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June, 1985

TO Fred Fielding:

A few weeks ago, I went through a (medical) "mid-life crisis" and am writing this letter to fill you in on my experience.

I inscribed the enclosed account of some of my personal "recollections and thoughts" shortly before surgery, and I want to share it with you. Further, it is a pleasure to tell you that "the story has a happy ending". ⊛

I also want to share with you my appreciation for the following:

> DR. DAVID HEIN, Internist, my close personal friend for more than fifty years and "my doctor" continuously since we both began our professional careers. His skill, experience, and personal dedication led to the <u>early</u> discovery of the malignant but still localized tumor in my left kidney.
>
> DR. MILTON DEITCH, Urologist, who performed the necessary surgery with such obvious skill and finesse that "he left me and my family laughing instead of crying".
>
> And GOD, Who made it all possible, and Who clearly answered the prayers of myself, my family, and my friends.....the prayers of Jews, Protestants and Catholics.

Bob

BOB LIPSHUTZ

⊛ Fred---- You might find of particular interest paragraph # 4 on the second page of the enclosed account.

RECOLLECTIONS AND THOUGHTS - THE NIGHT BEFORE SURGERY
(May 2, 1985)

Well, here I am lying in bed on one of my infrequent visits to a hospital for the purpose of surgery. Tomorrow morning, at the age of 63, I am going to have one of my kidneys removed here at Northside Hospital in Atlanta by Dr. Milton Deitch, Urologist. Although I, of course, have some preliminary thoughts about the current surgery, these thoughts will become much more definitive afterwards.

Instead, tonight I am recalling those earlier situations in my personal life which are comparable to this current one, and herein I am recording my thoughts and recollections of those events.

In chronological order, those comparable situations in my life have been as follows:

(1) AS A VERY YOUNG CHILD, THE TONSILLECTOMY.
(2) AS A SOMEWHAT OLDER, BUT STILL YOUNG CHILD, THE HORSE-KICK.
(3) APPENDICITIS AT SEA DURING THE LATTER DAYS OF WORLD WAR II.
(4) HEMORRHOIDECTOMY FOR THE UPWARDLY MOBILE YOUNG LAWYER.

AS A VERY YOUNG CHILD, THE TONSILLECTOMY

Having no personal recollection of this event, these remarks reflect my parents' statements to me. The operation itself apparently was routine for that particular period of medical science, but I am told that it resulted in my acquiring one of my very first and perhaps most enduring "cravings": for ice cream!

I am told that this particular characteristic received its acid test shortly after the tonsillectomy when my mother and her good friend, Rose, were driving Rose's son, Louis Charles, and myself, and a collision occurred. Sitting in the back seat, my ice cream was thrown out of the cone and fell on the floor, but I picked it up and ate it without waiting a moment. I had passed the test!

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(2) AS A SOMEWHAT OLDER, BUT STILL YOUNG CHILD, THE HORSE-KICK

Horseback riding was one of my favorite activities at the Athens Y.M.C.A. Camp in northeast Georgia, which I attended for seven consecutive Summers. On the occasion of an overnight horseback ride, we were galloping along a dirt road when I obviously allowed my horse to get too close to the horse in front, which caused the leading animal to pick up its leg and kick me on the shin and open up a gaping hole. The camp counsellors rushed me to a hospital in Gainesville, Georgia, for emergency treatment, and my parents were called in Atlanta to meet us there. When my parents arrived at the hospital "to see the boy who was kicked by a horse", they were told that he had died! The fact was that a young farm boy had been kicked by a mule and brought to the same hospital and that he actually had died as a result of his accident.

With due respect to the sadness and seriousness of that situation, I wonder if it may have been the foundation of those lines in the show, Fiddler on the Roof ".....It was a horse..... It was a mule!.....It was a horse!"

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(3) APPENDICITIS AT SEA DURING THE LATTER DAYS OF WORLD WAR II

But most memorable and most serious of all four of these prior situations in my life was that which occurred in the Spring of 1945. I was beginning the third year of my World War II service in the United States Army, after having been detailed from my original military assignment to the "Army Transportation Corps" for the purpose of working with European Theatre troops being returned to the United States at the conclusion of the War in Europe. The first ship on which I sailed was a small converted "Victory" cargo ship. After being re-fitted for troop-carrying, our ship sailed from Mobile, Alabama. Our destination was the Mediterranean, but we, of course, had to go around the tip of Florida and then across the South Atlantic. That particular route, unlike the North Atlantic, was seldom used by the ships of the Navy or the Merchant Marine, and this particular ship was a very slow moving one.

While we were in the middle of the South Atlantic, I had an attack of appendicitis. Since we had not yet taken on board the Army troops, the ship was staffed only as a cargo-merchant ship; no medical officer was assigned to the ship! The closest thing to a doctor was a Medical Administrative Officer, whose only exposure to problems such as this was a large medical encyclopedia with recommendations for emergency actions - probably the equivalent of a good Boy Scout first aid manual!

Furthermore, we were so far away from the principal shipping lanes that no ships with doctors were available to send medical help. Whatever was to be done was going to be done by this Medical Administrative Officer, using only the help he could get by short wave radio. Whatever he did, at least he controlled the situation.....the appendix did not burst during the next six or seven days and we arrived at Marseilles, France, where I was taken to an Army medical hospital and immediately operated on for the appendicitis.

The medical team in Marseilles was part of an Army unit which had been serving in combat duty and obviously was very anxious to get back home. The two things which I recall about that operation were: (First) that I was not put under general anesthesia, but given a local, or spinal, anesthetic; and being awake, I could hear the conversation of the personnel performing the operation, feel the tugs (but, fortunately, not the pain) as they went about their business, but I could not actually see the operation itself because my eyes were separated by a sheet from "the situs operandi"; and (Second) presumably because of their attention being focused on "going home", that this medical team neglected to tie together a number of "blood leaders", which left me quite bruised and required my staying in the hospital for an extended period of about thirty days.

The compensating factor was that I then had the opportunity to recuperate at Cannes on The Riviera, where among other things I got my first "in personam" view of the French bikini!

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(4) HEMMORRHOIDECTOMY FOR THE UPWARDLY MOBILE YOUNG LAWYER

About twenty years ago, this operation was performed on short notice when my Internist discovered during the course of an annual physical examination that I had become very anemic as a result of bleeding hemorrhoids. The operation itself apparently was not unusual. However, at the time I did not realize that this experience would help me as a lawyer in 1979 when I was serving as Counsel to the President of the United States in the Carter White House. The memory of my own experience made me more empathetic when I suddenly had to assume a unique responsibility in this role. The following excerpt from a news article sets it all out:

The President's Lawyer

NATIONAL JOURNAL 3/3/79

During President Carter's recent siege of hemorrhoids, when there was a possibility that he might have to undergo surgery, the White House learned, somewhat to its alarm, that there were no clearly defined provisions under the 25th Amendment regarding the temporary transfer of presidential authority while the chief executive was under anesthesia. "It was an intriguing constitutional matter which had never come up before," remarked Robert Lipshutz, counsel to the President.

At Lipshutz's direction, the White House counsel's office outlined the procedures and drafted the necessary documents authorizing the Vice President to assume the powers and duties of the office as Acting President while the President was medically incapacitated. Since Carter did not require surgery, the proposed procedures were never implemented. Nevertheless, as Lipshutz observed, they are expected to serve as a model should a similar contingency arise in the future.

* *

CONCLUSION

And so, tomorrow morning we get together again: myself as the patient, a surgeon, anesthesiologist, assistant surgeon, nurses, and all the supporting cast of characters. Hopefully, I will be able to write a fifth chapter with a perspective similar to the foregoing.....even if I do not get around to it until I am age 73 instead of 63!

BOB LIPSHUTZ

July 12: surgery. Local, possibly general.

Polyp removal.

Prior press briefing

by end of week, various options.

