paper, Handelsblatt of Duesseldorf, today carried a byliner's observation that "Reagan's toughness and good humor even in such a critical situation will increase the number of his supporters and make it even harder for his political adversaries to incite public opposition to his economic and armament programs."

"No One Assumes U.S. System Is Unstable"

Pro-Social Democratic Westfaelische Rundschau of Dortmund remarked that "in view of America's outstanding significance for the world's security, it is understandable that the President's aides are anxious to emphasize stability (of the Administration). However, no one assumes that the American system is so unstable that it could not be headed temporarily by the Vice President."

"Spotlight on Internal Struggle for Power"

At the same time independent Westdeutsche Allgemeine of Essen judged that "a spotlight has been cast on the internal struggle for power that is in progress behind the President's back."

In the view of conservative Frankfurter Allgemeine, "Violence is as much a part of the American climate as are abrupt changes in weather conditions....Access to firearms decisively contributes to violence in the American society."

"America Again Came Close to the Abyss"

Conservative Die Welt of Bonn believed that "America again came close to plunging into the abyss of national despair" and that the attack demonstrated that "even highly armed security officials are no safe protection against a bullet fired by a determined assassin. About 55 million firearms are privately owned by American citizens. There is no protection against such a flood..."

"Bonn Concerned About a Leadership Vacuum"

A byliner's front-page report today in independent General-Anzeiger of Bonn said the West German political leadership was "concerned about further delay in drafting U.S. foreign policy and about a leadership vacuum that might intensify the power struggle between the White House and the Department of State..."

The writer held there was "jockeying for position with regard to Ronald Reagan's eventual successor" and said "there is concern in Bonn lest tension among individual members of the Reagan Administration eventually prompt Haig to resign, with the result that those forces would prevail which give priority to armament efforts over arms control negotiations with the Soviets. That might lead to a test of strength within NATO..."

"Reagan's Authority May Increase"

Independent Stuttgarter Zeitung judged that "President Reagan's authority may increase as a result of the shooting....He may appear to Americans in close to messianic glory...that may make them deaf to any criticism of Reagan's policy..."

Left-of-center Frankfurter Rundschau remarked that "violence as a result of unrestricted availability of handguns is an awful problem in American society..."

"President Did Not Lose His Composure"

News and comment on the attack dominated West German television newscasts last night. A commentator noted that the President "did not lose his composure" in the critical hours. American citizens were quoted as saying the President needed better protection.

"Everyday Life in America"

TV One's Washington correspondent Peter Merseburger said Americans were asking why violence "apparently is an essential part

of American culture" and that commentators were raising questions regarding controls over personal weapons. He added that "we get a full picture of violence in America when taking into account reports that a 22nd (sic) victim of the Atlanta murderers has been found. That is everyday life in America."

"Thank God Reagan Is Laughing Again!"

Independent Berliner Morgenpost declared, "Thank God Ronald Reagan is laughing again. Even on the operating table the 70-year-old President still represented the unshakability of his great country..."

Pro-Social Democratic Volksblatt Berlin said, "Nowhere in the world do people tend to use their guns more easily than in the United States and nowhere do people cling more to the dangerous belief that a Colt belongs in the pocket of a real man."

"Reagan's Image May Be Enhanced"

In Paris, liberal Le Monde observed that "in a country where anyone can buy any kind of weapon without any sort of authorization...this type of violence is not surprising."

The paper noted that "it is possible that Mr. Reagan's image will be enhanced...which will facilitate his relations with the press and Congress."

"Courage of a President Who Walked Into the Hospital"

Conservative Aurore also concluded that "it seems clear Mr. Reagan's prestige will emerge strengthened by his test. The U.S. public was struck by the courage of its President who walked into the hospital..."

"U.S. No More Violent Than Any Other Country"

Mass-circulation France-Soir remarked that "we have been told repeatedly that America is a country of violence and assassinations....This has been said too often. America is no more violent than any other country."

A Query on the Delegation of Power

Conservative Figaro questioned why the President did not invoke his power to temporarily delegate power to the Vice President. It asked, "What is he afraid of?"

"Does he fear his temporary replacement might encourage creeping palace struggles? Is the obvious rivalry between men like George Bush and Alexander Haig...sufficient to justify his caution?"

"Will Encourage Americans to Close Ranks"

Independent Quotidien said the attack "will undoubtedly encourage Americans to close ranks around their President.... The shooting...will be translated into a stronger determination to promote U.S. basic values. However, uncertainty and anxiety remain....Will (the President) be forced to delegate his powers to an entourage where harmony is far from prevailing?"

"The Question of the Availability of the President"

Paris-based Europe One commercial radio said today, "When the President of the United States is bedridden, the whole world feels unwell. Even if President Reagan wanted to point out that he is in very good health by signing a bill yesterday, one is obliged to raise the question of the consequences, inside and outside the United States, of the availability of the President..."

"Bush Assures Continuity...No Power Void"

Italian headlines today were "Reagan Better...Bush Assures White House Continuity...No Power Void in Washington After Attempted Assassination" (Christian Democratic Il Popolo), "America Faces President's Drama United...Reagan Better and Already Working... No Plot, The Gunman Is a Madman" (center-left La Stampa) "Reagan Back at Work...Signs Presidential Bills in Hospital...America Wonders at Wave of Violence...Six Hours Without Leadership... Washington in Chaos Until Bush's Arrival...Sigh of Relief Over Dollar" (leftist La Repubblica) and "Alarm Is Past...Reagan Recuperating Quickly...An Enormous But Vulnerable Power in a Violent Society" (Socialist paper Avanti).

"Still in the Saddle"

Centrist Corriere della Sera of Milan asked if "the would-be killer...is a mad Nazi or a hired killer" and declared, "The cowboy remains in the saddle." It headlined, "Wounded America Imposes Prudence on Moscow."

Conservative Il Giornale of Milan wrote: "The nightmare that had gripped the world lasted only a few hours....(Reagan) has already resumed his Presidential job. He even signed an urgent

bill and a Cabinet meeting is scheduled to take place in his hospital room....Polemics rage over the excessive number of guns (in America)."

Conspiracy Theories Play in Turkey

Liberal Milliyet of Istanbul focused on the easy availability of weapons in the United States and the high crime rate and urged Americans to take a serious look at their society.

Several Turkish papers seized on conspiracy theories. Leftist Cumhuriyet saw the hand of the CIA in the affair.

Tokyo media reported that Mr. Reagan "resumed presidential duties at the hospital" (liberal Asahi), but expressed concern about possible repercussions that his period of convalescence might have on U.S.-Japan relations and the international scene in general. Editorial writers, strongly critical of the continuing violence in U.S. society, called for sweeping countermeasures to prevent any recurrence.

TBS television today predicted that although President Reagan was expected to recover fully in about two months, in the interim the Administration would run into difficulties in executing its domestic and foreign policies.

Consultations on Defense and Auto Issues Delayed?

Moderate Yomiuri believed that while recovering from his gunshot wound President Reagan would not be able to execute his duties as energetically as before. It said this was unfortunate since he had not yet implemented his economic plan or completed the process of consulting with U.S. allies on the Soviet problem. It added, "It is possible that the U.S.-Japan consultations on the defense and auto issues will be delayed and Prime Minister Suzuki's summit talks with President Reagan will be postponed. But Japan should now support the Reagan Administration to promote U.S.-Japan cooperation and strengthen unity in the Western camp."

U.S. Leadership Role Endangered

Today's liberal Asahi expressed outrage at the continuing assassination incidents in this country and said attempts on the lives

of U.S. Presidents, "whether successful or not, not only reduce U.S. prestige but could also result in other practical drawbacks. In the first place, the President may have to make fewer public appearances which would cut him off from the electorate. We also fear that superior talent will not seek political careers....Above all, other countries will lose confidence in America. No country can be convincingly persuasive in the international arena when the life of its leader is in danger."

"May Interrupt U.S. Diplomatic Relations"

Moderate Mainichi today worried that "Prime Minister Suzuki's visit to the United States could be postponed as a result of the shooting incident, and the Ottawa summit may also be affected....It is possible that the event will interrupt U.S. diplomatic relations at a time when it is urgent for the Reagan Administration to coordinate relations with the Western nations."

South Korea: "Chronic American Disease"

Seoul papers gave major attention to the results of Mr. Reagan's surgery and other developments. All papers described frequent crimes involving guns in the United States as a "chronic American disease."

"The Real Face of America" in a Crisis

Independent Chosun Ilbo of Seoul ran a Washington correspondent's report headed "America Was Perfect in the Face of the Crisis." He lauded the quick actions of the Government and media to calm the American public, and described how the Administration had provided for continuous control. The writer also spoke of the calm manner of the wounded President and of the Executive authorities and Congressmen. He concluded that the "real face of America" was seen in the efficient Government and the cooperative press at a time of crisis.

Philippines: "Should Wake the American People"

In Manila, today's Philippines Daily Express and the Times Journal carried columnists' calls for reducing violence in America. The latter paper declared in an editorial headed "U.S. Must Have Gun Control," that "the trouble is that anybody can buy a gun--a crackpot, a wino...a confused revolutionary, a drug addict....This latest atrocity should awaken the American people to the need, even in a highly advanced democracy like theirs, to curtail some rights that are prone to abuse, if that democracy is to be preserved after all."

Hong Kong: "Important Lesson for Americans"

Hong Kong's independent, pro-Taiwan, pro-PRC, and Chinese language papers today generally focused on the problem of gun control in the United States. Pro-Taiwan Hong Kong Times urged Americans to "learn an important lesson from the attempted assassination of President Reagan, and start immediately to build a law-abiding...nation."

Indonesia: "May Change Presidential Style"

Jakarta's independent Kompas today termed it "shocking to note that naked and direct violence is still possible in the United States....The shooting will undoubtedly change Reagan's Presidential style. No longer will he be so free in his public appearances." The leftist Indonesian Observer concluded that "the fact that a new U.S. President--barely three months in office--became the target of an assassination attempt strongly indicates that America is submerged in a social whirlpool that affects the life of the American citizen."

Malaysia: "Damage to America's Psychic Balance?"

The conservative New Straits Times of Kuala Lumpur today said that while the assassin's shots failed they "may have done serious damage to the psychic balance and well-being of the American nation....It is a glib falsehood to label America a sick society...but it is equally a false comfort to insist on the essential virtuous purity of Americans. It must be devoutly hoped that the eternal soul-searching of the American psychodrama will not have many more tragic occasions."

"Ownership of a Gun Is Illegal in Malaysia"

Utusan Malaysia of the same city maintained that "to the American people, a gun is a plaything and a bedside companion. There is little fear in either owning or using a gun in comparison to countries in which ownership of a gun is illegal--such as Malaysia or Britain..."

Singapore: "Only in America"

Today's Singapore Straits Times wrote: "...Politicians and celebrities get killed in other countries too. But usually for a cause or under civil war conditions. It is only in America, which styles itself an enlightened and civilized country, where the killings often have no apparent cause and seem almost a sick sport."

The paper's Washington correspondent focused attention on Secretary Haig's role following the assassination attempt and said that questions were being asked about "the political health of the Secretary of State....His swiftness in grasping power demonstrates his assertiveness and will probably further weaken his position in the Administration."

Australia: "Reagan Cool, Bush Calm"

Sydney morning papers today gave massive attention to developments surrounding the incident. Writers emphasized what they considered to be apathy in the United States surrounding reform and enforcement of the gun laws.

Yesterday's nationally-circulated Australian, under the banner "A Dangerous Day for the Western World," said, "It seemed that the world faltered and stopped for a split second yesterday as a bullet ploughed into the chest of the man who is arguably the most powerful on earth....There were morning peak-hour traffic accidents in Australia as worried motorists listened to the radio broadcasts from Washington..."

The paper went on to state, "But while lamenting the lack of gun control in America, we can applaud its choice of President. Mr. Reagan remained cool under fire, courageous when wounded--an inspiring commander in chief....The world should (also) take note of...Vice President Bush, calm and in complete control of the White House shortly after the shooting..."

Indian comment on the incident was not available this morning. Media yesterday led with lengthy wire service reports on the assassination attempt.

Jordan: "We Tip Our Hat"

Amman's Jordan Times wrote today: "We have been impressed by the togetherness of the American people in their moment of crisis, uncertainty and potential danger....An awkward moment has come and gone. What remains is strength, resilience and durability. We tip our hat to that."

Jordanian headlines today included, "Reagan Exercises Responsibilities From Hospital Bed."

Israel: Gun-Control Cartoon

Opposition Davar of Tel Aviv exhibited an editorial page cartoon picturing President Reagan telling the nation, "We are a free

country. We shall not restrict the right of our citizens to buy arms." The scene appeared through the sight of a gun pointed at the President's heart.

Haig Middle East Trip Plans Show Continuity

A Washington correspondent for the paper reported that the State Department said last night that Secretary Haig will go ahead with his scheduled tour to the Middle East as one evidence among others that the Administration was functioning normally despite the attempt on the President's life.

Arab West Bank: U.S. Should Contain Own Terrorism

Among West Bank papers, pro-PLO as-Sha'ab urged today that the United States concentrate "on containing terrorism at large within its own frontiers..."

Pro-PLO al-Mithaq ironically commented on the Administration's "eagerness" to label the PLO a "terrorist organization" and the presence of terrorists within the United States, as seen in the attempt in Washington.

Argentina: "Misfortune for the Whole World"

Nationalist Diario Popular of Buenos Aires yesterday ran the view of a byliner that "something must be said when an act of barbarism like yesterday's in Washington takes place to the misfortune of the United States and the whole world. The Constitution was not suspended, martial law was not declared and the Executive, Congress and the Judiciary were not suspended..."

Brazil's press television and radio gave heavy coverage, including a replay of film footage. Allusions were made to "the violent character of Americans."

Paraguay: "Symbol of a Spiritual System"

Pro-Government La Tribuna of Asuncion said yesterday, "It is important to realize that the U.S. President is not only an individual human being but a symbol and that if that symbol is destroyed, the spiritual system it represents becomes greatly damaged....There is no doubt that it will take a strong effort to reestablish the confidence that men should have in the stability of their institutions."

Ecuador: "Potential for So Much Damage"

Moderate El Telegrafo of Guayaquil asserted: "We are happy beyond measure that President Reagan has not joined the list of North American chiefs of state who lost their lives to the bullets of assassins. But we are appalled by the idea that a lunatic, a fanatic or simply a rejected drug addict could hold in his hands the potential for so much damage..."

Senegal: "One More!"

Yesterday's Le Soleil of Dakar declared: "One more! One would be tempted to say after the attempted assassination yesterday... that no one is any longer surprised that this kind of shot goes off in the new world. There, it has almost become a habit of seeking to shorten the rule of the Chief Executive by physically eliminating him. This seems to happen to Presidents at least once during a term....The world asks if American society is afflicted by the evil spirit that secretes more and more of these 'irresponsible' men...who with no apparent motive have sought to slay their President..."

