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THE WHITE HOUSE

Office of the Press Secretary (Bethesda, Maryland)

PRESS BRIEFING BY LARRY SPEAKES

July 15, 1985

Bethesda Naval Hospital Bethesda, Maryland

11:38 A.M. EDT

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July 15, 1985

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11:38 A.M. EDT

MR. SPEAKES: Since you have had a brief report from the President, I'll -- being it's Monday morning, I'll return to the routine.

The President today is announcing James W. Spain to be Ambassador of the United States to the Democratic Socialist Republic of Sri Lanka, John Gunther Dean to be Ambassador of the United States of America to India, Leo McKenna to be on the Advisory Board of the St. Lawrence Seaway Development Corporation, Robert Kimmitt to be a Member of the Board of Directors of the Federal Financing Bank, John William Bode and Raymond D. Lett to be Members of the Commodity Credit Corporation, and Lydia E. Glover to be United States Marshal for the District of South Carolina.

This morning, on the President, Dr. Dale Oller, the President's physician, is running out of superlatives to apply to his patient. Today, Dr. Oller said after examining the President at 10:30 a.m., "The President continues to progress superbly from his surgery."

This morning, the vital signs are within the normal range. In fact, Dr. Oller, again quoting, "His vital signs are the same as a person who has not had surgery."

The elevated temperature of yesterday; while still above the 98.6 mark, is well down from yesterday and is well within the normal range.

Q What is it?

MR. SPEAKES: Lab studies are normal. One of note, the white blood count, which is a primary indicator of any possible infection, is within the normal range.

The President's only complaint is a bit of abdominal pain or discomfort when he gets out of bed. And speaking of getting out of bed, the President walked from his bed last night to the door of the suite, which is probably a distance of 30 feet, and returned, which is another 30 feet, which totals to 60 feet. The President has had no pain medication. He continues on I.V. antibiotics; he still has his nasogastric tube.

Last night, the President stayed up past 12:00 midnight saying he wanted to finish Louis L'Amour's "Jubal Sackett," and he did finish it. He said he wanted to see if the butler did it. He asked for another book, which is "Calvin Coolidge: Return to These Hills," and he's reading it.

This morning, the President was awake at 7:45 a.m., went back to sleep for a couple of hours, and he was visited by his medical team, headed by Dr. Oller, Dr. Smith and Dr. Hutton at 10:30 a.m. He's napping now with the Coolidge book in his lap. He's been sitting in the elevated sitting position in the bed. Last night, he

was out of bed in the chair for about 20 minutes.

Don Regan has been out to the hospital this morning. He left briefing materials for the President. He will return and meet with the President in the early afternoon. Mrs. Reagan will be at the hospital shortly if she has not already arrived.

That concludes the President's report.

Q Did he get the biopsy report yet?

MR. SPEAKES: No.

Q Will he get it soon?

MR. SPEAKES: Yes, he will get it.

Q When?

Q When will it be available, do you know?

MR. SPEAKES: I would judge mid to late afternoon -- somewhere along in there.

 $\ \ Q$ -- your earlier estimate Saturday, the doctors thought that by about noon --

MR. SPEAKES: No, no. Midday.

Q -- midday. Why has it slipped to, perhaps, late afternoon?

MR. SPEAKES: It has not slipped. The report to you may have slipped. The report to the President has not necessarily slipped.

Q How will we get the report?

Q Why would -- may I just -- why would you delay, after the President has received the report, by some period of time giving us the report?

MR. SPEAKES: Sam, what will happen -- and I think you can respect the wishes of the First Family -- they will come in; the doctors will come in; they will sit down with Mrs. Reagan; they will sit down with the President; they will talk this over; they will talk it over with us on the staff; then I will come, perhaps with a couple of doctors and explain it. That takes time. If it takes an hour, two hours, three hours, we'll take that time and you'll just have to sit right here and wait.

Q Will you come with the doctors? Will you bring the doctors?

MR. SPEAKES: Probably, yes.

 \mathbf{Q}' And will the pathologist be here to talk to reporters?