Events at time: elective

Options memo for FF, decision for DR, press guidance

- legis. hist. of 25th Amend.
- discussion w/ [illegible]

- [illegible] [illegible] + 3 – only to keep if any bad news.
  + [illegible] [illegible] [illegible] w.r.t. L. II's
- L. II's: not doing
- no approval

Polyp procedure

injection & removal, then "around the corner." Dose of analgesic. Able to ambulate, even when around the corner. Don't drive.

Ruptured colon: 0.1% likelihood

- Warren Commission Report: problem of course
- I'll call Secret Service

Ray Shubbick, Head of PID

- take charge of body, secure
- not permit autopsy for law enforcement, if trained police dept, etc. Fed jurisdiction now exists, so FBI can always charge.

THE WHITE HOUSE

Office of the Press Secretary

PRESS BRIEFING
BY
LARRY SPEAKES

July 13, 1985

Bethesda Naval Hospital
Bethesda, Maryland

12:19 P.M. EDT

MR. SPEAKES: The President's surgery began at 11:48 a.m. Eastern time this morning in the operating suite here at Bethesda. The President left his suite at 11:15 a.m. It's about a two minute trip from the suite to the operating room. Mrs. Reagan walked beside him holding his hand as they proceeded down the hallway. She went to the beginning of the sterile zone in the operating suite. Both said, "I love you," and then she left him as he went into the operating suite.

Time for quips: As he was preparing for surgery he had a mild complaint about proctoscopic discomfort from yesterday. He said, "After all you did yesterday, this ought to be a breeze."

Earlier today Mrs. Reagan arrived at the hospital shortly after 9:00 a.m. The President this morning met with Don Regan and later with Don Regan, Fred Fielding and myself. He had read his report from the National Security Council. He discussed legislative matters with his Chief of Staff.

In the latter meeting, the President discussed a letter which we are now distributing. It was signed at 11:32 a.m. Letter? Yes, it's coming from the back. The letter will speak for itself. He said to Mrs. Reagan, who stood by his bed as he signed, "I'm signing these letters, but you're still my First Lady."

That concludes the events to the moment.

Q What is the letter? I'm not quite clear.

Q -- transfer of power?

Q Is this a transfer of power?

MR. SPEAKES: The letter is being distributed to you and will be shown.

Q Is this a delegation of power for a specific amount of time?

MR. SPEAKES: Read the letter and you will --

Q Is there a problem in telling us?

MR. SPEAKES: Read the letter and you will understand it.

Q Well, will you stay here and fill us in?

MR. SPEAKES: Sure.

Q Larry, the letter says that Vice President Bush -- he'll discharge the powers of duty --

Q Can you bring the letter down here?

Q -- commencing with the anesthesia. Is this -- a legally and constitutionally binding sort of thing?

MR. SPEAKES: I think the letter speaks for itself. I think if you read it in its entirety --

Q I've got the letter.

Q Larry, was there any option besides this letter --

MR. SPEAKES: Why are you standing?

Q Well, I'm -- since you wouldn't read the letter and tell us about it, you know, we are on television now and I'd like to inform our viewers what the letter says. Why don't you read it. You're the President's spokesman. Doesn't it make sense for you to inform the country?

MR. SPEAKES: You can read the letter.

Q Larry, was there an option to consider besides this letter, or was this the only option or was this --

MR. SPEAKES: Want to discuss options, David, but certainly, we've had discussions in the White House yesterday and this morning and discussions with the President. That's the President's decision.

Q Only for the period --

Q Larry --

Q Only for the period during the anesthesia that this is a transfer of power --

MR. SPEAKES: That's --

Q -- to the Vice President?

MR. SPEAKES: That's the President's intention, yes.

Q Where is he? At the White House now?

MR. SPEAKES: No. He's at his residence.

Q Larry, does the --

Q And when did he get this letter?

MR. SPEAKES: The Vice President did not get the letter. He's been informed of it by telephone and the letter will be delivered as required to the President pro tem of the Senate and to the Speaker of the House of Representatives.

Q Yes.

Q Are you going to --

Q -- after 11:32?

Q -- after the President?

MR. SPEAKES: I'm going to be here as long as you have questions. If you'll just take your time, I'll answer all your questions.

Q Is Bush now the acting President?

MR. SPEAKES: The letter will tell you exactly what it is.

Q -- delegation of powers took effect at 11:32 a.m. this morning, is that correct?

MR. SPEAKES: It took effect when the letter was delivered to the appropriate Congressional authorities -- formally took effect. The President authorized it to begin when he went under the anesthetic. Now, the specific time on that should be roughly between 11:15 a.m. and 11:48 a.m.

WRONG

Q Larry --

Q Larry, was it recommended by Regan and Fielding that this be done -- when the President -- did Fielding and Regan suggest to the President that he do this?

MR. SPEAKES: There were a number of things discussed by the counsel, as usual, as we do business in the White House. We presented these discussions to the President. He participated in them and he made his decision.

David?

Q He says at the end that he'll notify the Vice President when this ends, so you anticipate that being this afternoon or -- before --

MR. SPEAKES: The doctors here advised us that it will be a matter of hours, yes.

Q Did the doctors advise him to do this?

Q Larry, when was --

Q Larry, -- Larry, is there any historical precedent to this?

MR. SPEAKES: I think we're going to have to get a little better organized here. There's --

Q Larry, who informed the Vice President --

MR. SPEAKES: There's a front row act going on and I think it'd probably be good, if people are going to do live television standups, they probably should move to the rear to do those.

Q Larry, who informed the Vice President?

MR. SPEAKES: Don Regan by telephone.

Q Larry, is there any historical --

Q What time, Larry?

Q -- under the Amendment.

MR. SPEAKES: Look, you're going to have to get better organized if you want me to answer your questions.

Helen asked what time. And the question -- and the answer is that -- around noon today.

Q And so that's about a half hour after the letter was signed?

MR. SPEAKES: Roughly that. Maybe -- It was between 11:30 a.m. and 12:00 p.m.

Q And Regan called him from the hospital?

MR. SPEAKES: Yes.

Q Called Bush.

Q Do you anticipate issuing another letter later this afternoon?

MR. SPEAKES: I think the President will sign another letter when he wants to make the changes back.

I'm having considerable difficulty with the broadcast going on on the front row, and I know you all are. Do you want to -- I think we'll just stand by here until the front row finishes its act.

Q Larry, what do you think prompted the President --

MR. SPEAKES: Helen, I can't answer questions with this going on.

Q Larry --

Q Larry, what was --

MR. SPEAKES: I can't answer questions until this finishes. And when it finishes, we'll get in business.

Q Will the television correspondents please leave the room?

Q Boo.

Q Boo.

Q Boo.

MR. DONALDSON: Let me ask you a question: If you were at home watching this, and he refused to read --

Q Sam, we need this information -- you can broadcast it.

MR. DONALDSON: I know you do --

Q You can do it somewhere else.

MR. DONALDSON: This is all live.

Q We all need it.

Q So what?

Q I understand that. Then let him speak.

MR. DONALDSON: -- Admiral Vanderbilt said, "The public be damned." Right?

Q Let the Spokesman speak, please.

Q -- last question.

MR. SPEAKES: I can't until you fellows finish.

Q Larry --

MR. SPEAKES: You're going to have to establish some ground rules among yourselves or this will look like the Amal press conference. It already does.

MS. THOMAS: Larry, I want to say --

MR. SPEAKES: Helen, I'm sorry.

MS. THOMAS: You knew you were on TV, and you should have let the public know what was in the letter.

MR. DONALDSON: Well, he doesn't care about the public.

MR. SPEAKES: Pardon?

MS. THOMAS: You should have let the public know what --

MR. SPEAKES: Sam, do you want to state that again?