Niger: "The Negation of Freedom?"

In Niger, Government-controlled Le Sahel of Niamey said that the United States had "cultivated a veritable mystique of freedom which has its dark side. A sign of this is the open sale of weapons, unopposed by the President himself. The paradox is that this extreme of liberty can also be the beginning of the negation of freedom."

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

April 2, 1981

BRIEFING FOR REPORTERS
BY
DR. RUGE AND DR. O'LEARY

The Briefing Room

12:01 P.M. EST

MR. SPEAKES: We have with us today a gentleman you've met before, Dr. Dennis O'Leary of the George Washington University Hospital and also with us is Dr. Daniel Ruge, the White House physician.

DR. O'LEARY: Well, Mr. Reagan is resting through a really totally normal and uncomplicated post-operative course. He got some good rest yesterday and that is reflected in his appearance this morning. He is alert. He's been up walking. My understanding is he covered 50 yards in two minutes. That's pretty good for any of us. He wolfed down his breakfast and he is doing quite well.

Q Dr. O'Leary?

DR. O'LEARY: Yes.

Q Can we ask you a question? There are reports that when the President was first brought into the emergency room, he was in acute distress. Doctors who were there are quoted as saying that his vital signs were fluctuating and that he was on the edge of a potentially life-threatening situation. What are the facts?

DR. O'LEARY: Okay, let me try to address this in a little bit of detail because we've retraced the steps very carefully and I think probably the most important thing is to draw some distinction between the visual appearance of the President when he arrived in the emergency room, on the one hand and on his actual clinical condition, on the other hand.

The President did walk into the emergency room. It is alleged that he collapsed. He indeed went down on one knee, if that's collapsed, so be it. He was then picked up and carried back into the resuscitation bay where any patient who had undergone a traumatic injury would have gone.

The reason for him going down on one knee, I think, probably relates to a couple of elements. First of all, it is probably likely that he experienced a vaso-vagal reaction. It's a kind of reaction that patients, often responsive, develop when they have blood drawn. And what happens usually is that they start to sweat. They appear pale and dusky. Their blood pressure falls. And their pulse rate falls. They really look awful. However, the occurrence of this is usually is about for 45 seconds to a minute and they wake up and are fine, in no sense is at a clinically threatening situation although the visual impact can really be quite striking.

The other contributing element -- two other contributing elements, I think, are that, first of all, we have to remember that the President did lose some blood. I think again that has probably been a bit overstated. When the chest tube was first placed in, approximately 1200 cc's of blood were removed. That's a little bit over two units and for someone like Mr. Reagan, that would not have been sufficient to have caused him to go into shock as is being

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implied.

Finally, it is alleged and I believe it's probably true that Mr. Reagan, when he came in, was complaining of air hunger. Again, any patient who has a partial or total collapse of a lung will complain of air hunger. Some of that is real, you know, physiologically, they're a little bit short of air. But a lot of that is perceptual, too. You have to remember there are many patients who have a full lung removed and who function perfectly normally without any particular air hunger. The President had also coughed up some blood. Again that is totally expected for anyone with a penetrating injury of the lung. And a little blood goes a long way in terms of visual impact. Mr. Reagan was taken back into the resuscitation bay. There was a lot of swirling around of people literally, like any patient when he settles into resuscitation area, the noise level was significant. The nurse who took his blood pressure reports that she had a lot of trouble hearing his blood pressure because of the noise level in the area. Therefore, she obtained a blood pressure through palpation. That is a less satisfactory and far less accurate measure of blood pressure. It is that blood pressure level, however, that was reported in the New York Times as being a systolic in the range of 75 or so.

Simultaneously, he had an intravenous started and fluid, saline that was starting to be run into him and the next blood pressure reading not more than a minute later was 120. Well, that is not consistent with a shock-like state. It is more consistent with a little bit of orthostasis, that is that the blood pools down in the leg. He's lost a little bit of blood and is quite consistent with the Vaso-Vagal reaction. As soon as you lay him down flat, he's fine.

Q Dr. O'Leary, if they had not taken him immediately to this hospital and had taken him to a hospital at a greater distance, would that time factor created any more danger to his life?

DR. O'LEARY: Obviously, that's quite speculative. It's my own personal belief that if for some reason the President had not received attention for another 20 or 30 minutes that he probably still would have been okay. The nature of his injury, the rate of bleeding, and so forth, were not at a life-threatening level.

Again, I've reviewed the sequence of events very carefully with Dr. Eddlestein who's the Director of the Emergency Room, with Dr. Giordano, who's the head of the trauma team. Both of these individuals have seen many trauma patients covering a broad spectrum of injuries and, in their judgment, at no point in time was he even remotely close to extremis.

Q Was he bleeding from the mouth when he arrived?

DR. O'LEARY: He had coughed up some blood and I believe there's a little bit of --

Q Trickling down?

DR. O'LEARY: No, I don't think so. I think he had some blood around his lips as it has been stated to me.

Q Did he know he was shot at that point?

DR. O'LEARY: He apparently at that time did not know that he had been shot nor did the receiving nurses know. Again, that is really not very surprising if you've talked to people who have been involved in war time -- how they tell you that they were shot,

that they didn't realize it for several minutes or more than that after they had been shot, a very common reaction.

Q Doctor, does the President still have drainage tubes or intravenous tubes in his body? Does he still have attachments that would permit the insertion, reinsertion of endotracheal tubes? We're asking this because we're trying to determine why we haven't been given a picture of the President. This has caused some level of concern that we haven't seen a picture of the President.

DR. O'LEARY: Okay, well, you've got several questions built in there. They're all quite pertinent. The President still has two chest tubes in place. Again, that is -- perfectly expected it at this point in time and they will be removed at the point in time when the assessment by his primary physician, the doctor here, indicates that it's time to take those out.

He does not have an intravenous running any longer. He's on a full diet. He wolfed down his breakfast this morning. The only reason for maintaining the intravenous even through yesterday afternoon was to administer the end of the (portion) of his prophylactic antibiotics. He received his last dose at 5:00 yesterday afternoon. Like any thoracotomy patient at this point, he is occasionally receiving some oxygen therapy which is the attachment around at a 40 percent typical mixture. And that is usually placed on him when he's lying in bed when you would expect the excursions of his chest wall, would not be as great as when he is up and walking around or even sitting up.

I realize your consternation over not having any visual pictures relative to the President. But I think my own feeling is that if it were not the President and it were any other patient, that he is a patient in the hospital, the primary goal is to assure his rapid recovery. And I would prefer, medically, not to hassle him with anything else. I understand your needs and the perceived public needs. But I think our main job is to get him better. And I guess I also feel that he, like anyone else, is entitled to some privacy.

Q Let me follow that up if I may. Is there any hardware on or about the President's face or person that would look funny if pictures were taken?

DR. O'LEARY: No, there isn't. There are no close attachments relative to an endotracheal tube.

Q But, doctor, you are not telling us are you, doctor, that it's doctors order that he not have his picture taken?

DR. O'LEARY: Well, I think it's a combination of respecting his privacy. It is a medical preference not to, and I think it is the White House's preference. He looks fine.

Q Why not show us? I think that's the question.

Q Doctor, do we understand correctly that you are reducing the amount of pain killer, medication, so that the President will remain clear-headed in running the government even though he would be in more pain than a normal chest patient at this point?

DR. O'LEARY: Well, you really couldn't reduce it much from what he was getting to begin with. He's really not required very much pain medication at all now. He's down to Tylenol Number three which is about what you take for a headache.

Q When will he get out of the hospital?

DR. O'LEARY: Well, that obviously depends upon the day-by-day assessment.

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He's making very rapid progress and --

Q Mid-week? Next week?

DR. O'LEARY: Well, we would -- I think we would be hopeful, certainly by next week. His progress is super.

Q Doctor, two questions. Number one, can you describe the chest tubes? What are they connected to? And also, can you describe in more detail how he looks? You said he looks fine, but can you describe his color and a little bit more about his disposition and so forth? We understand he's in some pain.

DR. O'LEARY: Well, he's not in so much pain that he would ask, even, for pain medication. When it is suggested to him, he'll take some pain medication. I think the visual impact, for instance, when he was out walking down the hall and the nursing staff was remarking, "My, he's a fine looking man." He looks very good. He has good color in his cheeks. He has his hair combed. In many respects, he's functioning quite normally.

Q Any new jokes?

Q What about the chest tubes?

Q Is he attached to anything as he was walking?

DR. O'LEARY: The chest tubes are attached to a suction kind of apparatus under water which is how those things are handled. I've not personally examined that area, so I can't describe any detail to you.

Q What is the purpose of those tubes?

DR. O'LEARY: The purpose of the chest tubes is two-fold. One, to remove any air that continues to be in the space between the lung and the chest wall. And secondly, and of course at this particular time, most importantly to drain any fluid which accumulates in that area.

Q Doctor, do you think it's medically wise for him to take a trip to Mexico?

DR. O'LEARY: Well, we're at least three weeks away from there and I think, candidly, I'd have to say that all of that determination is going to revolve around an on-going assessment of his rate of recovery and his progress. I just can't guess how he's going to be feeling three weeks from now. He has been -- he's had a major injury and he's had a major surgical procedure and I don't expect him to be 100 percent of normal in three weeks. That's not a reasonable expectation for anyone.

Q Dr. O'Leary, what is the normal post-operative recuperation period in a case such as this? Can we expect that the President would want to take some time off once he leaves the hospital?

DR. O'LEARY: Well, the normal hospitalization would probably be in the range of one to two weeks. If you're talking about somebody who worked in a construction job, for instance, you might suggest that he not go back to work for somewhere between three and six weeks. If you were talking to someone who had, perhaps, a more sedentary kind of desk job, that individual might be able to go back to work between 10 days and three weeks or so. And for someone who's pretty hardy, a good bit less than that and obviously there are intervening steps where you could work a half-day or a couple of hours a day. The President's progress is so good at this point in time, we expect him to be -- assuming everything continues to go well, on the short end of all of these recovery periods, but **we are speculating.**

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Q **What do you have** on James Brady's
condition?

DR. O'LEARY: Mr. Brady continues to make satisfactory progress. We are a long ways from home on Mr. Brady. I think I have to underline that and inject a note of caution. He had a repeat post-operative routine CT scan last night. It is significantly improved over the CT scan that was performed just prior to surgery. This morning he still has a good deal of swelling around his eyes and his face which one would expect to evolve and disappear over time, but the swelling around his face makes it difficult for him to open his eyes. He can open his eyes with help and this morning, in doing so, the doctor held up three fingers and said, "How many fingers do you see?" And he said, "Three." That is very simple, in a sense, but I think it implies good function of some rather complex nerve pathways.

We have no evidence of any major complications yet. But there are a wide spectrum of possible complications that could develop and we're watching for those carefully. If any of those develop, that would change the outlook substantially. He's able to move around in bed with -- and to cooperate with the nursing staff in rendering his kind of standard treatments that he's undergoing. The operative drains that were placed in his head at the time of surgery have been removed. Although these are all small little things, they are all positive things.

Q But they indicate no paralysis?

DR. O'LEARY: I think it is far too early to make any neurological assessment. I think we won't have a more-or-less final neurological assessment for six to 12 months and I don't think that even a reasonably good preliminary assessment is going to be possible for a couple of weeks.

Q Doctor, how aware is he of what happened to him? Does he know that he's been shot? Does he know of the circumstances of why he's there?

DR. O'LEARY: Well, I think that's hard to assess because he's not really at an active conversation stage. He's -- yesterday, I think there was some impression that he was engaging in conversations. That is a bit overstated. He said three words yesterday. He said, "Brady, ball" and then when he was asked to say one, two, three, he repeated, "One, two, three." That's very good, but that is far from a conversation as you well know.

Q Doctor, on the President's wound, do we know, do you know whether it was now a direct hit or whether he was hit by a ricochet or a fragment of the bullet?

DR. O'LEARY: I've heard the same news reports you have, so I don't know the answer to the question.

Q Doctor, could you tell us when they discovered it was a bullet wound? And tell us at what point did he go down with one knee? Could you give us that sequence?

DR. O'LEARY: Okay. He went down on one knee as he came through the entrance into the emergency room. So, that's quite early in the sequence of events. It was not really until he got back in the resuscitation bay and he was in a supine position on the table that one could readily identify that he had a bullet wound. As soon as someone goes into the resuscitation bay, their clothes are cut aside from them in order to give the doctors full access to managing the patient. Certainly, as soon as his shirt was taken off, the bullet wound became readily apparent. So, I would say it was within probably a minute or two of the time that he got into that area. They knew right then.

Q Was there blood on his shirt?

DR. O'LEARY: I don't know whether there was blood on the shirt. I'm sorry, I just can't answer that question. There was -- there never was a lot of bleeding. The chest tube was placed in very early. As I said, the drainage from the tube was about 1200cc's -- that's about half of what he lost totally over time. He bled steadily, but not vigorously, and I think that was a very important piece of information in that it suggested that he had not -- the bullet had not struck any major vessel. And, as I say, he was very easy to stabilize, initially with fluids, and then with the blood transfusions.

Q Did they locate the bullet wound right away?

Q Doctor, what were you treating him for when you didn't know it was a bullet wound? Were you treating him for a heart condition? Or just the bleeding or what?

DR. O'LEARY: Well, let's put our time sequence -- we're talking as if this was spread out over a lot of time. The bullet wound sight was discovered, probably, within one to two minutes after the time he got on the table. That's not a lot of time. There are certain things that are standard and almost anyone who comes into that area with any kind of problem is going to have an intravenous line placed, he's going to have electro-cardiogram monitor placed. There are certain functions that we would monitor in anyone. As soon as the bullet wound sight is identified, you can bet that a chest tube is going to be placed immediately. It was all happening very quickly.

Q Doctor, I have a question on his collapse. You say he went down on one knee, but he was being supported by his agents

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and the paramedics say that his eyes rolled back in his head. The reason perhaps that he didn't fall all the way was because they carried him at that point or did he just go down on one knee and then catch himself?

DR. O'LEARY: You're getting down to a level of detail that I have a lot of trouble addressing, whether his eyes rolled back or not. I don't know. But I can tell you that if someone has a vasovagal reaction their eyes may look as if they're rolling back. They really can look very, very bad and not be in any significant clinical danger there.

Q Did he faint?

DR. O'LEARY: My understanding, fairly precisely, is that at no time did he lose consciousness. I guess I would emphasize that many patients who have vasovagal reactions will lose consciousness during that acute time. Question?