MR. SPEAKLS: We'll have doctors.

Q Larry, just out of curiosity, why is it you don't give exact temperature figures if there's --

MR. SPEAKES: We just don't go into the exact figures on this. They vary from patient to patient and if they're in the normal range, they're in the normal range.

What is the normal range, Larry?

MR. SPEAKES: Normal range for a post-operative temperature -- probably ranging from slightly below normal to around 100 degrees -- maybe slightly above 100 degrees.

Q Is it above 100?

MR. SPEAKES: The normal range for white blood count is 5,000 to 10,000 and he's in that normal range.

Q So, when you say normal range, you're speaking of normal range for post-operative? You're not --

MR. SPEAKES: Normal for post-operative but, this -- his temperature at the moment could very well be the same, as the doctor says, for someone who has not had surgery.

Q Is it still a little higher than normal, though?

MR. SPEAKES: What is normal Helen? Is 98.6 normal? No, not necessarily.

Q Well, let's assume that that --

MR. SPEAKES: It's a little higher than 98.6.

Q -- is it higher than that?

MR. SPEAKES: I'm not going to get in a debate over temperature. That's an awfully minor thing for --

Q What is causing the elevated temperature? Is there a reason for it?

MR. SPEAKES: It's normal in post-operative surgery. Had you attended the lecture yesterday, you would have known that.

 $\rm Q$ $\,$ I did -- I watched you. But let me just ask you, that may be -- it may be normal for post-operative surgery, but why is an elevated temperature normal after surgery? That's my question.

MR. SPEAKES: Because surgery is a certain radical change to the way the body is doing business and it sometimes causes an elevated temperature.

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In fact, most times it does. Any medical reporters want to join in and vouch for that? Hey, hey, there we go.

Q Larry, I missed part of your briefing yesterday. I hope I am not asking something that was gone over yesterday.

MR. SPEAKES: I do, too.

- Q You can do that.
- Q Thank you. Sam says I can go over, even if it was.

The question has come up again about why a more extensive examination of the President's colon was not done fourteen months ago and then again five months ago, and some people are suggesting that it was not done because of politics -- because of the campaign --

MR. SPEAKES: Want to identify these "some people"?

Q Well -- in print.

MR. SPEAKES: The London Observer?

Q Right. The London Observer.

MR. SPEAKES: You missed the last -- you missed my response to that, which is --

Q Could you repeat your response?

MR. SPEAKES: Poppycock.

Q No political consideration? In other words, the -- no doctors came and told them they should do this?

MR. SPEAKES: No.

Q Is that correct?

MR. SPEAKES: No, did not.

Q You said -- about the hemoccults, the test for blood in the stool -- you had said that originally there were some positives, but under a diet that could have indicated some false positives, and then the President was retested. You said that an overwhelming number of the retests were negative. Were there in fact any positives in the retesting?

MR. SPEAKES: No. One hundred percent of them were negative.

Q I ask this question because it bears on how long the President may stay in the hospital. Is there any sign of any bowel activity yet?

MR. SPEAKES: No, George, not yet, but everything in the stomach range is normal, and quite expected.

Q When you say that he is not taking any pain medication are you including the little pack --

MR. SPEAKES: The little what?

Q The little drip pack?

MR. SPEAKES: That -- I perhaps misled in the first day and you missed yesterday. It is a one-time injection into the sac around the spinal column. That is it, and that is all that he has had.

 ${\tt Q}$ Is the pain he is feeling today an indication that that is wearing off?

MR. SPEAKES: I don't know whether it has or not, Mike. I think it is so minute that, you know, whether it has worn off or not is hard to say. It lasts one or two days -- something like that.

Is he taking aspirin or Tylenol for the discomfort?

MR. SPEAKES: No.

Q Nothing?

MR. SPEAKES: No.

 $\,$ Q $\,$ Two questions. One on the temperature. Am I correct that yesterday you said that the temperature was below 100 degrees?

MR. SPEAKES: Yes.

Q So it would be fair to say that the temperature is somewhere now between 98.6 and 100?