MR. DONALDSON: I don't think you care about the public, if you tease the public which is watching by saying you have a letter from the President of the United States --

MR. SPEAKES: Well, I think --

MR. DONALDSON: -- but you won't --

MR. SPEAKES: -- you should make some decisions among yourselves as to whether you can handle this in a live broadcast manner, or whether you would like to handle it in some other manner. I'm going to leave that to the press corps to sort out among themselves.

I come here to give you information. I am prepared to give you information on the President. But I can't do it when there's a circus atmosphere taking place on the front row.

Q Larry, can we continue with the briefing, please?

MR. SPEAKES: We will continue with the briefing. I'll begin in the back.

Q Could you tell us whether the decision to sign this letter was made in the meeting you described with Fred Fielding --

MR. SPEAKES: Yes.

Q -- and yourself and Don Regan?

MR. SPEAKES: The decision was made there by the President in that meeting that took place around 10:30 a.m. this morning.

Candy.

Q If I could clear up -- you said earlier the letter was signed at 11:32 a.m., but Reagan left his suite at 11:15 a.m.

MR. SPEAKES: 10:32 a.m., the letter was signed. He left the suite at 11:15 a.m. Surgery began at 11:48 a.m.

Johanna.

Q Do you know specifically what drugs he will be under and whether --

MR. SPEAKES: I'm sorry. I'm having -- getting you over the front-row volume.

Q Do you know specifically what drugs he will be

taking by way of anesthesia and how long they take to wear off?

MR. SPEAKES: It will be a matter of hours.

Q But you don't know which drugs they are and how groggy --

MR. SPEAKES: Yes, I do, but I don't think we're going into that kind of detail.

Q Larry, is this --

MR. SPEAKES: The surgery is planned to take about three hours, give or take an hour. And then the recovery time would just be a matter of a very few hours after that.

Q Larry, is this a formal transfer of power under the 25th Amendment? The letter doesn't state that clearly one way or the other.

MR. SPEAKES: Chris, you have to read the letter. I think when you read it, you'll understand it.

Q Larry --

Q No, it doesn't say that, one way or the other.

MR. SPEAKES: Read the beginning of the -- the end of hte first paragraph and you'll understand.

Q He says, "incapable of discharging the Constitutional powers and duties of the office of the President of the United States."

MR. SPEAKES: Read the end of the second paragraph, last sentence.

Q He says, "I do not believe that the drafters of this Amendment intended its application to situations such as this instant one." But then the next word is "nevertheless."

I don't understand why you can't tell us whether this is a formal transfer of power or not.

MR. SPEAKES: Chris, we're going to let the letter speak for itself. This is an important document, and it is one that says exactly what we want it to say. And that's where we want to leave it there.

Q Are you going to tell us whether or not it's a formal transfer?

MR. SPEAKES: It meets the requirements, as required under the Constitution. It's a decision the President makes about how he wants to operate. That's it.

Q Well, may I ask the question, if there were no 25th Amendment, would the President be able to transfer power, just because he thought it was the right thing to do?

MR. SPEAKES: Sure. He could do it by letter.

Helen.

Q Larry, could you say what really prompted the President to do this? Because yesterday I think, basically, we were given the impression that it wouldn't be --

MR. SPEAKES: No, ma'am.

Q No?

MR. SPEAKES: No. If you got that impression, you got it wrong.

Q But is -- Okay. Then was there anything -- one thing that prompted the President --

MR. SPEAKES: No. As I told you yesterday, repeatedly, and told you this morning, repeatedly, there are procedures and we will have those procedures in place. The procedures were put in place, based on a Presidential decision.

Q So this was decided yesterday that --

MR. SPEAKES: No. It was decided by the President in a 10:30 a.m. meeting this morning.

Q Would it be fair to say, Larry, that the President is not recognizing that the 25th Amendment must be invoked in such situations, but in this particular case, he is choosing to do so?

MR. SPEAKES: As I indicated, the President lays it out very specifically how he wants it worded. And I think you're just going to have to draw your conclusions from this and let the letter speak for itself.

Q Larry, is there any --

MR. SPEAKES: I do not intend to amplify on it.

Gary.

Q Larry, is it possible that this will be rescinded by the end of the day?

MR. SPEAKES: Yes, it is entirely possible and expected.

Q Larry, is there any historical precedent for this type of letter?

MR. SPEAKES: Pardon?

Q Any historical precedent for this type --

MR. SPEAKES: There is not.

Q When George Bush decided to return to Washington, he must have already known about the letter. Had a decision -- very close --

MR. SPEAKES: Wait a minute. Stop right there and say -- why would you say that?

Q He must have known that they were making their decision and the decision was probably going to be this one. Is that why he returned?

MR. SPEAKES: No. I mean, your premise is wrong, Alessandra, that he must have known is not necessarily true.

Q But he was pretty close to guessing that this was what was going to happen, and that's why he returned.

MR. SPEAKES: No, it's not.

Q You had no inkling whatsoever that this might happen?

MR. SPEAKES: This had certainly been discussed with him,

been discussed with him in the past. But that's not the reason he returned.

Q But in his phone call --

MR. SPEAKES: And he did not know the President's decision at the time.

Q But in his phone calls with Don Regan, surely this eventuality came up.

MR. SPEAKES: Sure, they've discussed it, yes. And they've discussed it with their Counsel. But, as far as this -- as this being the reason for the Vice President's return, no. The Vice President wanted to do it because of his close, personal relationship with the Reagans.

Q -- a medical question. Has the President, in the last 14 months, or during this present year, ever had a barium enema?

MR. SPEAKES: I don't think so, George. I don't think he's had any in connection with his regular medical exams, and that would be the only case that it would be.

Q The sigmoidoscopy that he had, was it rigid or flexible, do you know?

MR. SPEAKES: Flexible, I believe.

Q Was it after 1984?

MR. SPEAKES: I think both were flexible.

Q At the time that the first polyp was found, 14 months ago, why didn't he have them colost- -- I can't say it either.

MRS. SPEAKES: The full examination? I think that the first polyp was benign, as was the second one, and doctors at both times advised that it was not necessary to do so at that time.

Q But it's not a question of whether it's benign or malignant. The question is whether or not there's some there and the only way that you can tell is if you take a good look.

MR. SPEAKES: That's right.

Q Especially since it's the President of the United States, why wouldn't they have taken a good look throughout his whole colon?

MR. SPEAKES: The proctoscopic exam that he underwent in both cases is quite extensive, not nearly as extensive as the one he had yesterday, but nevertheless it was the medical advice. Doctors will give you varying opinions on it. There's one school of thought that you need not have another examination because this one is benign. That is a very definite school of thought in the medical profession, but at this time they elected -- since they were going to go back in and remove this polyp -- that they would have the full examination.

Q But also the doctors will tell you that if they had looked after the first polyp that they may have seen something, because the size -- You describe it as a large polyp, that polyp could have been growing for the last 14 months, couldn't it?

MR. SPEAKES: Probably longer in doctor's estimation, yes.

Q So if they had done the more extensive procedure 14 months ago, they would have seen it.

MR. SPEAKES: That's true, but then again, there's -- this has been there for a time. I believe my medical knowledge is correct that it's not a rapidly growing polyp and --

Q -- put the President at more risk by not looking for it 14 months ago?

MR. SPEAKES: I can't make that judgment.

Q Larry --

Q Larry, did the President consult with anyone else about turning over the transfer of government other than Don Regan and Fred Fielding?

MR. SPEAKES: No, but the President's own staff made

extensive consultations with legal authorities including the Attorney General and the Justice Department.

Q Did anyone talk to anyone from the Supreme Court?

MR. SPEAKES: Not to my knowledge but I don't know the answer to that for sure.

Yes, ma'am.

Q -- anotner medical question. Do you know whetner this polyp is over a centimeter or not?

MR. SPEAKES: I do know the size, but we're describing it as a large polyp. Perhaps we can be more precise when the surgery is completed.

Q Are we going to be able to talk to some physicians?