Q Sir, would the President have received all of the bullets in his body had not his aides, those in his party, Mr. Brady and the other gentlemen, been wounded?

DR. O'LEARY: That's really very hard to say. As I -- I wasn't --

Q I mean the angle, from the photographs, from the films and so forth?

DR. O'LEARY: It was my understanding that the President was shielded by the Secret Service agents and that certainly helped.

Q And Mr. Brady.

DR. O'LEARY: I presume so. I don't -- I just don't know. I wasn't there at the scene.

Q Doctor, what are his vital signs today?

Q Doctor, what was the sequence of events --

DR. O'LEARY: Wait a minute. Wait a minute. One at a time.

Q Doctor, putting together the sequence of events in the emergency room, did you talk to some of the people that were in fact quoted in some of the reports, indicating that the eyes rolled back and that these other sorts of things, to put together the sequence of events?

DR. O'LEARY: Okay, I've not discussed the matter with the paramedic. I have talked at some length with Dr. O'Neill. He feels he was maybe sandbagged a little bit. A copy of the emergency room record was obtained by the media and Dr. O'Neill, like any good, hardworking surgical intern, had been up and awake for about 40 consecutive hours when he was called. He tells me that the reporter read off a long list of information to him and then said, "Dr. O'Neill, can you confirm this?" And he said, "Yes," and that was the story.

Q Are you worried that the initial reports were too positive, however, because these kinds of things indicate it was more problematic?

DR. O'LEARY: Well, I'm not. I mean, I will absolutely stand by our original statements without any reservations whatsoever. I think you have to remember, first of all, that the hospital worked very closely with the White House and, secondly, that we were acutely aware that we had a great deal to lose by not being perfectly candid with the press and with the nation.

Q Dr. O'Leary, would you explain a little further on that question? You said you talked to Dr. O'Neill. You earlier quoted, I believe, Dr. Giordano and Dr. Edelstein. Do you know who was present when in the ER and did you speak to those who arrived first or did you speak to just Dr. Giordano, persons who arrived later?

DR. O'LEARY: Okay. Much of the information I have given to you is secondhand through Dr. Edelstein from the two nurses who were actually present and received the President in the anteroom into the emergency room area. Obviously, there were other people standing around and making their observations. Dr. O'Neill is serving as part of the trauma team and actually arrived at about the same time that Dr. Giordano did, which was roughly 30 seconds within the time that the President arrived in the emergency room area.

Q Did you say Dr. Giordano arrived within 30 seconds?

DR. O'LEARY: Dr. Giordano, as a member of the trauma team, and the trauma team, arrived almost simultaneously, within 30 seconds of the time the President physically arrived in the emergency room area.

Q Dr. O'Leary, what are the President's blood pressure and pulse rate today?

DR. O'LEARY: Well, they're, of course, never absolutely precise. The President's blood pressure has been ranging as it has all along with systolic between 120 and 130 or a little over 130, perfectly within normal range and his pulse rate is generally within the range of 70. We should all have such normal vital signs.

Q Doctor, the President's staff is taking him limited paperwork, asking him to make some minor decisions. How capable is he at this point of making decisions related to carrying on the functions of government and the functions of the Presidency?

DR. O'LEARY: He's quite capable. I wouldn't sell him short in any respect. Obviously, we feel that it is important as an intrinsic element of the President's therapy that he get adequate rest, because again, our major goal is to have a satisfactory recuperative phase. But if any important issue at all came up I don't think there'd be any question that he would be able to address it quite effectively.

Q How many hours of sleep is he getting?

DR. O'LEARY: Well, he slept, I think, in the range of eight to 10 hours last night and had napped off and on through the day. I think he's gradually catching up on his sleep debt.

Q How much time is he actually spending working? I mean, there is no question that he's doing quite a bit. How much is actually being spent and what restrictions do you have on him at the present time?

DR. O'LEARY: Well, I can't really testify to precisely how much work he's doing. He has been receiving some visitors from the White House, and he has received, I think, some telephone calls. There is some effort to limit this a bit but it has been about as active as we would want it to be and have it still be compatible with his recovery.

Q Could you clarify, there are reports medically that you had a false positive abdominal tap and that they did a laparotomy.

DR. O'LEARY: No.

Q You just indicated that there was a peritoneal lavage incision.

DR. O'LEARY: That's correct.

Q But others have said that there was a laparotomy started. Could you clarify this?

DR. O'LEARY: No, that is not true. A peritoneal lavage involves a small incision, perhaps a couple of inches beneath the umbilicus. Okay? That is not a laparotomy. The fluid is introduced and then it is taken out through tilting the patient and it was not false positive. It was unequivocally negative.

Q Doctor, can you nail down a couple of stories here for us? There are a couple of stories. Let me just ask you quickly about them. One is that when you notified the hospital over the telephone line, that the notification was simply that the presidential motorcade was on the way to the hospital but there was no further elaboration?

DR. O'LEARY: No, there were two calls and I can understand some of the confusion. The first call that came in was that the presidential motorcade was arriving and it was followed almost immediately by a second call that indicated that a Secret Service agent had been shot and injured and was on his way. That in itself immediately triggered the call to the trauma team.

Q Okay, the second point if I may ask, there is a story that has been published that when the trauma team arrived at the emergency room or at the room where the President had been brought that they were asked to produce some sort of credentials.

DR. O'LEARY: I think that was probably not true for the trauma team but by the time I arrived, which was probably four or five minutes after the President had arrived, the traffic control that was being managed both by our staff and by the Secret Service was being quite effective and I don't think it impaired the movement significantly. Our major concern was to keep the onlookers, if you will, back in order to permit movement back and forth.

Q I understand that. I was talking about an original team of the trauma unit to aid the President being asked to produce credentials and delayed. There was the story about that.

DR. O'LEARY: Okay. I don't believe that that's true but I can't give you precise details.

Q Doctor, you've been talking mostly about the physical activity and what effect that would have on the President's condition. What about mental strain? We're hearing reports about

him signing Executive Orders, all these other things. How is mental strain going to effect his recovery and what about when he gets back to the White House?

DR. O'LEARY: I think mental strain is less of an issue. All of us handle mental strain a little bit differently. The President handles mental strain pretty darned effectively. I don't think that's going to be a significant limitation at all in his recovery.

Q Doctor, I realize it was just a short span of seconds there but what were they treating him for, heart attack, blood in the mouth thinking there was some sort of a stroke, or what? Before they knew it was a bullet?

DR. O'LEARY: I don't know what further to elaborate.

Q Well, that's not quite clear. Did they assume he had a heart attack, is that it? The first people who worked on him before you got there, I guess.

DR. O'LEARY: When a patient enters into the resuscitation area for reasons that he's been injured or doesn't look good or what have you, the initial measures taken are general measures that would apply to a variety of conditions and problems and at the same time the patient is being evaluated very quickly, through very standard measures, in order to obtain some diagnostic precision which will govern the further specific therapeutic efforts. I think, for instance, that he had monitor lines placed on him. He had an intravenous started. That would apply to almost anyone, if you will, as soon as the bullet hole was identified he had a specific measure taken, the placement of a chest tube, and we moved from there.

Q How often do the doctors see him and has he said anything funny lately? You had a lot of one-liners the first night.

DR. O'LEARY: I think he's maintained his humor but I don't have any of the precise copy. He is -- we have really tried to limit the amount of physician involvement. He is a post-operative thoracotomy patient in the presidential surgical suite. We have a chief surgical resident in constant attendance. Dr. Ruge, his personal physician, is in constant attendance,

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and Dr. Aaron, his primary surgeon, visits him several times in the course of the day and Dr. Aaron calls upon such additional consultants as are necessary, which haven't been very necessary.

Q You mean he's not in the surgical suite? He's in the Presidential -- it's not an ordinary hospital room, then?

DR. O'LEARY: Well, a couple days ago, it didn't even exist.

Q Could I just follow this up? Is it the same accommodations that other patients have? Or is it something different?

DR. O'LEARY: He is in a standard patient room, however, we, for obvious security reasons, had to create a suite out of an existing patient wing --

Q It was just a use of your charm which seemed to --

DR. O'LEARY: No. You would probably call it a suite and we wouldn't have had a suite if it hadn't been for the President. So, if you follow it logically, it is an independent patient care area. It has its own supplies, its own drugs, its own nursing staff. It is totally capable of standing alone in terms of providing care to him.

Q Doctor, could you elaborate on the breathing assistance that the President is getting, I gather, sporadically, especially when he's lying down? How is that done?

DR. O'LEARY: Well, I wouldn't say -- breathing assistance is really not quite appropriate. He is undergoing coughing therapy. He is a very highly motivated and effective patient. That's important to make sure he keeps clearing his airways. He's doing very well with that. He received some chest physical therapy. This is all standard therapy in a post-thorocotomy patient.

Q How are you handling the oxygen?

DR. O'LEARY: Okay. The oxygen, which he only receives occasionally, is a very simple little plastic tube that is draped around his head so that it will stay in place and he doesn't have to hold it up there. It has a couple of little prongs that just lie right underneath his nose and it provides a little bit of oxygen enrichment as he sits there and breathes normally.

Q Do you expect any --

DR. O'LEARY: He breathes fine all by himself. This is just to give him a little bit enrichment when he's lying back in bed and doesn't have full chest expansion.

Q Do you expect any depression?

Q You mentioned various tubes and devices that the President has at various times had. Can you give us the total number of incisions, openings, whatever, that were made in his body as a result of these procedures?

DR. O'LEARY: Probably within one. That's not too bad. He has the peritoneal lavage site below his umbilicus. He has his thorocotomy incision site and he has two chest tubes in place, each of those going through a separate small opening in the skin. I do not know whether one of those two tubes is through the same site that the tube in the emergency room was placed through which might be an additional incision site and that's it.

Q Do you think there will be any depression?

Q Doctor, you said before that the bullet hit ~~the~~ top of the seventh rib. Where on the body did it hit that rib?

DR. O'LEARY: My understanding is laterally, it entered, as I described previously, under the left armpit, traveled down and medial somewhat which would be a fairly sharp angle down through the chest wall itself of a distance of about three inches and then struck the seventh rib and moved inward.

Q Is it right under where it came into the body?

DR. O'LEARY: Yes, or a little bit more medial. More like a steep diagonal line as I understand it.

Q Could you spell vaso-vagal?

DR. O'LEARY: V-a-s-o - ~~v~~-a-g-a-l.

Q Doctor, could you ~~re~~capitulate the sedation the President has had since the surgery was completed?

DR. O'LEARY: Well, please remember that I'm not personally taking care of the President and that's a level of detail I haven't kept apprised on. My understanding is that he has required, by normal standards, minimal pain medication and essentially no sedation.

Q Doctor, are you denying flatly that he was ever in danger of death?

DR. O'LEARY: I am denying that flatly.

Q Sir, would you assess the value of the operation of that emergency unit there?

DR. O'LEARY: Excuse me? I --

Q Would you assess the George Washington University emergency unit?

DR. O'LEARY: Well, I'm a little biased, you have to understand that. (Laughter.) We think it's very good. It is a certified trauma unit of which there are four in the District of Columbia. Because of our physical location in the city, we receive a large number of trauma patients and we have a lot of experience in dealing with them. We think we're pretty good at it.

Q Doctor, did the President get pre-surgical sedation when he was in the emergency or resuscitation bay?

DR. O'LEARY: He did not receive any there. I don't know whether he received separate medication from his anesthesia. As I had described previously, his ~~anesthetic~~ was really a balanced anesthesia which involves several agents and it's kind of preferred type of anesthesia today.

Q How quickly -- how much time passed from the time he got into the resuscitation bay to the time he was taken to the operating room and --

DR. O'LEARY: About 40 minutes which -- the major delay being the necessity for two separate x-rays which had to be taken and then --

Q Then was he conscious or beginning to go under during the 40-minute period?

DR. O'LEARY: No. He was totally alert through that time

up until the time he received -- started to receive his anesthesia in the operating room.

Q And where did he receive that? In the operating room?

DR. O'LEARY: In the operating room.

Q Doctor, you indicated earlier there was a written record of the first few minutes. Is there such a record and is it available to other newspapers?

DR. O'LEARY: I don't have it. Again, I think you have to get into the issue of medical records and privacy. We do not distribute patient medical records at all, except upon the authorization of the patient himself.

Q Will there be any depression or traumatic reaction from this shocking event to the President himself? Or --

DR. O'LEARY: I doubt that very, very much.

Q How much is the bill right now, Doctor?

DR. O'LEARY: This is a good time to turn it over to Mr. Speakes.

Q Has your wife given birth yet?

DR. O'LEARY: Three weeks.

Q Three more weeks.

MR. SPEAKES: Let me add a couple of things that are to keep you up to the minute. Senator Laxalt and Senator Baker met with the President at the hospital this morning for 10 minutes from 12:00 o'clock until 12:10. The President said, when the two Senators entered the room, speaking to Laxalt he said, "I saw you on TV this morning." He said, "I see all the early shows now." Senator Baker --

Q Does he have more than one television?

MR. SPEAKES: I don't think so.

Q He switches around.

Q A channel switcher.

MR. SPEAKES: Senator Baker says -- equal treatment. Senator Baker says to the President, "There is a lot of love and general devotion to you on Capitol Hill." The President later in the conversation said, "I found out it hurts to get shot." There was discussion of a resolution that's been passed on the Hill today that I'm not quite certain of the details, but it commends Agents Parr and McCarthy and the President made a statement on that, saying, "They did just fine." Senator Baker reported to the President that the reconciliation bill was near passage in the Senate and that they had rebuffed 26 amendments and Senator Baker characterized it as "nothing like that before in legislative history."

Q Since the day they passed the bill to repeal the black-out on pro-television games. (Laughter.)

MR. SPEAKES: Other than that, that's up to the minute.
Thank you.

Q Is Dr. Ruge going to come out?

Q Dr. Ruge refused to come out.

Q Larry, who provided that notetaking?

MR. SPEAKES: David Fisher.

Q Larry, will there be a photograph released tomorrow of the President?

MR. SPEAKES: I don't want to lock us into a date, but we anticipate having one soon.

Q What's the latest, Larry, on the review by the Secret Service of what happened that day?

MR. SPEAKES: Bill, I don't know. I assume they have an on-going situation. Secretary Regan testified this morning, but I don't have the --

Q Will the White House now release the missing photographs in the sequence that you released two days ago -- in the time we see the President emerge and the time the President has already been put in the car?

MR. SPEAKES: Sam, as I reported to you earlier, there is no missing photograph in there. That's shot one and shot two on the proof sheet which I've examined myself.

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Q You're denying that there are any photographs in between?

MR. SPEAKES: I'm denying that shot one you see there is the first shot and that the White House photographer put his camera down and then he resumed shooting and you have shot two. That's the extent of it.