MR. SPEAKES: Probably so, yes. But what information are you not getting that you want to get from a physician? Anything specific that you're missing?

Q Larry --

Q Yes, I'd like to know the size of the polyp.

MR. SPEAKES: Well, I could give it to you --

Q I'm a medical writer.

MR. SPEAKES: I understand that. I know the size of the polyp and I know the location of the polyp, but I choose not to give it at this time. Perhaps afterwards, either I will give it or a physician will.

Q Larry, 40 percent of these polyps that look benign turn out to be cancer, and then the question, of course, is --

MR. SPEAKES: You read Dr. Hoffman this morning?

Q Well, it's a Hopkins study.

MR. SPEAKES: I understand.

Q The question is spread -- the possibility is microscopic spread that cannot be picked up on a CAT Scan, and yet you said there was no evidence of spread in the abdomen. How can you tell us that and where did you get that kind of information since --

MR. SPEAKES: If you will look carefully at what I said, I said the CAT Scan revealed no evidence of spread. And I'm sure that once the surgery is underway, they'll do a careful examination of the area, they will do a careful examination of any tissue removed, and that will be their decision.

Q Excuse me. Is this --

Q Larry, is it the administration's view that, absent the 25th Amendment, the President could have sent this same kind of letter and had this same kind of temporary transfer of power?

MR. SPEAKES: I would assume that any President could have, in the past before the 25th Amendment was passed, by -- delegate authority by letter. I guess Woodrow Wilson could have.

Q Full authority, bill signing authority -- that kind of thing?

MR. SPEAKES: I don't know. That's a hypothetical

because we're only dealing with the 25th Amendment discussion that -- because we do have the 25th Amendment.

Q But the question is, minus the 25th Amendment, the President could have delegated any kind of authority he wanted to on a temporary basis?

MR. SPEAKES: You mean a previous President?

Q No, this President. Minus the 25th Amendment, this letter --

MR. SPEAKES: That's a legal question that I'm sure would be debated weeks on end by legal scholars. I don't know the answer to that.

Sam?

Q Larry, Birch Bayh, who, as you know, was head of the Constitutional Subcommittee, the Senate Judiciary Committee that wrote the 25th Amendment, insists that it was written for this very instance. That is, because of Lyndon Johnson's operation, that and other things that happened in the '60s and going back to Eisenhower and his operation -- they wrote it just to cover this kind of situation. Why does the President feel that it wasn't meant for this situation?

WRONG

MR. SPEAKES: That's the President's judgment based on discussions held within the legal minds of the government.

Bill.

Q Did the President talk to the Speaker this morning?

MR. SPEAKES: The President has not spoken to the Speaker this morning. I'm not aware of any telephone calls this morning that he's made.

Q Larry --

Q Is there a plan to take any --

MR. SPEAKES: Don Regan was planning -- planned to do that.

Q We were told that the President also spoke to --

MR. SPEAKES: I'll have to check but I'm not aware of any phone calls.

Q Who did Regan call exactly? Can you give the list?

MR. SPEAKES: Who did he call?

Q Regan.

MR. SPEAKES: He spoke to -- he planned to when I left him a few minutes ago to speak to Senator Thurmond and Speaker O'Neill.

Yes.

Q Is there a plan to take any lymph nodes to rule out microscopic spread --

MR. SPEAKES: Take any what?

Q Lymph nodes, to rule out microscopic spread of this thing, in case it should --

MR. SPEAKES: I think we'll have to ask the surgeons that. They had planned to, as is common in surgeries of these types, to remove certain parts of the lymph nodes in the area of the blood supply and a certain portion of the intestine. And that would be examined.

Peter?

Q Have doctors given you any estimate about a minimum of how many hours it will take before the President is able to advise the Vice President -- he is able to discharge the duties?

MR. SPEAKES: Yes. They've given us a time frame. I'd prefer to leave it at the moment as a matter of hours -- a very few hours after the completion of the surgery.

Q Can you tell us how long the -- how long he'll be in anesthesia after the surgery is completed?

MR. SPEAKES: Well, he won't be receiving it, he will be coming out from under it, but as I say, it probably will be a matter of just a few hours -- very few hours.

Q Larry --

Q Larry, when the Vice President made his personal decision to return to Washington, had he had any conversations with the White House, Fielding or Regan concerning the legal situation that would occur when the President was --

MR. SPEAKES: My judgement is yes, there had been some discussion between Don Regan and the Vice President, but specifically, I don't know the details of it, and as I say, the decision was not made, and at the time the decision was made, the Vice President was in the air.

Frank?

Q Just to be very clear about this, though, the President is not transferring authority under the 25th Amendment -- he's doing it through this letter -- does this make the Vice President the acting President?

MR. SPEAKES: Frank, I'm just going to leave the letter as it stands. We really don't want to amplify on it anymore than what's in the letter. It speaks for itself, and --

Q It doesn't speak for itself, and I want all of us to be able to be clear about this, because I think the American people have a right to know. Is the Vice President now the acting President?

MR. SPEAKES: Well, as I say, we'll stick with the letter. Were there other questions?

Q Yes. Larry --

MR. SPEAKES: I tell you what I would like to do is discontinue the live coverage and go on background and give you guidance on this, because I think you need it.

But go ahead, Mike -- let's get all of the on-the-record questions.

Q Larry, at one point on this -- on the letter, are there any decisions -- Presidential-level decisions anticipated during this period, or were there when the letter was signed?

MR. SPEAKES: No, no. If you look at the constitutional -- the powers of the President under the Constitution, there are things like the right to appoint, the right to assign veto legislation, et cetera, et cetera; none of that is anticipated.

Q And the Vice President agrees not to take any action like that?

MR. SPEAKES: No. I don't think that type of agreement was sought from the Vice President, and the relationship as the

President alludes to between the President and the Vice President is extremely good, and the two are in sync on policy matters, and I don't foresee anything like that, or the necessity for it.

Q While we're on-the-record, could you tell us what Mrs. Reagan will be doing during the time of surgery -- any other --

MR. SPEAKES: Yes. Mrs. Reagan is having lunch, and she's waiting in the President's suite, and she will receive updates through the surgery.

Q Who is with her, Larry?

MR. SPEAKES: Jim Rosebush, her Chief of Staff, and that's it. Her brother, Dr. Davis -- Richard Davis -- is coming to be with her later this afternoon.

Q -- briefing schedule the rest of the day?

MR. SPEAKES: The briefing schedule is, we will probably notify you in a less formal way when the surgery is completed, and then we will come down in a couple of hours.

Yes?

Q -- will you be briefing here?

MR. SPEAKES: Yes. We'll come down in a couple of hours, and I'll talk to the doctors, and chances are one of the surgeons will come down with me.

Q When he comes out of the surgery, will you have a formal briefing --

MR. SPEAKES: No -- just a notification, unless I've got another quip or two.

Q And then you think -- I mean it's -- and then you think a couple of hours after that, you'd come down --

MR. SPEAKES: Well, it may not be that long, Chris. You know, say you finish at 3:00 p.m., it could be an hour, two hours after that, but it depends on how long the doctors want to monitor, how long they want to sit and talk among themselves, how long they want to sit and talk with us, and so we'll be here as quickly as we can.

Yes?

Q -- is there some assurance that we can talk to some doctors this afternoon?

MR. SPEAKES: Well, you'll be all right. Yes, we'll probably have a doctor down, but, like I say, if you've got anything that's troubling you right at the moment, I think we can get an answer for you, either here or run somebody down.

Q I'd like to know whether this polyp is the kind that has a stalk, or is --

MR. SPEAKES: No, it's the flat kind.

Q Sessile kind?

MR. SPEAKES: Sessile kind, exactly.

Q This transfer was not decided yesterday. Can you just say what some of the reasons were for deciding to do it today?

Q -- some new -- some of the new --

MR. SPEAKES: For deciding to do it today? As I indicated yesterday, as Don Regan did -- but there were discussions going on, and when we had some -- a presentation we wanted to make to the President, we sat down and talked with him, he made his decision, so --

Q -- new today, or any new reasons for wanting to do it today when they didn't decide yesterday?

MR. SPEAKES: Well, there was no call to decide yesterday. It was a continuing discussion, and -- among the Counsel, among the Chief of Staff, among others of us in the White House, with the Attorney General, with the others in the Justice Department, Research, and then they visited with the President this morning.

Q Is this unprecedented, Larry -- this --

MR. SPEAKES: Yes. As far as we know, there is no precedent for this.

Q When the President decides to transfer power back, or to take power back, how will he go about doing that?

MR. SPEAKES: By letter to the Vice President.] wrong

Q So it was really the recommendation of all of his advisors that this be done?

MR. SPEAKES: Well, as I say, that we sit down and talk with the President, and we discussed the situation in full this morning at 10:30 a.m., and this was the decision he made.

Q Is this the first time that he had discussed it -- that this possibility that he might have to --

MR. SPEAKES: No, it's not. I think there had been other discussions prior to coming to the hospital in the White House.

Q How long was the discussion today before he signed the letter?

MR. SPEAKES: Ten minutes.

Q Was McFarlane involved in those discussions, Larry?

MR. SPEAKES: Bud McFarlane has been kept abreast, and we've talked to him about it. He was not here at the hospital today, but we have talked to him about it this morning and yesterday.

Q We have pictures of him coming in here today.

MR. SPEAKES: Bud?

Q Yes.

Q Yes, he was here.

MR. SPEAKES: I didn't see him. What time did he come in?

Q Well, maybe he was --

MR. SPEAKES: Maybe he's still wandering around trying to find --

Q Maybe he's on the phone or something.

Q He might be on the phone.

MR. SPEAKES: Could be, but I -- you know, we talked to him at the White House at 11:30 a.m.

Q Larry --

Q Larry, does the return of power require a letter from the Vice President as well as the President?

MR. SPEAKES: Mike, I don't think so. I don't think so.

Q Larry, if --

Q -- and I would like to say that I think that stories would be a lot clearer if we could have a doctor to whom we can address our questions.

MR. SPEAKES: Do you have a question that's pending that's troubling you and maybe I can get it for you now if you have a problem. Otherwise, I said I would talk to the doctor and perhaps bring him down this afternoon.

Q I think that a lot of your questions are very vague and I think that this story will be more focused and more clear -- clearly detailed if we could have a dialogue with the doctor because --

MR. SPEAKES: Okay, well what's your question that's vague?

Q I don't have one right now, but I think when the operation is over, we'll have a lot of them.

MR. SPEAKES: I'm sure you will. And I think we can -- I think we'll be very helpful. I don't -- having been through more than one of these things in the past, I think we have been very forthcoming and straightforward with you and others and I think you had sufficient information to provide your stories.

Q Well, just, say, on the basis of past experience in -- in Louisville, it's a much more clearer presentation when doctors dialogue with the press.

MR. SPEAKES: We'd probably get Dr. De Vries here if we got him on a plane now. (Laughter.)

Q Larry, in the event the transfer back of power, or whatever language you want us to use to describe this -- happens before you are ready to brief on surgery, will you notify us here?

MR. SPEAKES: That what?

Q When Reagan sends a letter to --

MR. SPEAKES: We'll notify you. I wouldn't anticipate it until late afternoon. So --

Q You wouldn't anticipate it until after the briefing on the surgery?

MR. SPEAKES: Probably be after that. Yes. But we'll let you know.

Q Larry, Dr. Joanna Shaw. In the presence of hidden blood in the stool, or a polyp, it is customary medical procedure to take an entire look at the colon from beginning to end. Are you really saying that it was sufficient, on medical basis, to just do a sigmoidoscopy --

MR. SPEAKES: Well, if you talk about hema -- he -- blood in the stool, that's not necessarily true. As we pointed out, there was -- there were tests before the President's examination. Those tests revealed the presence of something that appeared to be a positive.

Q It was either --

MR. SPEAKES: It could have been a --

Q -- or not --

MR. SPEAKES: No. It could have been a false positive. Have you heard about what causes -- sometimes causes a false positive in these --

Q Yes indeed. I'm a medical physician and I know

exactly what causes a false positive.

MR. SPEAKES: Red meat or some vegetables do.

Q Yes --

MR. SPEAKES: The President was retested following his examination and there were a number -- an exceptional number of negatives that --

Q Still, with a history of polyps, it would be standard medical procedure to take an entire look at the colon. Even if we're talking March -- it would have been customary procedure either to do a barium x-ray with air contrast or a colonoscopy at that time. And, in fact, in the first instance when the polyp was discovered, it would be standard medical procedure to do a routine examination of the colon.

MR. SPEAKES: Well, I can say to you, and I think you recognize it if you would like to, that there's more than one school of medical thought on this. And, that was the advice given.

Q -- advice.

MR. SPEAKES: Pardon?

Q So you are saying, in fact --

Q This is silly.

Q -- that a limited examination of the colon is standard medical procedure in the presence of a polyp?

MR. SPEAKES: As I said, that was the medical recommendation given to the President and to his family and to his staff. The President accepted it. You will find out that there are two schools of medical thought on this, and we followed the one that was given to us.

Q Larry --

Q Who gave that medical opinion?

MR. SPEAKES: The physicians that were participating.

Q His personal physican or the White House physicians or expert medical advice from a gastroenterologist or --

MR. SPEAKES: We got a number of opinions on it and that was the basis of our decision.

Q So the doctors refuse to be identified, giving this decision?

MR. SPEAKES: We don't customarily identify the doctor-patient advice. Is that custom in your profession? Is that part of your medical ethics?

Q I think when it's the President of the United States, perhaps somebody should know who's giving the opinion to the President and whose advice he is following --

MR. SPEAKES: No.

Q -- because especially when, if you are correct in suggesting that there might be a difference of opinion, which I wonder about.

MR. SPEAKES: You mean you don't think there's a difference of opinion?

Q I don't think there's a difference of opinion on checking out the entire colon, and the President's either.

MR. SPEAKES: There certainly is.

Q The doctors that conducted that examination are on -- their names are on record, it's a matter of record. Right?

MR. SPEAKES: But not the ones that were consulted with by those doctors.

Q Larry, did the President decide to write this letter because of any national security developments or concerns from intelligence that might have developed in the last few hours?

MR. SPEAKES: I would steer you away from that.

Q I also --

Q What did he say?

Q -- recall in 1981 when the President was operated on, can we assume that something like this was not done because there wasn't advance planning? In other words --

MR. SPEAKES: I can't quite hear you, Owen. Do you assume what?

Q When the President was being operated on in 1981, there was no similar letter written. Can we assume that's because there wasn't any advance warning, it was a spontaneous --

MR. SPEAKES: Wasn't any advance warning, and as you may recall from the history of the occasion, the majority of the Cabinet including the Vice President at a point within a couple of hours was assembled in the White House.

Q Larry, can I follow up on that? Did the episode in 1981 influence the President's thinking as to how this one should be approached?

MR. SPEAKES: In 1981, we made a very thorough review in the White House of all of the circumstances including the legal circumstances. And we took all of that into consideration, our discussions at that time and subsequent to that, in making this decision.

Q The review was after the assassination attempt, you reviewed what had happened and you took that into account this time?

MR. SPEAKES: That's right, yes.

Q I think they've gone off of live TV. Maybe you -- you talked about giving us some background information.

MR. SPEAKES: Yes. Are we comfortable? We'll have to cut the lights down and --

Q Larry, one more thing. How are these letters being delivered and by whom? What's the process to get the message to Bush?

MR. SPEAKES: They will be delivered by a messenger, but I don't know whether -- I guess a guy will come out here and get in a car and go. It could be one of the Congressional liaison people. Maybe I could find out for you.