Q It would surprise you if someone in the White House said otherwise then?

MR. SPEAKES: Well, I have spoken to the photographer and that's what he told me.

Q Larry, is the President aware of the prediction made by this California psychic in January? What did he think of it? And are you aware of any effort to pass on a warning?

MR. SPEAKES: I can't repeat it. I'm not aware that he's aware.

THE PRESS: Thank you.

END

12:40 P.M. EST

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

March 30, 1981

REMARKS OF THE PRESIDENT
AT THE NATIONAL CONFERENCE OF THE
BUILDING AND CONSTRUCTION TRADES

Washington Hilton Hotel
Washington, D.C.

2:03 P.M. EST

THE PRESIDENT: Mr. President, Reverend Clergy, gentlemen here on the dais, and you ladies and gentlemen, -- there's been a lot of talk in the last several weeks here in Washington about communication and the need to communicate. And the story that I haven't told for a long time but somehow it's been brought back to me since I've been here about communication and some of the basic rules of communication. It was told to me the first time by Danny Villanueva who used to place-kick for the Los Angeles Rams, and then later became a sports announcer, and Danny told me that one night as a sports announcer, he was having a young ball player with the Los Angeles Dodgers over to the house for dinner and the young wife was bustling about getting the dinner ready while he and the ball player were talking sports. And the baby started to cry. And over her shoulder, the wife said to her husband, "Change the baby." And this young ball player was embarrassed in front of Danny and he said to his wife, "What do you mean change the baby? I'm a ball player. That's not my line of work." And she turned around, put her hands on her hips and she communicated." (Laughter.) She said, "Look, buster, you lay the diaper out like a diamond, you put second base on home plate, put the baby's bottom on the pitcher's mound, hook up first and third, slide home underneath and if it starts to rain, the game ain't called, you start all over again." (Laughter. applause.)

So, I'm going to try to communicate a little bit today. I'm pleased to take part in this National Conference of the Building and Construction Trades Department of the AFL-CIO. And I hope you'll forgive me if I point with some pride to the fact I'm the first President of the United States to hold a lifetime membership in an AFL-CIO union. (Applause.)

And, Mr. President, I'm very grateful for your words about cooperation. Now, if I can only persuade certain individuals up on the Hill to do the same thing, we won't have any trouble at all. (Applause.)

But members of your organization have played and do play a great part in the building of America. They also are an important part of the industry in which my union plays a part. Now, it's true that grease paint and make believe are not tools of your members' trade, but we all know the meaning of work and of family and of country.

For two decades or more, I participated in renegotiating our basic contract when it came renewal time. And here, too, we have much in common.

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Sitting at the negotiating table, we were guided by three principles in our demands. Is it good for our people? Is it fair to the other fellow and to the customer? And is it good for the industry?

Samuel Gompers who founded the American Federation of Labor and who literally gave his life to that cause said, "Doing for people what they can and ought to do for themselves is a dangerous experiment. In the last analysis the welfare of the workers depends upon their own initiative. Whatever is done under the guise of philanthropy or social morality, which in any way lessens initiative, is the greatest crime that can be committed against the toilers. Let social busybodies and professional public morals experts in their fads reflect upon the perils they rashly invite under the pretense of social welfare." Samuel Gompers was repudiating the socialist philosophy when he made that statement. No one worked harder to get or believe more in a fair shake for the people who sweat as the fuel of our country, but he didn't believe that this should or could come from government compulsion.

America depends on the work of labor and the economy we build should reward and encourage that labor as our hope for the future.

We've strayed far from the path that was charted by this man who believed so much in the freedom and dignity of the worker. We are in today's economic mess precisely because our leaders have forgotten that we built this great nation on rewarding the work ethic instead of punishing it.

We've gone astray from first principles. We've lost sight of the rule that individual freedom and ingenuity are at the very core of everything that we've accomplished. Government's first duty is to protect the people, not run their lives. What have been some of the results of this straying from basic principles? Well, for one, violent crime has surged 10 percent making neighborhood streets unsafe and families fearful in their homes. We've been left with a legacy of almost eight million people out of work -- 666,000 of them construction workers. All of these people have been robbed of a basic human dignity enforced into the humiliation of unemployment. The annual inflation rate has soared to nearly 12 percent, making a mockery of hard work and savings. And our national debt has grown to more than \$950 billion despite taxes that eat up an ever-increasing share of the family dollar.

This deficit has particular meaning for you because when government has to borrow to pay its bills, it competes for private capital, driving interest rates up and construction starts down. So, when people ask me why we have to cut down the budget deficit, I think the answer is pretty clear. If we don't get control of the budget and stop wild and irresponsible spending, we will repeat past intolerable prime interest rates of more than 20 percent, rates which have played havoc with the lives of your fellow workers. And when we do not have economic security at home, our national security is threatened. We've let our defense spending fall behind and our capability to defend ourselves against foreign aggressors is not what it should be. These trends not only must stop, believe me, they will be stopped.

Every American, and especially all the working people of our country have an enormous stake in what we do. You pay the most taxes. You believe in a work ethic but subsidize a government that does not. You,

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who have traditionally saved to provide for your futures to date, cannot save. You who most want to work are most likely to be laid off. You, through taxes on your hard-earned wages, pay for what could be as much as \$25 billion each year in federal waste, abuse and outright fraud in government programs. Franklin Delano Roosevelt spoke of "the forgotten man at the bottom of the economic pyramid." Well, today it's safe to say that the people at both ends of the pyramid are getting attention. The man who's forgotten is the fellow who built it.

Such a man wrote his congressman a few weeks back and that letter landed on my desk. I've gotten tens of thousands of letters about our plan for economic recovery. I appreciate all of them, **but a few of them really stand out**, and this man's letter is one of them. He's an unemployed factory worker from Illinois, the Peoria area, but he worked in construction for ten years before that. His income right now is totally dependent on unemployment and supplemental benefits from the company he worked for. He and his wife have only been married three months, but she's been laid off too. He wrote to say that if spending cuts in government affect his benefits, it'll be hard for his family, but they'll make it. And shades of Sam Gompers, he ended his letter saying that when the opponents of our economic plan start lobbying against it -- and let me quote, he said, "Let them know that there is someone out here who's seen what they can do and is willing to stake his future on trying a different approach."

That man has faith in America and faith in what the American people can do if the government will only let them do it. And that man, like most of America, wants a change. Right now, we have the highest peacetime deficit in living memory. Federal personal taxes for the average American family have gone 58 percent in the last five years. And regulations by the government cost consumers an estimated \$100 billion a year. The man in Peoria's right. Across this country, there are millions of people like him yearning for a different approach.

They are yearning for us to reach for our hopes and make room for our dreams. To put it bluntly, they want something different for a change. Instead of halfway solutions, jerry-built programs tied together with red tape, they're ready for an overhaul to make the engine work again.

I've heard the complaints coming often from those who had a hand in creating our present situation. They demand proof in advance that what we've proposed will work. Well, the answer to that is we're living with the proof that what they want to continue doing hasn't worked and won't work. I believe what we have proposed will work simply because it always has. We must get control of the budget monster, get control of our economy, and I assure you, get control of our own lives and our own destinies.

What has been submitted to the Congress is a four-point comprehensive program or package for economic recovery. If only part of the package is passed by Congress, we'll only ease some of our problems and that isn't the solution at all. We must first get government spending under control. And let me make something plain. We're not asking that government spend less than it has been spending, although that might not be the worst idea in the world. We're simply proposing that government increase its spending in 1982 over 1981 by 6.1 percent, not 14 percent, as has been advocated.

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If we keep spending at the present rate of increase, our budget will double again in six years. Now, I propose cutting \$48.6 billion from the federal budget in Fiscal Year '82. Now, it's true these are the largest spending cuts ever proposed. But even with these cuts, the budget will still increase by \$40 billion next year and there will probably be a \$45 billion deficit. Without our cuts, that deficit will be more than \$90 billion. The second point is a 10 percent across-the-board tax rate cut every year for the next three years. This is the most sweeping tax incentive program in the last 20 years, the largest tax rate cuts ever proposed. And again, we're not asking government to get along on less money than it's been accustomed to. Our largest in history tax cut will only reduce the largest in history tax increase that was imposed on all of this at the beginning of this year. Now, I have a feeling that in all of the arguing and rhetoric, many Americans have lost sight of the fact that they're not facing taxes as usual, but a gigantic tax increase that will take \$770 billion extra out of our pockets over the next six years. We think that's too much. This government, without taking a single vote in Congress, has raised billions of dollars from taxpayers in the last few years, just from through inflation. The system keeps kicking people up into higher brackets, as they've tried to keep up with the cost of living increase, bleeding their earnings, sapping their incentive and, quite frankly, making a mockery out of a tax system. Not too long ago, only three percent of the people who work and earn in this country were in a 30 percent tax bracket. Today, 33 percent are in that bracket and they have no more purchasing power now than they had before when they were in a much lower bracket. There are just too many people in this town who thinks this money belongs to the government. Well, it doesn't. It's your money. It's your sons and daughters money that they're hoping to use for a new home. It's your parents money that they need for a decent retirement. And if we do nothing else in this administration, we're going to convince this city that the power, the money, and the responsibility of this country begins and ends with the people and not with some cinder block building in Washington, D.C. (Applause.)

The third measure we've called for is elimination of excessive regulation. Now, I know you have no experience with regulation. ~~Over-regulation~~ affects every industry. Many of you know people who are out of work because of the way it affects yours. It's estimated that total regulations have added as much as 20 percent to the cost of a home. Indeed, I've seen the figure more recently put at 22 percent as the cost. I've told before, I have a neighbor out in my neighborhood in California who was building his own home, and he got so fed up with all the paperwork and the regulations required that he pasted them all together into one strip of paper, put up two poles in front of the half-finished house and strong them up across there. This strip of paper was 250 feet long.

And, finally, we're determined to work with the Federal Reserve Board to develop a monetary policy consistent with the economic program designed to stabilize the money supply, reduce inflation, and allow interest rates to come down.

People who hold down jobs in the building trades probably understand better than anyone, well, that is, better than anyone except someone who's just lost his job in the building trade,

the need for a stable monetary policy. Fewer than one in eleven American families can afford to buy a new home. Housing starts are down by 36 percent from what they were in 1978. Mortgage rates for this year are averaged 13-1/2 percent, although I'm told in some parts of the country they're currently running in excess of 15 percent.

The main source of strength in this fight is going to be the people themselves. The idea is to unleash the American worker, encourage the American investor and let each of us produce more to make a better life for all. After all, why should we pay for some luxuries that are not truly essential to our well-being, pay by way of a subsidy when the man and his wife in Peoria are out of work? Why should we subsidize increased production of some things that we already have in surplus? And why should we go in debt to pay for school lunches for children of upper-income families when borrowing by government may cost you your job?

We not only shouldn't do those things, we no longer can afford to do them. We'll continue to fulfill our obligations to those who must depend on the rest of us. Those who are deserving can rest assured that they'll not be cut adrift, but the rest of us will feel the impact of the budget cuts, which have been distributed through the economy, as evenly as possible.

There is one area, however, where we must spend more and that is for our national defense. Now, don't get me wrong. Cap Weinburger, Secretary of Defense, has shown me programs in his department where we can and will realize substantial savings. We'll cut 2.9 billion in next year's budget alone and the cuts will accumulate to more than 28 billion by 1986 in the Defense Department. But those savings will be applied to the necessary things we must do, thus reducing the amount of additional spending that we'll need.

Since 1970 the Soviet Union has undergone a massive military build-up, far outstripping any need for defense. They've spent \$300 billion more than we have for military forces resulting in a significant numerical advantage in strategic nuclear delivery systems, tactical aircrafts, submarines, artillery, and anti-aircraft defense. And to allow this defense or this imbalance to continue is a threat to our national security.

It's my duty as President, and all of our responsibility as citizens, to keep this country strong enough to remain free. (Applause.) As union members and as concerned citizens of the world, we watch with great interest the struggle of our fellow workers in Poland. Their courage reminds us, not only of the precious liberty that is ours to nourish and protect, but of the spirit in each of us everywhere. The Polish workers stand as sentinels on behalf of universal human principles and they remind us that on this good earth, the people will always prevail. They serve to show us how trust and unity keep alive the very purpose of our existence and to remind us that man's work is not only directed at providing physical sustenance, but that the toil of men and women everywhere must also have the goal of feeding the spirit of freedom.

As we work to solve our economic problems, let us tap that well of human spirit. We'll find more than strength of numbers and strength of **resources**, we'll find strength of individual determination.

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We may even find strength in mutual trust. For too many years now, we've trusted numbers and computers. We've trusted balance sheets, organization charts, policies and systems. We've placed trust in rules, regulations in government, government dictates. Well, I think it's about time that we placed trust in ourselves. I'm here today because I salute what you've done for America. In your work you build. In your personal lives, you sustain the core of family and neighborhood. In your faith, you sustain our religious principles. And with your strong patriotism, you're the bulwark which supports an America second to none in the world. (Applause.)

I believe the American people are with us in our cause. I'm confident in our ability to work together, to meet and surmount our problems, and to accomplish the goals that we all seek.

Now, I know that we can't make things right overnight. But we will make them right. Our destiny is not our fate. It is our choice. And I'm asking you as I ask all Americans, in these months of decision, please join me as we take this new path. You and your forebears built our nation. Now, please help us rebuild it and together we'll make America great again. Thank you very much. (Applause.)

END

2:24 P.M. EST

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

March 30, 1981

BRIEFING FOR THE PRESS

The Briefing Room

(3:37 P.M. EST)

MR. GERGEN: Good afternoon. This is to confirm the statements made at George Washington hospital that the President was shot once in the left side, this afternoon, as he left the hotel.

His condition is stable.

A decision is now being made whether or not to operate to remove the bullet. The White House and the Vice President are in communication. And the Vice President is now en route to Washington. He is expected to arrive in the city this afternoon.

Mrs. Reagan is currently with the President at the hospital. For your background, we anticipate that press statements, additional press statements, will be forthcoming from the hospital site.

I'd like to add two notes. We have been informed by Jim Baker that the President walked into the hospital.

I would also like to inform you that in the building as of the moment are the Secretary of State, the Secretary of the Treasury, the Secretary of Defense, and the Attorney General as well as other assistants to the President.

Q What building, the hospital?

MR. GERGEN: No, in this building.

Q Do you have any condition on Brady, on Jim Brady?

MR. GERGEN: I'm sorry, we do not. We would like to get that for you as rapidly as possible.

Q Will the Vice President act as President under these conditions?

MR. GERGEN: No. Because of the delicacy of the situation we wanted to inform you that the Vice President is on his way back to Washington.