Q Larry, where, physically, will Bush be located during this period when the President is unconscious?

MR. SPEAKES: I believe he is in his residence, but we can check that to see if he's gone to his office at the White House.

Q You expect him in the White House later was the answer to that?

MR. SPEAKES: Yes.

SENIOR ADMINISTRATION OFFICIAL: All right. Lights. Can the lights go down without problem or do we have to wait? When I see the eyes go away from the cameras, then I know we're off.

Let me speak on DEEP BACKGROUND, and then if you wish to change it, I can give you the -- really, the whole story.

First of all, we're dealing with -- in an unprecedented situation, a situation that is clearly uncharted as far as the legal end of it. There's been a considerable amount of research, as we pointed out, since 1981, and a more intensified research over the last week or so to try to determine which way we wanted to go on this.

Q Last week?

SENIOR ADMINISTRATION OFFICIAL: Sure. When it was obvious the President was coming to the hospital and that he would be under some form of sedation yesterday.

Q There were Presidents in the past --

SENIOR ADMINISTRATION OFFICIAL: Pardon?

Q There have been Presidents in the past who --

SENIOR ADMINISTRATION OFFICIAL: I can't hear you.

Q There have been Presidents in the past --

SENIOR ADMINISTRATION OFFICIAL: There has been no precedent for the use of the 25th Amendment. We're talking legal, not medical.

Q Let him -- go ahead.

Q Let me finish this.

Q Finish what you --

SENIOR ADMINISTRATION: The lady wants to argue precedence. As I say, legal, not medical.

Q I didn't say precedence -- no. Go ahead. You didn't understand me. It's okay.

Q Finish.

SENIOR ADMINISTRATION OFFICIAL: I'm trying to.

So there were considerable discussions about this -- how to do it. We not only were dealing with no precedence in the past, but we knew that we were in the process of setting precedence. And this President or future Presidents who might want to have a tooth pulled or might have the type of surgery or procedure that he had yesterday where he was mildly sedated, but not fully sedated, and where does it come into play.

Questions like, does the 25th Amendment look at a Woodrow Wilson-type situation where a president either can anticipate or perhaps not anticipate a long period of incapacitation. All that was reviewed. This is going to be a very brief period of just three hours for the surgery, roughly, and just a few hours after that as to when he'll be fully rational and able to make any decision.

Then you look at what powers were to be transferred as I alluded to in the on-the-record -- that there are a limited, only a limited number of actions, almost none, that would have to be done -- appointments, sign bills, or things like that -- during this time period. So the President, in order to be what he felt like was being on the safe side on it, he decided this was the thing to do.

We know that people are going to look back at what we did to be sure that we had taken all the prudent steps to be absolutely up to speed and able to operate the Executive Branch and make decisions on behalf of the government. So we took this step.

Now, you can see there's a caveat in there about whether we really believe in the

-- that this is a 25th Amendment situation. That's why I was very careful about what I was saying.

On the other hand, we are making the step to take this change of power, so, I guess you could say, for all practical purposes, George Bush is Acting President and this is tantamount to a 25th Amendment. That's about as helpful as I can be.

Q -- an actual 25th Amendment?

SENIOR ADMINISTRATION OFFICIAL: I think I would have to pin the lawyers down again -- talk to Fred again about that to be sure. We're clearly leaving ourself the little out there about the President.

I hope everybody realizes I'm speaking on DEEP BACKGROUND and this is what you write yourself and it's not for attribution to a Senior Official or anybody.

David's waiting.

Q In 1981, as you know, there was some criticism after the fact of how it was handled, and you seem to be saying that what you wanted to do this time was avoid the criticisms afterwards that you weren't prudent and take this proper --

MR. SPEAKES: That's one of the factors, David, that we looked at, because, certainly, as I say, we're in an unprecedented, uncharted legal waters and, certainly, we'll have a lot of looking over our shoulder after this is over, and we wanted to be sure that we were on solid legal ground, without setting that precedent that would bind this President or others.

Mike.

Q Is there any question in the mind of anyone in the administration that the Vice President is, right now, capable of commanding the Armed Forces of the United States?

MR. SPEAKES: No. There's no question in anyone's mind that the Vice President is able to act as a basis of this letter. We believe it's thoroughly researched. It's based on opinion of the Attorney General, and it's -- or the Justice -- Attorney General -- and it's fully implemented. And, if you will note the provisions of the 25th Amendment, this meets all those provisions. So we're really tiptoeing, is all it amounts to.

Q Would you agree to put that statement on the record?

MR. SPEAKES: What did I say?

Q That there is no question --

Q There is no question.

Q -- the Vice President is able to act on the basis of this letter.

SENIOR ADMINISTRATION OFFICIAL: Why don't you say "Administration Officials believe that the letter gives a solid legal basis for the Vice President to act with the full powers of the Presidency"?

Q Absent the 25th Amendment. What did your research show you gave the President the power, absent the 25th Amendment, to turn over his office to anyone absent a resignation?

SENIOR ADMINISTRATION OFFICIAL: In other words, if we had not -- if we said this isn't the 25th Amendment, huh?

Q You have said. I gather you said --

SENIOR ADMINISTRATION OFFICIAL: I would guess, Sam, that you -- that if there was some debate about it, that is this a legal document?

Q Does it have to be if George Bush --

SENIOR ADMINISTRATION OFFICIAL: I mean, see, he could nave written a letter to say, "Dear George" -- you can do -- you know, you've got my power to -- I give you the authority to act in my stead with the -- without mentioning the 25th Admendment.

Q That's my question. Do they think the Constitution gives a President, except for the 25th Amendement, the power to say, "I'm not going to discharge the duties of my office." Let George do it."

SENIOR ADMINISTRATION OFFICIAL: I think there is at least that option, but I would guess if it was reviewed in a judicial manner after the fact, I guess people would try to -- whether they -- being incapacitated would come into play there. I -- it's a legal question that's probably subject to endless debate.

John?

Q When those who were involved in drafting the 25th Amendment that Sam cited, Birch Bayh earlier, said that it was drafted precisely to cover such situations, why does the President, in the letter, maintain that he doesn't believe the drafters intended such --

SENIOR ADMINISTRATION OFFICIAL: There is a body of Congressional record of debate in the Congress as this was done as --

and I can cite it to you -- that what constitutes incapacitation -- is it a long period, is it a short period? So, that's part of it.

Q What sort of circumstances do you think the 25th Amendment should be invoked on?

SENIOR ADMINISTRATION OFFICIAL: Well, it depends. It's in the mind of whoever wants to invoke it. Is it for a bit of a period where you're having your wisdom teeth taken out, or is it for a period like yesterday, when our opinion and our judgment that the President would have been capable of acting, had a question arisen during that mild sedation yesterday?

Q Forgive me, I'm still confused. Are you invoking the 25th Amendment, or are you not?

SENIOR ADMINISTRATION OFFICIAL: Well --

Q You can say you mentioned it, and you might not have had to mention it. The question is --

SENIOR ADMINISTRATION OFFICIAL: I tried to give you language that would probably -- that you would have to use, and that was the administration believes that the Vice President -- a legal basis for the Vice President to act.

As far as the 25th Amendment, as I pointed out to you, we're being very careful, because we are involved in a precedent-setting situation.

Q Is there a specific --

Q Well, what you're -- can we -- so what's the answer? I still don't have a -- I mean, is it a yes or a no? Are you -- or aren't you?

SENIOR ADMINISTRATION OFFICIAL: I think you're going to have to say that -- and this you'll have to say on your own -- that the letter is -- carefully avoids setting a precedent, and the President so states in a caveat there -- a disclaimer -- in the end of the first paragraph, as I pointed out to you on-the-record.

But he goes on in the beginning of the third paragraph to say not intending to set a precedent binding anyone to hold this office in the future. But he says, it is my intention, so you would just have to say, maybe you can say it for all practical purposes, this involves a 25th Amendment-like turnover of powers, but --

Q So is it fair to say you're tiptoeing around invoking it?