I would emphasize once again that the President's condition is stable and that we were informed by Jim Baker that he did walk into the hospital.

Q Could he have been hit by a ricochet? Is there any chance that he was hit by a ricochet?

MR. GERGEN: I'm sorry, we simply don't have enough information that is hard at this moment.

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Q Is the President conscious now? Is the President conscious?

MR. GERGEN: I'm sorry, I do not know the information on that so I'm really not able to respond.

Let me say this, let me just emphasize this for your background: the folks at the hospital are obviously closer to this

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situation from a moment-to-moment basis and we are here. We are obviously in very close communication with them and we will try to keep you informed here. But that the primary statement, we expect, will be coming from the hospital because we feel that they are closer to the facts.

Q Who is there, David, at the hospital?

MR. GERGEN: Well, as of the moment, in addition to Mrs. Reagan as I've informed you and others -- Mike Deaver, as you know, and Dave Fisher were with the President at the time. Four people went up together, Ed Meese, Jim Baker, Larry Speakes and Lyn Nofziger went together to the hospital -- oh, I'm not sure of the time. Frankly, the time of these events have run together somewhat.

But we will try to keep you posted here as well as we can. I think you all understand the delicacy of the situation. I simply don't want to report facts that we're uncertain of as of the moment.

This is really to confirm what has been said from the hospital already.

Q David, do you know whether there's any plans to move the President to Bethesda, or Walter Reed, or is he going to stay at George Washington?

MR. GERGEN: I cannot answer either of those questions. We will, as soon as we get additional information, we will obviously try to help you.

I think if you'll be patient, as the situation demands, we will try to get as much information for you as possible.

Q Dave, is the President under any sedation?

MR. GERGEN: I cannot answer that. I really would like -- we basically wanted to let you know where we were as of the moment. We will try to let you have further information as we can. Thank you very much.

Q What time with the Vice President arrive?

MR. GERGEN: Later this afternoon.

END

3:42 P.M. EST

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

March 30, 1981

BRIEFING FOR THE PRESS
BY
SECRETARY HAIG

The Briefing Room

4:14 P.M. EST

SECRETARY HAIG: I just wanted to touch upon a few matters associated with today's tragedy. First, as you know, we are in close touch with the Vice President who is returning to Washington. We have in the Situation Room all of the officials of the Cabinet who should be here and ready at this time.

We have informed our friends abroad of the situation, the President's condition as we know it, stable, now undergoing surgery. And there are absolutely no alert measures that are necessary at this time we're contemplating.

Now, if you have some questions, I'll be happy to take them.

Q The Crisis Management, is that going to be put into effect when Bush arrives?

SECRETARY HAIG: The Crisis Management is in effect.

Q Who is making the decisions for the government right now? Who's making the decisions?

SECRETARY HAIG: Constitutionally, gentlemen, you have the President, the Vice President, and the Secretary of State in that order and should the President decided he wants to transfer the helm to the Vice President, he will do so. He has not done that. As of now, I am in control here, in the White House, pending return of the Vice President and in close touch with him. If something came up, I would check with him, of course.

Q What is the extent of the President's injury?

SECRETARY HAIG: Well, as best we know, he's had one round enter his body, in the left side, into the left lung and there is surgery underway to remove the round now. When the President entered surgery, he was conscious. His signs were stable. And the situation is very clear.

Q Did you talk with him by phone before surgery?

SECRETARY HAIG: No, I did not nor was it necessary. I was in close touch with both Mr. Meese and Mr. Baker throughout and have been from --

Q Mr. Secretary, approximately when did you arrive at the White House after following --

SECRETARY HAIG: Very few moments after the incident, very few moments after the incident

Q And do you know what is the condition of Mr. Brady?

SECRETARY HAIG: We understand that -- I just saw on

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television what you saw and it sounds serious.

Q What's the reaction of the Soviets on this?
Any reaction?

SECRETARY HAIG: I don't anticipate any reaction.
I think you've gotten all that you need for the moment. In fact --

Q Will you remain in charge here until the Vice
President returns?

SECRETARY HAIG: We will stay right where we are until
the situation clarifies.

Q How long has the President been in surgery, sir?

Q When is the Vice President expected here?

Q 8:00.

SECRETARY HAIG: Later this afternoon.

Q Do you know when the operation began on the President,
about what time?

Q Will he go to the hospital?

SECRETARY HAIG: Was I here? Yes.

Q What time?

SECRETARY HAIG: What time was the -- I don't know. Just
it was shortly after that announcement that you heard on the --

Q What time will the Vice President be back, sir?

Q Early evening.

SECRETARY HAIG: I'm not going to make it a habit of
saying what I --

Q Will you come back and talk to us soon?

Q Mr. Secretary, any additional measures being taken --
was this a conspiracy or was this a --

SECRETARY HAIG: We have no indications of anything like
that now, and we are not going to say a word on that subject until the
situation clarifies itself.

Q Do you anticipate from what you know of the President's
condition that the Vice President will have to for a period of time
take the role of acting President?

Q That's a fundamentally premature question,

END

(4:22 P.M. EST)

THE WHITE HOUSE

Office of the Press Secretary
(Washington, D.C.)

For Immediate Release

March 30, 1981

BRIEFING FOR THE PRESS
BY LYN NOFZIGER

Ross Hall,
George Washington University Hospital,
Washington, D.C.

(5:10 P.M. EST)

MR. NOFZIGER: I have two bits of information here. The first concerns the President. He went into surgery roughly an hour ago. He is still there and will be there for a while longer. However, the doctors have come out and given a preliminary report to Mrs. Reagan and their word is that his condition is good and it is stable.

Beyond that, I have no further comments.

Regarding Jim Brady, the Press Secretary, he is still in surgery. He has a head wound and beyond that I have no further knowledge.

Q What kind of operation are you performing -- or is the doctor performing on the President?

MR. NOFZIGER: I think that we'll just let it go that he is in surgery and it is -- well, I think we'll just let it go at that.

Q Can you confirm it or not that Brady has suffered a serious head wound?

MR. NOFZIGER: I can confirm that Mr. Brady suffered a serious head wound, yes.

Q Where is Vice President Bush?

MR. NOFZIGER: Last I heard, he was on an airplane headed this way.

Q Are you going to arrange a medical briefing for us later today?

MR. NOFZIGER: We will try to arrange one after the President is out of surgery and after we've talked to them. Yes, we will try to do that.

Now, one further thing. We will continue to keep you posted here this afternoon and tonight. Tomorrow we expect to move the briefings back down to the White House and do them in their regular -- in the regular setting there.

Q How about the other men who were shot?

MR. NOFZIGER: I have no information on them.

One at a time.

MORE

Q Was the bullet inside the President? Is that why they went in and was there more than one bullet?

MR. NOFZIGER: There was only one bullet and I just cannot comment on the operation. I haven't had a chance to talk to the doctors.

Q Who is the President's doctor?

MR. NOFZIGER: I do not have a name.

Q (Inaudible.)

MR. NOFZIGER: The only thing that I want to say is that he will be in there for a while yet.

Q Do you know whether or not the lung collapsed because of the wound?

MR. NOFZIGER: I have not heard. As I say, the doctors say his condition is good.

Q Lyn, did you get to see him before the operation began?

MR. NOFZIGER: Did she?

Q Yes.

MR. NOFZIGER: Yes.

Q Is there any thought of transferring the President to any other hospital?

MR. NOFZIGER: We'll just wait and see. You're a little premature.

Q Can you confirm that it's open chest surgery?

MR. NOFZIGER: No, I can't.

Q Lyn, did they give you a specific location on the bullet? How close to the heart did it come?

MR. NOFZIGER: My preliminary reports were that it entered the left chest and clearly it did not -- no, I can't. It did not, obviously -- there is no indication that it nicked the heart or anything like that.

Q (Inaudible.)

MR. NOFZIGER: I can't tell you.

Q Was the President conscious before the surgery or did he lose consciousness?

MR. NOFZIGER: He was conscious as he went into surgery.

Q Did he say anything?

MR. NOFZIGER: Oh, yes. I have some stuff here. I'm glad you reminded me of that because I took some notes. As he was going down the hall into surgery he winked at Baker, James Baker.

Q Say it again, please?

MR. NOFZIGER: Yes. As he was going down the hall on the gurney, I guess they call them, to surgery, he winked at Baker. He had earlier told Senator Laxalt, who was there, "Don't worry about me. I'll make it." He had told Mrs. Reagan, "Honey, I forgot to duck."

Q What?

MR. NOFZIGER: "I forgot to duck." And as they were wheeling him into surgery he saw Heese and Baker and Deaver there and he said, "Who's minding the store?" And then when he got into the operating room he looked at the doctors and he said, "Please tell me you're Republicans." (Laughter.)

So --

Q (Inaudible.)

MR. NOFZIGER: That, literally, is all I have and if you will excuse me we will keep you informed as quickly as we know anything.

Q Lyn, are they still in the operation?

MR. NOFZIGER: I don't know. I don't have the vaguest idea. I don't know. I'll check on that. I don't know.

END

5:25 P.M. EST

THE WHITE HOUSE

Office of the Press Secretary
(Washington, D.C.)

For Immediate Release

March 30, 1981

BRIEFING FOR THE PRESS
BY LYN NOFZIGER,
DR. O'LEARY,
AND SHEILA PATTON

Ross Hall,
George Washington University Hospital,
Washington, D.C.

(7:30 P.M. EST)

MR. NOFZIGER: Ladies and gentlemen, can I have your attention. Everybody happy? The President is out of surgery and is in good condition and I have brought with me here this evening Dr. Dennis O'Leary, who is the Dean for Clinical Affairs at George Washington University Hospital. Have I got that?

DR. O'LEARY: Yes, sir.

MR. NOFZIGER: Dr. O'Leary will brief you on the President's operation and on his condition as well as that of the Secret Service agent.

Following that, Sheila Patton, who is Mrs. Reagan's press secretary, will have a word to say about Mrs. Reagan. So now let me introduce to you Dr. Dennis O'Leary. Doctor?

DR. O'LEARY: Thank you. Should I use the podium?

Mr. Nofziger has told you the President is in the recovery room. He is in stable condition and he is awake. He was at no time in any serious danger. He was alert and awake with stable vital signs up until the time he underwent anesthesia. He was in the operating room for approximately two hours. Part of that time was spent ascertaining that he did not have any blood in his abdominal cavity. Indeed, he did not. It was a single bullet wound that entered slightly underneath the left armpit. It traversed about three inches of the chest wall and then ricocheted off the seventh rib into the left lower lobe of the lung and moved about three inches into the lung substance itself.

The operative incision was about six inches in width, a relatively simple procedure. The bullet was removed and then the incision was closed. As I say, he is stable and in good condition.

Q What is the prognosis for his recovery?

DR. O'LEARY: The prognosis is excellent.

Q You are saying that he will no doubt recover? How long a time, Doctor?

DR. O'LEARY: That is always difficult to say. The President, however, is an excellent physical specimen and we do not anticipate any problems. It is always hard to be precise as to how long he'll be hospitalized, but he is clear of head and should

Q Did the bullet fragment when it hit the lung?

DR. O'LEARY: The bullet was distorted and we believe that it probably was distorted by virtue of impacting against the seventh rib as it redirected its path into the lung tissue.

Q Any permanent damage done to the heart?

DR. O'LEARY: We do not believe there is any permanent injury. The heart area was explored. The heart was not involved at all. There were no major bleeding points in the lung and there was no involvement of the aorta, the major vessel running through the chest.

Q Has the lung been re-inflated?

DR. O'LEARY: The lung has been re-inflated. He has a couple of chest tubes in.

Q What about the Secret Service agent?

DR. O'LEARY: Okay. Mr. McCarthy had a single bullet wound also. It entered the posterior right chest and passed through the lung tissue causing virtually no damage at all except for the passage tract. It passed through the diaphragm into the dome of the liver and passed through the liver into the lateral side of the chest where it lodged against the end of the eleventh rib. Mr. McCarthy had -- did have blood in his abdominal cavity. The same test that was performed on the President was also performed on him and it was positive. The abdominal cavity was carefully explored and the only damage was the bullet through the liver itself and a drain was placed in this area and he is doing extremely well, has been in the intensive care unit now for about 45 minutes.

Q James Brady?

DR. O'LEARY: Okay. Mr. Brady is still in surgery. His condition is critical. We don't have any further information at this time.

Q Dr. O'Leary, how long would you anticipate that the President would remain hospitalized?

DR. O'LEARY: That is difficult to say. It might be as long as two weeks but that is just a guesstimate at this point in time.

Q Will the President remain here?

DR. O'LEARY: A couple questions. That's not for me to answer. The question was the amount of blood. The President required transfusion of approximately five units of blood before surgery but none during the course of surgery. Mr. McCarthy required no transfusions at all.

Q Can you tell us about the D.C. policeman?

DR. O'LEARY: The D.C. policeman was taken to the Washington Hospital Center. We have no firsthand information on him.

Q Can you tell us about the Brady surgery?

DR. O'LEARY: He was shot in the forehead.

Q Which side?

DR. O'LEARY: I'm not certain, sir. The bullet did pass through his brain and came out the other side. He obviously has significant brain injury and he is in critical condition but I'm sorry, we have no further information at this time.

Q Dr. O'Leary, who performed the operation on the President?

DR. O'LEARY: The operation on the President was performed by Dr. Ben Aaron, who's on our fulltime faculty here as a cardiovascular thoracic surgeon.

Q How do you spell that?

DR. O'LEARY: The last name is spelled capital A, small A, r-o-n. First name, Benjamin.

Q His title?

DR. O'LEARY: I'm trying to think. I think he's an associate professor of surgery.

Q Who else?

DR. O'LEARY: Okay. The other surgeon was Dr. Joseph Giordano, G-i-o-r-d-a-n-o, who is head of our trauma team and was in the emergency room almost simultaneously with the arrival of the President.

Q Why did the operation take so long?

DR. O'LEARY: The length of the operation really had a lot to do with the testing to make sure that there was no bleeding into the abdominal cavity. That took about 45 minutes.

Q What was that test?

DR. O'LEARY: It's called a peritoneal lavage.

Q How do you spell that?

DR. O'LEARY: P-e-r-i-t-o-n-e-a-l. Lavage, L-a-v-a-g-e.

Q Why was that important?

DR. O'LEARY: Okay. That test is important -- is very simple, a small incision is made beneath the umbilicus and several liters of fluid are placed into the abdomen and then the fluid is brought back outside and looked at to determine whether there's any blood in it. That fluid can move anywhere throughout the whole abdominal cavity and if any organ has been damaged and there's any bleeding, one will find blood in the fluid that comes out. That test was negative and the President, as I said, positive in Mr. McCarthy.

Q Doctor, in view of the President's age, is there any danger that the lung might collapse again?

MORE

DR. O'LEARY: Very doubtful. The President is physiologically very helpful. The caliber of the bullet is going to be very hard to tell in the President because it was a really mangled bullet.

Q Is there a possibility of any other complications?

DR. O'LEARY: It's really doubtful. Again, I would emphasize that he is physiologically very young and in good shape.

Q Can you tell us where the bullet entered, at what angle, from the front, from the rear? Can you get into that?

DR. O'LEARY: Well, one would assume that it probably seemed to come from a little bit top down, entering approximately here (gesturing), traversed down.

Q Could you move over here?

DR. O'LEARY: Yes. Traversed down approximately three inches, striking the top of the seventh rib, laterally, and then going about three inches into the tissue of the lung itself.

Q It deflected downward further from the seventh rib?

DR. O'LEARY: No. It's like coming down, hitting the rib and then deflecting in to take a new path.

Q Where was it actually found?

DR. O'LEARY: It was in the parenchyma of the -- in the tissue of the lung itself, contained within the lung itself.

Q You said that the President was conscious for much of the time. What, if anything, did he say?

DR. O'LEARY: Well, the surgeons said that his last remark before he underwent anesthesia was he wanted to make sure that all of them were Republicans.

Q Were they?

DR. O'LEARY: They said that today everyone is a Republican.

Q Doctor, how narrowly did the President escape mortal injury?

DR. O'LEARY: That's a hard question to answer. As I stated, he was never in any serious danger. The bullet was really not very close to any vital structure.

Q How far is not so close? How far from the heart?

DR. O'LEARY: Probably several inches.

Q Is that because it struck the rib?

DR. O'LEARY: If it had not struck the rib it might not have even entered the lung cavity. It could have passed right through the chest wall if it had not struck the rib.

MORE

Q Doctor, would you say that, clinically speaking, the President is fully able to discharge the duties of his office as of now?

DR. O'LEARY: I would say probably not now. One has to let the effects of the anesthesia wear off but I think all of us feel that by tomorrow that he would be fully capable of doing that.

Q If there were a basic decision he had to make tomorrow, a decision of state, would he be able to do it?

DR. O'LEARY: We believe that he would be able to do it.

Q Who's operating on Jim Brady?

DR. O'LEARY: Okay. Dr. Arthur Kobrine, K-o-b-r-i-n-e. He is operating on Mr. Brady. He is an associate professor of neurosurgery.

Q Is it possible to give us any prognosis on James Brady?

DR. O'LEARY: It's really not possible right now. As I said, he's in critical condition. Anything I would say would be highly speculative.

Q Is Brady being kept alive artificially?

MORE

DR. O'LEARY:

Not at the present time although in the operating room, remember that you've got respirators and monitors and, you know, what have you.

Q Is he on a respirator now?

DR. O' LEARY: Well, almost anyone undergoing brain surgery would be on a respirator.

Q Dr. O'Leary, aside from the obvious gunshot wound, did the President suffer any other injuries? Were there any abrasions, contusions surrounding the --

DR. O' LEARY: Well, not as we're able to ascertain. It's possible that we missed a small contusion here or there. But he was gone over quite carefully.

Q Why was the President -- forth to this hospital and when did the hospital receive word from the ambulance that he would be on the way?

DR. O'LEARY: I can't tell you for certain but I believe we were probably the closest hospital which would have been the prudent thing to do. I received information at about twenty of three that he was in the emergency room and I think he probably got there around 2:30.

Q Who got there first, Brady or the President?

DR. O'LEARY: Okay, I'm not sure who got there precisely first. They all came very fast.

Q -- how about Brady? (Inaudible.)

DR. O'LEARY: Well, we maintain a stock of blood. Please remember the Washington -- we do not run our own blood bank. The Red Cross has a regional center that is very near by and we have all the blood we need within minutes.

Q Did you have enough immediately or --

DR. O' LEARY: Yes.

Q (Inaudible.)

DR. O'LEARY: I can't answer that question. I don't know.

Q Doctor, do you know if the -- President required -- (inaudible) -- of the lung?

DR. O'LEARY: Okay, it appears as if the major reason for bleeding within the chest was as a consequence of the hole made when the bullet actually entered the lung substance itself. -- the only bleeding signs that really could be determined and although he bled down about five units of blood, it was never very brisk. It was kind of steady bleeding. It was very easy to transfuse him and keep up with his blood loss.

Q What is five units of blood? How do you --

DR. O'LEARY: Well, each, let's see, how can I make that simple, it's about two and a half quarts, total of two and a half quarts.

Q -- lungs collapsed?

DR. O' LEARY: What?

Question about collapsed over here.

Q Is his lung still collapsed?

DR. O'LEARY: No, he has a chest tube. And all one has to do is, usually through a chest tube, is to get it in and get the air out of the space between the lung and the chest wall and the lung expands.

He had a chest tube placed in the chest in the emergency room within minutes after he was in the emergency room.

Q So, he's again breathing normally?

DR. O'LEARY: Yes.

Q Did Mrs. Reagan suffer any emotional medical trauma --

DR. O'LEARY: No, I think we'll let someone else deal with that question.

Q Have you got any -- (inaudible) -- the President not being moved from this hospital for the next few days?

DR. O'LEARY: I would say for the next few days it would probably be reasonable not to move him, but I would expect that he will do well and that will be a judgment of someone else at that time.

Q (Inaudible.)

DR. O'LEARY: We have no reason for believing that significant post-operative problems will develop.

Q -- the President might have to undergo as a result of this operation?

DR. O'LEARY: I would really doubt it. He had a simple procedure. There was very little necessity to cut a lot of tissue and he -- we have every expectation that he'll have a normal post-operative course.

Q (Inaudible.)

DR. O'LEARY: I don't know the answer to that question.

Q -- the first few moments when he came into your emergency room and he walked in, what was the first thing that was done?

DR. O'LEARY: Okay, I was not personally there. But my understanding is that he got out of the car and stood up and walked in on his own. As I say, he was alert and awake all the time.

Q (Inaudible?)

DR. O'LEARY: No.

Q (Inaudible.)

DR. O'LEARY: Not to the best of our knowledge.

Q -- carrying the President at that time?

DR. O'LEARY: Well, I think, as soon as he appeared, he may not have wanted to be on a stretcher, but that is our usual procedure for someone who's had a gunshot wound.

Q How far inside the chest did the bullet go --

DR. O'LEARY: About three inches. Okay, I'll give you maybe four inches. We'll give you an inch for the thickness of the chest wall.

Q Dr. O'Leary, can you explain why it was that there was no immediate announcement -- (inaudible) --

DR. O'LEARY: I really can't answer that question. I wish I could.

Q -- know that he'd been injured?

DR. O'LEARY: Yes, I think he knew that he had been shot.

Q (Inaudible.)

DR. O'LEARY: No, I think, again, I'm giving this to you secondhand. I gather he seemed a little bit light headed but he was cracking jokes and in very good spirits even at that time.

Q -- immediately in the emergency room.--
(inaudible) -- any incisions, you have to put --

DR. O'LEARY: No, usually, the smallest incision is made between the ribs and the tube is placed in and then attached to suction.

Q And that was the first emergency procedure?

DR. O'LEARY: Yes, I'd say that was the emergency procedure.

Q Would that be taking the blood off that was coming from the wound in the lung?

DR. O'LEARY: There is probably two basic purposes. One is if there has been any deflation of the lung, the major purpose is to reexpand the lung, remove the air and the other is to provide drainage for any blood in the lung space.

Q -- will Mr. Brady suffer any permanent brain damage?

DR. O'LEARY: I'd have to say that probably is likely but I really can't give you any more information since he is still in surgery.

Q Doctor, how long elapsed between when the President -- (inaudible) -- to the hospital, went into surgery, and can you account for that time?

DR. O'LEARY: I would say from the time he hit the hospital to the time he went into surgery probably was no more than about 40 minutes. There were a variety of things being done. He had to have blood tests performed to find out how much blood he had lost. We had to check his blood gases to determine how much oxygen was getting into his circulation. I think the thing that probably took

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so much time before surgery was probably for the most part the x-rays. He had to have both a chest x-ray and an abdominal x-ray.

Q Was there surgery on the lung without actually removing the bullet? There was an earlier report that that might be the case.

DR. O'LEARY: I saw those reports but at the time those reports were out the surgeons had not even entered the chest as yet.

Q (Inaudible.)

DR. O'LEARY: I think every effort would be made to remove the bullet but if it took a lot of additional extensive surgery that might have caused a different decision.

Q Can you give us a timetable? He arrived at 2:30 and we were told the surgery began about 4:00.

DR. O'LEARY: No, no. He got to the operating room maybe 3:15, 3:20. Okay? It takes -- he has to get into the operating room, on the table, get under anesthesia, in order for surgery to start. So surgery started roughly between 3:30 and quarter of four and it lasted until about 5:30.

Q How about the surgical procedure on Mr. Brady?

DR. O'LEARY: Very simply, he is having a craniotomy which simply means an exploration of the inside of the head. Craniotomy, C-r-a-n-i-o-t-o-m-y.

Q Doctor, do you find it extraordinary that a 70-year old man could be shot in the lung and then brought to the hospital and walk in under his own power?

DR. O'LEARY: I think it speaks well for the physiologic health of the President. We do have elderly people, much more elderly than the President is, who do undergo chest surgery but he certainly sailed through it.

Q Do you find that medically extraordinary?

DR. O'LEARY: Maybe not medically extraordinary but just short of that. Okay?

Q Doctor, you said the bullet was mangled. Is there any possibility that the bullet fragments might remain inside the President's body?

DR. O'LEARY: That is a finite possibility but the bullet did, although mangled, seem to be intact. You're never sure that you have ever tiny little fragment out.

Q Has the President been told about Mr. Brady's condition?

DR. O'LEARY: I don't think that he is alert enough, really, to assimilate that information. I don't know really what we would tell him at this juncture, since we're not sure yet what the story is.

Q Can you talk a little bit about what the body goes through, how much of a shock to the body it is to go through an operation like this? (Inaudible.)

DR. O'LEARY: Well, yes, I'd say anytime anyone undergoes major surgery, a thoracotomy is major surgery. It is not extraordinary surgery but it's major surgery. It's got to be a stress for any one of us. It'd be a stress for me. But the critical element is the physiological health of the person and your ability to maintain their vital signs and their blood volume satisfactorily.

The President's vital signs were absolutely rock stable through this whole thing.

Q (Inaudible.)

DR. O'LEARY: Well, that is a decision really made by the ambulances but I think that we do have several trauma centers in the District of Columbia and to the extent that one center does not get many very seriously injured patients, all of our ability to care for the patients is increased.

Obviously, in the heat of a situation people do the best they can. If you track back where that decision was made it is sometimes hard to find out who really made that decision.

Q (Inaudible) -- who made the incision and how large was it?

DR. O'LEARY: The incision is about six inches -- excuse me -- six inches long and it extends basically from about here (gesturing) into the posterior part underneath the armpit.

Q Could you show that again?

DR. O'LEARY: Okay. (Gesturing). About from here to here. Can you see it? Here to here. Just underneath the nipple.

Q Just underneath the nipple?

Q (Inaudible.) -- about the pain?

DR. O'LEARY: Again, hard to tell. He's a healthy guy and I'm sure this is a painful surgery but he withstood it very, very well.

Q Is this a fairly common procedure that hospitals in urban areas have to do frequently, gunshot wound to the chest?

DR. O'LEARY: Yes. No question.

Q Will he have pain for days or weeks or months?

DR. O'LEARY: His surgeons believe that he will probably be in moderate pain. That will probably not be for more than a day or two.

Q Well, you have to cut through muscle, don't you?

DR. O'LEARY: Yes, you have to cut through chest wall muscle.

Q That's a pretty rugged place to cut, isn't it?

DR. O'LEARY: About an average muscle.

Q You've told us what the surgeons did to the President. What are they doing or trying to do for James Brady? Exactly what happened there?

DR. O'LEARY: I can't, again -- anything I'm telling you is rather speculative. Normally they would have to remove the tissue that seemed irreparably damaged. Any time you're operating inside the head, for very obvious reasons, you try and salvage as much tissue as you think has a remote chance of recovering. This is not a good injury. It causes a lot of damage.

Q Is there a finite possibility that with the damage sustained by the President, would there ever be in the near future a need to go back and reopen?

DR. O'LEARY: I said that was extremely remote.

Q Doctor, would you say that Mr. Brady's fighting for his life?

DR. O'LEARY: I think any time a patient is in critical condition, in a sense he's fighting for his life.

Q Did the President get any first aid in the car on the way over?

DR. O'LEARY: I really can't answer that question. I don't know.

Q Doctor, what type of medication is the President on or will he be on while he's in the hospital? Is he on any IVs or anything else?

DR. O'LEARY: He's on intravenous solution right now. As I said, he required no blood intraoperatively and, as with any patient, the medications, really, depend upon what the patient's needs are. I would expect the President is probably not going to need very many medications except perhaps some modest painkillers for a day or so.

Q (Inaudible.)

DR. O'LEARY: It depends. In a totally normal routine I would guess probably a couple of months after his hospitalization so maybe 2-1/2 to three months might be a good guess, but it is a guess.

Q Would you recommend that he leave Washington for, say, his ranch?

DR. O'LEARY: Well, that's really up to him and his staff. I'm sure that he will be adequately protected.

Q What was Mr. Brady's brain waves? Were they flat? What can you tell us?

DR. O'LEARY: I don't know the answer to that question.

Q As a doctor would you advise him to take off

further time beyond the time that he's hospitalized?

DR. O'LEARY: Well, taking off time depends on what you're talking about.

Q I'm saying away from the pressures of the Presidency.

DR. O'LEARY: That's really not my judgment to make for him. I think that I would urge him to limit his physical activity within reason. There is no reason to believe that he has any impairment of his ability to make decisions or what have you. Making decisions is stressful business but I think he's going to be fully up to it.

Q Doctor, earlier there was a report that the bullet missed the heart by an inch. You said it missed by several inches. Several inches is a relatively large amount of distance within the chest. Was the heart much closer than that? Do you have an actual measurement rather than an estimate of how close it came?

DR. O'LEARY: I wasn't specifically there in the operating room. I think I know where those reports came because, remember, when we're in an operating room the only xray that we can really get that's going to be valid is one that is taken from front to back. Okay? And when you held that up it looked as if the bullet was close to the heart. But you are missing that third dimension and that third dimension it turned out that the bullet was significantly removed from the heart by several inches, as I said. It was not close.

Q Could you tell us at what stage Mr. Brady is in surgery now and about when he will be completed?

DR. O'LEARY: Well, having seen some of these patients, it may go on for hours.