SENIOR ADMINISTRATION OFFICIAL: In fact, I used those very words just moments ago.

Q And the reason you're tiptoeing is to avoid a future situation with a toothache? I mean, why are you --

SENIOR ADMINISTRATION OFFICIAL: Well, any type of mild sedation, Johanna, that -- who is to determine what -- how much sedation renders a President incapacitated, as the 25th Amendment says, so who can make that judgment? We realize that we are in the process of setting a precedent here, so --Jim, is that you?

Q Yes. I understand that you don't want to go -- the 25th Amendment, that you don't want to set the precedent. But if the President believes that it is prudent to take this step, what is the concern for not setting a precedent, or for leaving that open to judicial interpretations?

SENIOR ADMINISTRATION OFFICIAL: This is about the fourth

time on this. If a President undergoes mild sedation for a tooth extraction or for a proctoscopic examination, is that incapacitation? That's what we're trying to do, because there are degrees of it, and I think it would have to be a judgment, and we simply don't want to set -- we don't want to set a precedent, because we realize we're doing it.

Q You're concerned particularly about the definition of incapacitation? Is that where the focus is?

SENIOR ADMINISTRATION OFFICIAL: Yes.

Q Larry, why can't you let this be decided on a case-by-case basis and apply your case with the fact that he's out for three hours --

SENIOR ADMINISTRATION OFFICIAL: That's basically what we're doing here.

Q -- that the 25th Amendment be invoked, period?

SENIOR ADMINISTRATION OFFICIAL: Well then, the next guy that comes along that has a two-hour, he's -- he says, well, three hours is sort of the time limit, so -- or if he has a four-hour, he says, "I've got to invoke it," but if it's two hours and 55 minutes, does he invoke it?

Q Why don't you let them make their case at the time, and you do yours --

SENIOR ADMINISTRATION OFFICIAL: That's basically what we're doing here, Gary.

Q -- sit back and wait for the 25th Amendment?

SENIOR ADMINISTRATION OFFICIAL: Well, we're just being very careful about it. I say, for all practical purposes, yes, but we're not saying that. Yes, it is 25th Amendment, but we're not saying that.

Q Candy?

Q You just said it.

SENIOR ADMINISTRATION OFFICIAL: No, I said for all practical purposes, and that's the way you should word it in your piece. Let me once again -- this is third time -- emphasize that this is deep background and cannot be attributed to an administration official or anyone. This is me trying to give you the benefit of my Fred Fielding contracts and constitutional law.

Q -- raising objection --

Q Was there a difference of opinion among those advisors that the President discussed this decision with on whether to invoke? Everybody agreed?

SENIOR ADMINISTRATION OFFICIAL: No. There was basically a number of degrees of doing this, and all of the options were discussed by advisors. Various opinions were offered. There was no basic disagreement. The way we do business on this or any other matter is, you simply go before the President and say, "Here's what we've discussed and here's some ideas. What do you want to do?" And he didn't hesitate and said, "This is the route I want to take."

Q Are there any medical details that you can divulge to us under this situation, such as the size --

SENIOR ADMINISTRATION OFFICIAL: No. We're -- there's really no big reason for that except just a little sensitivity here

and there that we'd like to hold off on. I think once we finish -- and I probably will get Dr. -- the surgeon to come down with me. What's his name?

Q Oller?

SENIOR ADMINISTRATION OFFICIAL: Oller. Yes, I want to call him "Olney" -- Oller -- Dr. Oller to come down and give you some details, but I'd like to sit down and talk with him first, and Don Regan would, also.

Yes, ma'am?

Q Could you be more specific about how many tests showed blood in the stool and how many tests were negative?

SENIOR ADMINISTRATION OFFICIAL: Well, once again, even the President of the United States is entitled to have his sensitivities protected. He saw the entire television coverage last night of his lower intestine, so -- I mean, he watched the 11:00 p.m. news last night, and so -- well, he learned a lot from it -- (laughter) -- and basically, the coverage last night was commendable. I don't have any problems with anybody, and I don't think there were a whole lot of second-guessers out there, although some have arrived on the scene today.

So -- Owen?

Q -- raised the issue of the transfer of power with the President, and when was it raised?

SENIOR ADMINISTRATION OFFICIAL: When was it raised? There was -- there have been conversations with the President in the last week or so, and I don't have the specific day that they talked about it.

Q Can you give us more specific --

Q Was it Regan or Meese, or --

SENIOR ADMINISTRATION OFFICIAL: Regan and Fred.

Q Did he ever have a personal conversation with Bush about it?

SENIOR ADMINISTRATION OFFICIAL: He and Bush have had conversations alone, but -- well, they've certainly met in the past week, but I don't know the details of those conversations.

Yes?

Q This is a logistics question. Is this being piped in -- and others being piped into the Press Room downtown?

SENIOR ADMINISTRATION OFFICIAL: I believe it's going to the White House, yes.

Q How much of a surprise was it for both the President and his doctors -- the finding of this other polyp?

SENIOR ADMINISTRATION OFFICIAL: They knew the probability of this kind of thing and they had certainly discussed it, but honestly, we were -- we had two schools of thought about if you have a benign polyp of the type that we had, you remove it, and you have to do no more.

Q Are we still on deep background? If so, can we go to background, at least?

MR. SPEAKES: Let me give you something on-the-record

that Pete's got for us. Richard Hauser, who is the Associate Counsel, I believe the Deputy Counsel at the White House, delivered this letter to Senator Thurmond's office and Representative O'Neill's office. After Don Regan spoke to them, Regan called at approximately 12:00 noon, at about the time the President went under the general anesthetic.

Will there be another letter? Yes, there is a letter that goes to Thurmond and O'Neill. No letter to the VP, but he will be advised. The VP is at his residence, so -- okay.

Back on-the-record, or do you want to stay on -- whatever?

Q On-the-record.

SENIOR ADMINISTRATION OFFICIAL: All right.

Q When does this transfer go back -- of power go back to the President? Does he have to write another letter, or --

SENIOR ADMINISTRATION OFFICIAL: That's just what I said, yes. He will write a letter to the Vice President.

Q He writes a letter and signs it? So that will be -- I mean, will he -- after he --

SENIOR ADMINISTRATION OFFICIAL: Late this afternoon, after he comes out and the doctors make a determination that he's certainly no longer incapacitated by the surgery.

So --

Q Can you give us a general idea when you might be back this afternoon?

SENIOR ADMINISTRATION OFFICIAL: I would think, barring getting with some long-winded doctors, is to do it before 6:00 p.m. for sure, Dick -- probably not before 4:00 p.m., but if he finishes at 3:00 p.m., it could be as early as 4:00 p.m., as late as 6:00 p.m. That's my guess.

So -- Chris?

Q Two questions. One, the letter says after consultations with my counsel and the Attorney General, did the President ever actually consult personally with Meese?

SENIOR ADMINISTRATION OFFICIAL: I don't believe so.

Q And secondly, in the last 24 hours, were there any particular meetings that you can talk about on this question of transfer of power other than the one this morning in the hospital room at 10:30 a.m.?

SENIOR ADMINISTRATION OFFICIAL: Well, we had discussions yesterday afternoon at the White House when we understood that the extent of the general anesthetic and had the report of -- that we were going ahead with the surgery today. And then --

Q When was that? Was that before or after you briefed us?

SENIOR ADMINISTRATION OFFICIAL: It was some before and some after.

Q And who were the main people involved in that?

SENIOR ADMINISTRATION OFFICIAL: Donald Regan and Fielding.

Q Was Mrs. Reagan in that meeting?

SENIOR ADMINISTRATION OFFICIAL: No.

Q Was McFarlane in that meeting?

SENIOR ADMINISTRATION OFFICIAL: Yes, Bud was in and out of that meeting, yes.