Q (Inaudible.)

DR. O'LEARY: I honestly don't know that. I suspect so but I don't know.

Q There were reports that the President wasn't aware of what happened to him. When he first was shot, that he didn't know what happened.

DR. O'LEARY: Sometimes there's some shock as a consequence of being hit. You hear people described afterwards, "My goodness, I've been shot." So it's hard to know at what point that realization hit him. I would think by the time he hit our emergency room that he knew that he had been shot.

Q Were you notified that the President was coming?

DR. O'LEARY: Yes. Yes.

Q Who took the call?

DR. O'LEARY: Okay. I don't know where the call came in from but we were notified in advance and he was here almost immediately after that and was literally met by the trauma team at the door.

Q There were reports that the bullet was a low caliber bullet. Can you speculate as to what would have happened with a higher caliber bullet?

DR. O'LEARY: I really can't speculate on that. I'm not a ballistics expert.

Q (Inaudible.)

DR. O'LEARY: Yes, he was.

Q Are you seeking outside medical care?

DR. O'LEARY: Not at this time.

Q Were there no complications in surgery of any kind?

DR. O'LEARY: No. He had a simple, penetrating bullet wound into his left lung and that was basically it.

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actually performing surgery, probably four or five, between Mr. McCarthy and the President, neuro-surgical teams working separately.

MR. NOFZIGER: Is that it ladies and gentlemen?

Q Thank you.

Q Thank you, Doctor.

Q Could you spell the Doctor's name, please?

MR. NOFZIGER: O'Leary. O-'-L-e-a-r-y. Dennis with two Ns and one S.

Q Middle initial?

MR. NOFZIGER: Got a middle initial?

DR. O'LEARY: S.

MR. NOFZIGER: S as in Sam.

Q Specialty?

DR. O'LEARY: Internal medicine and hematology.

MR. NOFZIGER: Let me thank you -- thank Dr. O'Leary first of all, and then take upon the White House the blame for you not getting detailed information earlier. We had specifically asked the team at the hospital to let the White House handle this and to wait until the surgery was over before there was any briefing. So if any of you have any complaints about lack of information, don't blame them, blame me -- which you've done in the past anyway.

Q If the operation was completed at 5:30, was there any reason why you waited so long to brief?

MR. NOFZIGER: No, I n don't think the operation was completed at 5:30. I think that by the time that it had been closed up -- he had been closed up and was out of there, it was considerably later than that. I think it was near 6:30, Sam.

Q Can the Doctor verify that?

DR. O'LEARY: The basic surgery was finished at 5:30. He was then closed, which is basically routine for a procedure of this type, and I believe that they finished closing very carefully at about 6:20.

Q (Inaudible.)

MR. NOFZIGER: Yes, he was

Q Would you say that while the President was incapacitated here during the operation that the Vice President was in charge? There was a report from the White House, I believe that General Haig said that he was in charge? (Laughter.)

MR. NOFZIGER: I don't think I want to comment on that. The President will be fully capable of making decisions tomorrow, according to the doctors. In the meantime, the business of government is going on normally and we expect it to continue to. And Vice President Bush is here and the rest of the government is functioning normally, and we expect that it will continue to do so.

Q When you say Bush is here -- where?

MR. NOFZIGER: He should be at the White House.

Q Lyn, n one more question. Since you're taking the blame, can you explain why --

MR. NOFZIGER: I would blame you, but --

Q (Inaudible.)

MR. NOFZIGER: I'm sorry. Because the initial reports to us were that he had not been hit and by the time I got to the hospital, we knew that he had been. But you're going to ask me why -- so many bad rumors run around these things. Some of them come from us. Some of them come from you all.

Q Who arrived first -- the President or Brady?

MR. NOFZIGER: I cannot tell you that. I just don't know.

Q The initial report came from whom?

MR. NOFZIGER: Probably the wire services. That was the first I heard.

Q Have you heard anything about the motive of this thing?

MR. NOFZIGER: No, I have not. You'll have to talk to the Secret Service and to the police about that. That's outside of my area right now.

Q Will you establish now a schedule for regular medical bulletins?

MR. NOFZIGER: My plan is to meet with the doctors here shortly after 7:00 tomorrow morning. We will then have a briefing in the White House Press Room as soon thereafter as possible. We will notify you. My suspicion is it will probably be maybe as early as 8:30 and we will bring Dr. O'Leary or one of the doctors with us at that time.

Q (Inaudible.)

MR. NOFZIGER: Yes, this was to keep you out of the rain.

Q Have you considered invoking the 25th Amendment that the President be disabled and rejected?

MR. NOFZIGER: No. We have not considered it. We have not considered invoking it, no.

Q Did the Secret Service agent save the President's life by stepping in front?

MR. NOFZIGER: I do not know. I was not there.

Q What is Bush's status now? Technically --

MR. NOFZIGER: He is the Vice President. (Laughter.)

Q He is the acting President now, is he not?

MR. NOFZIGER: No, he is not.

Q Will he spend the night at the White House?

MR. NOFZIGER: I don't know. You'd have to ask him.

Q Did the Presidential limousine go to any other place or did it make a direct route from the scene of the shooting to the hospital?

MR. NOFZIGER: To the best of my knowledge, it came directly to the hospital.

Q Can you put to rest all fears, all rumors, that more than one gunman was involved in this?

MR. NOFZIGER: To the best of my knowledge, there was only one

gunman. That's all we've heard of and the people who were on the scene don't indicate there was anything more.

Q Is there evidence of a conspiracy behind the scenes?

MR. NOFZIGER: I'm not going to get into that, for goodness's sake. We've been -- You know, we'll wait and let the Secret Service and the police do their investigation and then we'll look at it there. But I don't think that that's even for me to speculate on -- no matter how farfetched it may be.

Q (Inaudible.)

MR. NOFZIGER: I think that the President can speak for himself on that when the time comes.

Q Who has physical possession of the bullet at this moment?

MR. NOFZIGER: To my knowledge, the Secret Service does.

Now, if you all would hold it for just a moment, I would like to re-introduce Sheila Patton to you who is the First Lady's Press Secretary, and she can tell you about Mrs. Reagan.

MORE

MS. PATTON: Mrs. Reagan was calm and composed throughout this ordeal. She is grateful for the outpouring of support and prayers from all over the world. She's also grateful for the fine medical attention that her husband is receiving. And, lastly, she's praying for Jim Brady, for agent McCarthy, and Officer Delahante and she hopes everyone else is too.

Q (Inaudible.)

MS. PATTON: Mrs. Reagan heard there was a shooting from her Secret Service agent. We had just returned to the White House from a luncheon. She immediately left for the hospital and learned that the President had been shot here at the hospital.

Q She didn't know --

MS. PATTON: She learned it after she arrived here.

Q -- she'll be staying here all night?

MS. PATTON: That has not been determined yet.

Q How many minutes elapsed when the President arrived -- (inaudible) --

MS. PATTON: To the best of my recollection, we left about 25 of three.

Q -- that where. From the --

MS. PATTON: From the White House in five minutes.

Q Did Mrs. Reagan have any contact with Mrs. Brady at all during the --

MS. PATTON: Yes, she has seen both Mrs. Brady and Mrs. McCarthy.

Q Can you tell us anything about --

MS. PATTON: No, it was a private meeting.

Q Where --

MS. PATTON: In an office near the emergency room.

Q -- visit the chaplain?

MS. PATTON: Yes, she did. She visited the chaplain.

Q When was that?

MS. PATTON: Shortly thereafter.

Q Shortly after she arrived?

MS. PATTON: After the President went up for surgery.

Q What did she say to him?

MS. PATTON: I do not know.

THE PRESS: Thank you.

MR. NOFZIGER: Let me make a couple of quick announcements. Vice President Bush is spending the night at the Vice President's Residence. So, that clears that up. Secondly, I've been asked do I want to move the A.M. briefing to Room 450 in the EOB because it's larger and so let's move it to Room 450 in EOB because it's larger. We will see you there in the morning. Thank you.

Q Is that going to be it for tonight? Should we anticipate any announcements regarding Jim Brady?

MR. NOFZIGER: My feeling is that depending on the situation, I would not rule it out. But that will come out of the White House briefing room. I think we can wind up this place here after this briefing. I think that will be more convenient for all of us.

Q Have our allies abroad been contacted about the President's stable condition?

MR. NOFZIGER: I cannot tell you if our allies have been contacted. But, I would be willing to bet that they had been.

Q (Inaudible.)

MR. NOFZIGER: I cannot answer that. I do not know.

END

8:15 P.M. EST

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

March 30, 1981

PRESS BRIEFING BY
VICE PRESIDENT BUSH, LARRY SPEAKES, DAVID GERGEN

Press Briefing Room

8:20 P.M. EST

MR. SPEAKES: The Vice President will be in the Briefing Room shortly. For your information, the Vice President landed at Andrews at 6:30. He came to the Situation Room at 7:00 which he presided over a meeting of some members of the Cabinet. He will make a brief statement and will not take questions, but I will follow and take some questions.

THE VICE PRESIDENT: Well, I have a very brief statement that I'd like to read. I am deeply heartened by Dr. O'Leary's report on the President's condition, that he has emerged from this experience with flying colors and with the most optimistic prospects for a complete recovery. I can reassure this nation and the watching world that the American government is functioning fully and effectively. We've had full and complete communication throughout the day and the officers of the federal government have been fulfilling their obligations with skill and with care. I know I speak on behalf of the President and his family when I say that we are very grateful to all -- the many people from across this country who've expressed their concern at this act of violence and finally, let me add our profound concern on behalf of two brave law enforcement officers who served to protect the President and then, of course, for a friend of everybody here, dedicated public servant, Jim Brady. We're going to watch their progress with all our prayers and with all our hopes.

Now, I'm going to walk over and speak briefly to Mrs. Reagan who's returned to the residence. Thank you all very much.

Q Larry, who was in the Situation Room?

MR. SPEAKES: Let me go over what I know to be the situation as I saw it here. As I said, the Vice President arrived in the Situation -- at Andrews at 6:30. He came to the Situation Room at 7:00, was present in that meeting and this does not necessarily mean the order, but it's more or less the way they were sitting at the table. The Vice President, of course, Ed Meese, Richard Allen, Secretary Lewis, Attorney General Smith, Secretary Weinberg, Secretary Regan, Admiral Murphy of the Vice President's staff, Jim Baker, the White House Chief of Staff, and Secretary Haig. Also Secretary Block, Secretary Baldrige, Secretary Watt and CIA Director Casey. In addition, there were other staff members present such as Martin Allin, David Gergen, and Max Friedersdorf and Fred Fielding.

The meeting continued for about 30 minutes. At which time the medical press conference from the hospital came on the television and we watched that basically to its conclusion and the Vice President then went to his office, drafted the statement and came here. Mrs. Reagan has returned from the hospital as the Vice President said and he's now going over to visit with her.

As far as tomorrow, we will basically continue with the schedule as the President had planned. There is a plan for a brief meeting of the Cabinet. A plan for a brief meeting with the Congressional Leadership and then a continue with the schedule which includes a meeting and a working luncheon with the Prime Minister of the Netherlands.

MORE

Q -- working luncheon?

MR. SPEAKES: The Vice President.

Q During the meeting in the Situation Room, what subjects were discussed?

MR. SPEAKES: I really don't want to go into that, except to say that the general situation was discussed. The Vice President received the very latest information on the President. Jim Baker and Ed Meese had been at the hospital and they returned some time earlier. So, they were up to the minute.

Q Larry, was the question of Poland discussed?

MR. SPEAKES: I'm just not going into the subject matter --

Q Larry, has the President turned over control or authority to the Vice President?

Q What was the question?

MR. SPEAKES: Has the President turned over control or authority to the Vice President? There has been no cause for that to take place.

Q The President will be under sedation until tomorrow morning. Can't we assume that the Vice President would have to be able to take charge in that case, Larry?

MR. SPEAKES: Well, there is, for your information, an automatic assumption of command authority that requires no steps be taken. It goes first on the Vice President and second on the Secretary of Defense.

Q Why did the Vice President wait six hours to reassure the country that things were under control?

Q Doesn't it go to the Speaker?

MR. SPEAKES: Question about --

Q Larry, please answer this. How come it goes to the Secretary of Defense?

MR. SPEAKES: Let me get started here so you can understand it. There is a succession. That goes from the President to the Vice President, to the Speaker, to the President Pro Tem. There is another one called the command authority which is an automatic assumption and that's the only thing that happened at this time.

Q What is the line up in the automatic assumption, then? What is that?

MR. SPEAKES: I just gave it to you. The Vice President and the Secretary of Defense.

Q Larry, what triggers that?

Q Not the Secretary of State? Secretary of Defense?

MR. SPEAKES: It is an automatic assumption.

Q Larry, where will the Vice President have his working headquarters while the President is in the hospital?

MR. SPEAKES: I would assume the Vice President would remain in his office in the West Wing as he operates --

Q Larry, who is the Commander in Chief tonight at this hour?

MR. SPEAKES: Certainly the President is the Commander in Chief. If any actions are required, I'm sure that it will be taken by the appropriate official in the government.

Q Larry, why did the Vice President wait six hours to reassure the country that everything was under control?

MR. SPEAKES: The Vice President came directly back to Washington, as I understand it. There was a 30-minute meeting and then it's been followed by less than an hour after the conclusion of that meeting that the Vice President made the statement. I think we were constantly reassuring the nation through Secretary Haig and through the statement that we could make here at the time. We were all awaiting the outcome of the surgery and we were confident throughout it and the reports, as the Vice President said, have been excellent and that's --

Q Then why reassure us with Haig rather than the Vice President?

MR. SPEAKES: Yes?

Q Larry, then what you just said about the succession of command authority, Haig was completely wrong when he thought he was in command here when Weinberger was in the building?

MR. SPEAKES: The Vice President was in the Situation Room, the President's Chief of Staff and the Counsel of Mr. Meese and Mr. Baker were at the hospital. They were conferring with Secretary Haig. Secretary Haig talked to them and offered to be helpful. He was in charge of the situation in the Situation Room and that's basically it.

Q Larry, when you talk about command authority, are you talking about what specifically? Military command? Specifically what?

MR. SPEAKES: Yes.

Q But can you say that Vice President Bush is now the Acting President of the United States?

MR. SPEAKES: No. There is no move --

Q Larry, what triggers the command authority?

MR. SPEAKES: It's automatic.

Q I mean, upon what conditions?

Q How is Jim Brady?

Q Does Haig still make any foreign policy?

Q How's the condition of Jim Brady, now?

Q Could it be set off by anesthesia, for example?

MR. SPEAKES: It was my understanding from the legal people that it's an automatic situation.

Q Larry, where does Secretary Haig --

MR. SPEAKES: You aren't letting me finish my answers. It's an automatic situation and if there's a need to act, there is a capacity to act here. And I don't think it needs any further explanation.

Q Larry, how is Jim Brady?

MR. SPEAKES: You saw the television reports and that's the latest we've heard.

Q What about foreign policy? Is Haig still handling that?

MR. SPEAKES: The situation is the same as it has been before the incident and after the incident.

Q Larry, may I follow up on my question? What conditions however set off the automatic assumption of authority that you're speaking of?

MR. SPEAKES: I can't address that specifically.

Q Does it have to be a declaration of incapacity?

MR. SPEAKES: No. There does not have to be a declaration.

Q Has it been assumed, is this trigger -- are we in that process now with the Vice President?

MR. SPEAKES: It isn't. If need be, it could be. But there's been no need for that.

Q Could you explain --

Q To respond to a military threat, Larry?

MR. SPEAKES: You're putting words into my mouth and I'm not going to accept it. If there's a need for the Vice President to assume command authority, he will.

Q Larry, -- this interval -- Secretary Haig was here. Secretary Weinberger was in the White House in the Situation Room at that time. Now, under this automatic assumption, goes from the Vice President to the Secretary of Defense. How did it happen that Secretary Haig said he would be charged until --

MR. SPEAKES: Let me make a statement and hopefully I'll cut off this line of questioning. The President's staff was at the hospital. They were talking to the President. Secretary Haig was in the Situation Room and they were talking to Secretary Haig and Secretary Weinberger who were there. We have just come through a very serious situation as far as the President's concern. We have come through with a very optimistic outcome. It think that's the important thing to dwell on. I can assure you that there were no problems with succession and there were not problems with command authority. And, frankly, that's all I'm going to say on it.

Q Larry, could you tell us --

Q Who asked Haig to come down here, Larry? Larry, who asked Haig to come down to brief us?

MR. SPEAKES: I'm just not going to discuss it any more. I think everything is obvious.

Q Did he mispeak himself when he said he was in command of the White House?

MR. SPEAKES: I'm just not going to discuss it any more. I've made a statement. I think you're looking here when you should be looking here.

Q Larry, can you tell us why it took -- the President came out of surgery at 6:20. The briefing at the hospital wasn't until 7:30. Can you tell us why no where in the White House command structure could assure the nation that the President had survived surgery and that he was all right?

MR. SPEAKES: Not having been there, I don't know the situation at the hospital. I know that once the Vice President was here that he moved very expeditiously.

Q What's the crisis management system that's been so talked about. Was that invoked today?

MR. SPEAKES: I don't know in a formal sense, but there was no problem with what was going on --

Q So, what assembled in that room was not his crisis management team? Is was just the Cabinet --

MR. SPEAKES: It's my judgement that it was most of the Cabinet who happened -- who was in town at this time.

Q Larry, on the automatic assumption -- after you get through with the Vice President and Weinberger, then what happens? Does anybody else --

MR. SPEAKES: Sarah, I don't know the specifics on that. I'm sure a legal person can tell you that.

Q Larry, did the Attorney General either provide or was he asked to give an oral opinion during that 30-minute meeting on the formal constitutional succession particularly the incapacitation provision?

MR.SPEAKES: I just don't want to go into the details of the meeting.

Q Haig says the crisis management is in effect and you say not? So, there is a contradiction there.

MR. SPEAKES: No, there's not a contradiction.

Q Larry, how long does -- how long does the Vice President have this -- holds much of this command authority?

Q Until tomorrow morning?

MR.SPEAKES: It is not a thing that is -- it's an assumption.

Q I understand.

MR. SPEAKES: It's not a thing that requires an **act**. It is just if the need arises -- there is an authority that **moves** automatically.

Q For how long if the need arises? Tomorrow morning when the President will presumably be free of the effects of --

MR. SPEAKES: We'll just have to cross that bridge when we get to it.

Q Where is the man with the black bag? Is he with the President or is he with the Vice President?

MR. SPEAKES: Well, I can assure that -- I don't want to discuss that. Because, of course, we don't discuss security matters of this type, but I can assure you there were certainly no problems in that direct capacity.

Q Larry, is the Vice President going to spend the night at the White House? Or at his own residence?

MR. SPEAKES: I trust he'll go to his residence.

Q Are they stuffing up security protection on everyone more?

MR. SPEAKES: I won't comment on security.

Q Larry, was there any consideration of invoking the disability provisions of the 25th Amendment?

MR. SPEAKES: There has been no need for it nor any cause for it because the information we're receiving was optimistic almost from the first, so there has been no need for it.

Q --Bush was advised of the --

Q I wonder, if there has been made a check of the background of the assailant of the President to see where that --

MR. SPEAKES: Can I have the question again?

Q This is an act of terrorism against the President of the United States. I wonder if there has been a check of the background of this gentleman to see where that kind --

MR. SPEAKES: I have your question. I think anything, you know, discussing the background of the individual who is in custody should come from the Justice Department.

Q Is there any reason to think anybody else was involved, Larry?

MR. SPEAKES: That kind of information, law enforcement information, should come from the Justice Department.

Q Could you tell us when Bush was advised of the shooting? Where he was and what he did immediately thereafter?

MR. SPEAKES: I don't have the timetable, but the White House staff and the Situation Room were in full contact with the Vice President during the entire period and Mr. Meese and Mr. Baker talked with him in route to Washington while he was airborne.

Q When didn't Meese and Baker become aware that the President had, indeed, been shot? Was that Deaver's call over here?

MR. SPEAKES: Yes. I presume -- yes. They -- I went to the hospital with both of them and with Lyn and --

Q What? About 2:40 roughly?

Q Larry, could you describe what you saw when you got there at the hospital?

MR. SPEAKES: Well, I think you've had -- Lyn and I were side-by-side through that and I think you've had it from Lyn except the note that the President was in the emergency room.

He was transported to the operating room, and that is about the extent of it.

Q Why was he not carried inside, Larry?

MR. SPEAKES: Carried inside of --

Q Why did he walk into the hospital? Wasn't that rather dangerous when he was shot?

MR. SPEAKES: I think he was --

Q Was he being offered the stretcher?

MR. SPEAKES: Well, I was not there, so I really do not want to go into it.

Q Larry, has anyone spoken to the President since the operation or is he able to talk?

MR. SPEAKES: Mrs. Reagan has visited with him. I don't know whether she has spoken with him.

Q Larry, was there a decision made to delay for maybe ten or fifteen minutes the announcement that the President had been shot to give time to inform either Mrs. Reagan or the Vice President? There seems to be a time gap there between the time that you people heard that he had been shot and the time that the rest of the world heard about it.

MR. SPEAKES: Well, I think that we moved as quickly as we could with accurate information.

Q But did you say, "Well, let's first tell the Vice President and then we will make the announcement"?

MR. SPEAKES: I am not privileged to know what was going on because I was in one place and things were going in another place. I don't know of any purpose of delaying for notification. Let me clear up -- to be absolutely certain that you understand this command of authority. Early in the afternoon Haig was informally helping to coordinate activities in the Situation Room through regular communications with the Baker, Meese, and the Vice President. The command authority is simply an agreement whereby if the President is temporarily unavailable, then the Vice President has command authority. It is not a constitutional delegation and no formal declaration is required.

Q Was this operative under the Carter and before that administrations or is this something new?

MR. SPEAKES: I do not know.

Q Where did this exist?

MR. GERGEN: This is not an agreement.

Q Well, when did it originate?

MR. SPEAKES: We will get the legals.

Q How long do you expect the President to be unavailable? A week or --

Q Is that what happens? The Vice President decides that he needs command authority and he takes it?

MR. SPEAKES: As I say, we will get the legal end of it for you.

MR. GERGEN: It is clearly not statutory.

Q If it is not statutory then how did it get to be in effect?

Q Shh. Let him finish.

MR. GERGEN: There are arrangements which I think that are-- conferring with the attorneys on this matter, I think that the -- frankly we have not been spending the whole afternoon researching the law and the Constitution.

Q Well, you should have been.

MR. GERGEN: Well, our concerns were with the President's health and we thought that the arrangements were working rather smoothly in here, frankly, and I think that there will come a time that we can give you more information on this. It is my understanding, in conferring with the President's counsel, that this command authority is nonstatutory. There is an arrangement whereby in the event that the President is not available, say under sedation as he has been this afternoon, that the command authority resides with the Vice President.

But I think the thing to be -- aside from the fact that all of us take heart from the President's progress and prognosis -- I think the thing that I would raise and press upon you is the fact that this administration pulled together and there was a very smooth operation. Frankly, it was fairly informal.

Q We are a nation of laws, are we not?

MR. GERGEN: That is correct. But I wouldn't -- I cannot describe for you because I am not exactly sure how these arrangements work. The more important thing was that people gathered here spontaneously. They came because of the situation that we were in. And the Vice President was in contact and the Chief of Staff and Mr. Meese and others were in complete contact and we, frankly, did not spend a great deal of time sorting through the statutory book and that sort of thing. Fred Fielding, the lawyer, was there constantly and the Attorney General was there. But as to describing these arrangements in great detail --

Q The Justice Department was supposed to have sent things over. Why didn't they --

MR. GERGEN: The Justice Department was here. I don't think that we are equipped tonight to describe this for you. We really didn't come out here to talk about the law and the Constitution, frankly, and I think that that is a subject --

Q Well, sir, if it is there, you ought to be able to find it in a few seconds.

MR. GERGEN: This is a subject that we can address in greater detail at an appropriate time, if you don't mind. We are really out here to let the Vice President make a statement.

Q Would you just give us an idea of what "command" encompasses? What is command?

MR. GERGEN: Well, I think that you have asked that question as to whether it had military aspects in it, and I think that you got an answer on that.

Q Could you tell us who gave Haig the authority to come and talk to the administration?

MR. GERGEN: Frankly, we were all very appreciative that he was here.

Q Was it Meese and Baker?

MR. GERGEN: He was here before Jim and I went over. He was here in the building.

Q Did they ask him to come and show that there was someone in charge?

MR. GERGEN: No, he came here. I am not sure what the information flow was, but frankly, a lot of people came here spontaneously and some may have been called. But frankly most people showed up spontaneously.

Q Did Haig talk to Bush on the plane?

MR. GERGEN: I do not know the answer to that.

Q What precautions are being taken that Haig is not going to try a coup d'tat?

MR. GERGEN: I think that we have exhausted --

Q Will there be further briefings?

Q Are there any plans yet for the recuperation? Anything said about --

MR. SPEAKES: WE are just not that far along. The house-keeping situation -- I think, if it suits you, we will remain open through the night. We will staff here. I would anticipate a regular briefing at some time during the day tomorrow as soon as we see how we are cleared to do it. Hopefully we can do it around noon. Lyn has made an announcement, I understand, about an 8:30 briefing --

Q 8:30?

Q 8:30 in Room 450. Will that be cancelled?

MR. SPEAKES: I don't know. Was that a medical briefing?

MR. GERGEN: Yes, he said that he would bring doctors over. We are going to work on that tonight and we will try to get an advisory out tonight on that.

Q Larry, will be photo coverage tomorrow on the Vice President's schedule?

MORE

MR. SPEAKES: I don't know. We'll put the schedule out --

Q Will there be another briefing tonight?

MR. SPEAKES: We will be available tonight but I don't anticipate the need for another formal briefing.

Q What will Mrs. Reagan do, Larry?

END

8:45 P.M.

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

March 30, 1981

PRESS BRIEFING BY
LYN NOFZIGER

The Briefing Room

9:37 P.M. EST

MR. NOFZIGER: May I have your attention? My name is Lyn Nofziger.

They are passing out a little hand-out, but I came from the hospital just a few moments ago and I talked to the doctor who operated on Jim Brady and the prognosis is certainly better at this moment than it was earlier this afternoon. The doctor is Dr. Arthur Kobrine. K-o-b-r-i-n-e. Usual spelling on Arthur. He is the Professor of Neurosurgery at the George Washington University Medical School. Jim came out of surgery at about 8:15. His vital signs are stable. His pupillary reflexes -- that's the reflexes of his pupils in his eyes -- are normal. Dr. Kobrine feels that there may be some impairment, but he doesn't know how much at this time nor will he be able to know for quite some time.

Now, there will be, tomorrow morning at 8:30, a complete briefing on the status of the President and Jim and of the Secret Service Agent and I really have nothing further to say at this time. I think it's better for you to wait for the briefing in the morning and really the only reason I'm here is because there have been many questions about Mr. Brady and a lot of bad rumors going around.

Q Lyn, did Kobrine indicate to you what the impairment might be?

MR. NOFZIGER: He's not sure at this time and I, not being a doctor, would much rather wait until we have a doctor here at 8:30 in the morning to get into that.

Q Here in this room?

MR. NOFZIGER: No. It will be in 450 across the way.

Q Well, surgeons who've worked on both cases or all of the injuries --

MR. NOFZIGER: No. My understanding is that Dr. Dennis O'Leary who did the briefing on President Reagan will do the briefing in the morning.

Q Lyn, this statement says something about tubes in the President's mouth. What is the function of those tubes and how many are there?

MR. NOFZIGER: I'm not a doctor. I cannot answer that.

Q Lyn, when did the operation on Jim begin?

MR. NOFZIGER: I asked the doctor that and he couldn't tell me. He said he didn't look at a watch and so -- sometime in mid-afternoon.

Q Where is he now? In intensive care or --

MR. NOFZIGER: Yes.

Q About how long was the operation?

MORE

MR. NOFZIGER: I can't talk of that because I don't know when it began.

Q Then, will there be medical bulletins during the night?

MR. NOFZIGER: No. I don't expect any medical bulletins during the night barring the unforeseen. This operation will remain open and there's no lid on. So, you know you're going to have to play it by ear. We will have people at the hospital and people here in case something happens. I do not expect anything to happen.

Q Lyn, you said the prognosis for Jim was better than it was this afternoon. Why was there that kind of optimism? A result of what they found in the surgery?

MR. NOFZIGER: Because the doctor feels better about him.

Q Did the doctor say the significance of the pupils?

MR. NOFZIGER: It indicates that things are functioning --

Q The brain?

MR. NOFZIGER: The brain scan apparently is functioning, whatever that may mean. Once again, you get into this stuff, and I will not guarantee for the veracity or the authenticity or the accuracy of any of it.

Q Did the doctor use a condition word? Grave, critical, serious?

MR. NOFZIGER: Certainly is critical. And that, really, is all we've got to say at this time. Thank you all.

Q Somebody said something about a pool up at the hospital.

MR. NOFZIGER: Well, there are people pooling up there, but they're not in the hospital.

Q It's not your pool?

MR. NOFZIGER: It's not my pool.

END

9:45 P.M. EST