Q Where is the President -- in this building, and what does his room look like?

MR. SPEAKES: I can give you -- I've got to come to the trivia, too. The President's room in this suite, and we have the -- I have somewhere the number of rooms and so forth in it -- is a sizeable room, probably 15 by 30 feet. There are two single beds in there. It's a typical hospital bed of the modern variety that raises the back up and down.

Mrs. Reagan brought out a number of family pictures -- color pictures of the family. Seated at his tableside are -- is a picture of Mrs. Reagan alone, and the bedside table, and then there are other pictures of the family in the room. He is -- he was dressed this morning in lime-green pajamas, short-sleeve, long pants with no collar, but a white piping around the neck of the PJs, and --

Q Lime-green pajamas?

Q Designer pajamas?

MR. SPEAKES: Now, the surgical suite is about two minutes away. It's on the same floor, down a hallway with a couple of turns. It is one that's a sort of a co-operation there where there are a number of surgical rooms adjacent to a center core. It is your average surgical facility with a table in the center and lights over it, et cetera.

It is a facility that has a -- I went through it this morning in my own

white suit and green cap and shoe covers and it has a viewing area on a second level. As far as I know, there was no one except security to be present in the viewing area, but there are several seats in the viewing area that looks over the center of the operating table.

Q What floor is he on --

MR. SPEAKES: What floor is it on? Probably be just as well we don't give that out.

Q This building?

MR. SPEAKES: Pardon?

Q Is it just this building?

MR. SPEAKES: I don't know whether it's in this building or not. It's all connected.

Q It's not in that tower, is it?

MR. SPEAKES: I don't think so.

Q What is the sterile room you spoke of? Is that a room before you go in --

MR. SPEAKES: No, it's an area in the corridor where they don't let people unless they are dressed in whites or greens go down the hall.

Q Did Mrs. Reagan have on the --

MR. SPEAKES: No, she did not and she stopped there.

It seemed like I had one more good little tidbit, but I can't think of anything else. Frank's had enough.

Yes, Alessandra.

Q When Reagan was meeting with Regan this morning, where was he? Was he in his bed or in his --

MR. SPEAKES: He was in his suite in his bed with the back cranked up where he was sitting almost upright.

Q And that's where he's been all day?

MR. SPEAKES: Yes.

Q Hooked up to anything?

MR. SPEAKES: He had an IV this morning. But that's -- there was no food given and I presume -- well, that could have been an antibiotic prep or I don't know whether it was some sort of -- what's the doctor say? Would have been an antibiotic prep? Pardon?

Q Prophylactic antibodies but they also give antibiotics in the vein.

MR. SPEAKES: Yes. I don't know whether it was some sort of substance, whatever the correct word for an intravenous feeding.

Q Will Mrs. Reagan stay overnight tonight?

MR. SPEAKES: No, she did not. Some people had an error on that, including The Times and ABC, that she stayed overnight, and I thought I was clear on that yesterday. She went --

Q Will she tonight?

Q That's what she said.

MR. SPEAKES: I don't think she plans to, no. Oh, also, she plans -- did I say that? -- plans to host the diplomatic reception on Monday and deliver remarks herself at the diplomatic reception. She has not determined -- she has a trip scheduled Wednesday and she's not decided whether she'll do that.

Next week, we didn't have a lot on the schedule except a couple of Congressional meetings -- one separate meeting with the Senate Finance Republicans, one with the Democrats. I think one was a breakfast and one was a lunch.

Q Will there be no news conference this month? (Laughter.)

MR. SPEAKES: Yeah -- do anything to get out of a news conference, won't we.

Q When can a pool go up to see him?

Q When was the last time the President ate?

MR. SPEAKES: Last time he ate? It's been quite a while. I don't know what day he started on the preparation for the proctoscopic, Sam. Let's see, that was on Friday so it could have been Wednesday night or Thursday. I don't know. It's probably a good day, a good 24 hours, if not 36 hours before.

Q What other rooms are there in the suite?

MR. SPEAKES: Mark, you've got my folder there with the room list, or you can just call them out from back -- Do you remember the rooms in the suite? There's a sitting room, there's a presidential bedroom, there are two bedrooms for aides, there's a conference room, and then outside the suite, there's a nurse's station and a couple of equipment rooms and a --

MR. WEINBERG: Two exam rooms and a kitchen.

MR. SPEAKES: Two exam rooms and a kitchen.

Q Which doctor spent the night in the suite?

MR. SPEAKES: Dr. Hutton, and I don't know whether Dr. Smith -- Dr. Hutton and Dr. Smith both stayed out and both -- did they both sleep in the suite or -- I know Dr. Hutton did.

Q Helen had a question here a minute ago.

MR. WEINBERG: Yes, they both slept in the suite.

Q Do you contemplate taking a pool up at some point next week to see him?

MR. SPEAKES: Oh, that's well ahead. We did debate about -- if we have had time, we would have strung lines and worked from that observation room, looking down on the surgery. But I called Jack and he said he couldn't get the lines in in time. (Laughter.)

Q We'll send a doctor in.

Q -- they make all that stuff. (Laughter.)

MR. SPEAKES: Yes, that's right. Yes, we should have brought those guys up.

Q Any possibility of still photos?

MR. SPEAKES: Would I look like De Vries if I wore a

white coat?

Q No, but --

Q Have you seen the scar? Have you seen the scar?

MR. SPEAKES: Pardon?

Q Any possiblity -- any still photos?

MR. SPEAKES: Not -- there hasn't really been any made, Chris, and I don't know whether we'll do any tomorrow.

Q Well, obviously, the signing of the letter would be something we'd all be very interested in.

MR. SPEAKES: We didn't make a photo of that, really didn't.

Q You said Mrs. Reagan will host the diplomatic reception, not Vice President Bush?

MR. SPEAKES: That's right, Mrs. Reagan plans to.

Q Larry?

MR. SPEAKES: Yes?

Q I just want to get this clear. In the letter here, you say, "I do not believe that the drafters of this admendment intended this appiication to the situation such as the instant one." But you are saying, in essence, tnat this is tantamount to invoking the 25th?

SENIOR ADMINISTRATION OFFICIAL: I think that would be the best way for you to phrase it, as I say on DEEP BACKGROUND again.

Everybody's had enough? Do you all want to try to work out something, in the calm cool, outside of the lights here about how we handle coming back? Have you all got to do talking on the front row when we come back?

Q Well, let me just tell you something --

Q Let's talk about it.

MR. SPEAKES: I probably could have read the letter on camera.

Q Yes, why didn't you read the letter and then say you didn't want to discuss it, you wouldn't comment on it --

Q Here comes the surprise that none of us are ready for -- we're on the air, live, all three of us. Our anchormen are saying, "What is this?" You know, delegations of powers. Have we got to tell --

Q Every viewer wants to know what's going on here.

Q -- whoever the hell is watching this. And I mean we apologize to our colleagues for the interruption, but, goddammit, we have a job to do, too.

MR. SPEAKES: Absolutely.

Q That's right.

MR. SPEAKES: Now, if anybody's got questions, then maybe you'd better stay here and ask them on the record because I'm going to see Regan and eat. So I'm not going to hold office hours.

Anybody got any questions on the record before the camera here? There's not much more I can add. I mean --

Q Are you going to announce over a speaker when it's over?

MR. SPEAKES: Yes. We'll have somebody come over and announce that.

Okay, now. I ain't stopping.

Q Larry, now are you going to let us know informally that the surgery is over?

MR. SPEAKES: We'll have somebody come to this microphone and say it's completed, and that will be about it.

Q Upstairs?

Q Upstairs in the filing room?

MR. SPEAKES: Yes, we'll make a wide circulation.

Q How much warning will we get before the formal, on camera briefing?

MR. SPEAKES: Oh, we'll give you ten or fifteen minutes, I hope.

Anybody else?

THE PRESS: Thank you.

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1:17 P.M. EDT