MR. SPEAKES: Yes, but it was below 100 yesterday. It is below below 100 today.

Q Okay, and the second question, on the biopsy, as I remember the doctors, when they came in on Saturday, said that the biopsy results should be ready between 11:00 a.m. and 12:00 today. I mean, they were that specific. Is that still the schedule?

MR. SPEAKES: No, I don't think so, but there is --

Q In fact, Larry, they did say -- I believe that it was Dr. Rosenberg who said it would be 11:00 a.m.

MR. SPEAKES: Dr. Rosenberg is not doing those studies, and they are being done, you know, at other places within the military complex here, and so it just -- you know, when they are ready, they are ready.

Q Larry, can you tell us the kind of correspondence that the President is getting, any correspondence he is initiating -- phone calls or letters to anyone?

MR. SPEAKES: I don't think the President has made any telephone calls. Correspondence he is getting is from a number of foreign governments. We have a list here, which I don't think is completed. They are from the President of Egypt, the King of Saudi Arabia, the President of Honduras, the -- I don't know his title -- the Republic of China, the -- from the Sudan, Turkey, Canada, France, the Federal Republic of Germany, the United Kingdom, Japan, Australia, but we are not at the point where we can provide a complete list.

Have you neard from Mr. Gorbachev yet?

MR. SPEAKES: I don't think so, but I don't have the complete list, so --

Q Has Nicaragua sent one?

MR. SPEAKES: I read that in the paper, but I do not have it here on my list.

Q They claim that they have sent one.

Q Would you describe what kind of governmental business the President has conducted this morning?

- MR. SPEAKES: Has what? Conducted this morning?
- Q Has the President conducted any government business this morning?
- MR. SPEAKES: I don't think so, Owen, but I think this afternoon --
 - Q Does he plan to?
- MR. SPEAKES: -- he will look over his intelligence reports and talk with Don Regan.
 - Q Can you tell us about his meeting with Regan?
 - Q Is Regan here now or is he --
- MR. SPEAKES: No, he's gone back. He was here this morning.
 - Q He's now operating out of the White House?
 - MR. SPEAKES: Yes.
- Q Can you tell us about his meeting with Regan today? Any more detail about what they --
 - MR. SPEAKES: I didn't say he met with Regan.
 - Q I thought Regan had come.
 - Q Will he?
 - MR. SPEAKES: I said Regan left some materials for nim.
 - Q So they did not meet?
 - MR. SPEAKES: No. They did not meet.
- Q Tip O'Neill said today that the "budget ball is now on Dole's table," to use the exact quote. Is that the President's view -- that it's now up to Senator Dole?
 - MR. SPEAKES: No. We expressed that also yesterday.
- Q I heard what you expressed yesterday, Larry. I was watching.
 - MR. SPEAKES: I see. Expressed it again today.
 - Q All right.
- MR. SPEAKES: It falls in the hands of the Democratic conferees who must meet the Senate with substantial budget cuts. The Senate has gone more than halfway. I think the -- it's up to the House conferees to meet them.
- Q Is the administration seeking to overturn the abortion law?
- MR. SPEAKES: The Justice Department, as I understand it, will file a brief in the Supreme Court today that combines two cases that are on appeal before the 3rd and 7th Circuits of the U.S. Court of Appeals. Both these cases involve restrictions that the State of Illinois and Pennsylvania legislatures have enacted to help govern the manner in which abortions are performed. I think I'll let you go to Justice Department to get more details on that.
 - Q The President approved that filing?

MR. SPEAKES: Yes.

Q Larry, you said that the President had abdominal pains when he got up. Is that the only time he suffers any pain?

MR. SPEAKES: That's right. And I think it would probably be better to call it discomfort and it's certainly normal for someone who has an incision.

Q Will Bush be standing in for Reagan during the week with phone calls to the Hill, the swearing-in of the CEA, the Federal Reserve --

MR. SPEAKES: I don't know whether all that will be done this week, but the First Lady will be attending the performance of the Boston Pops tonight at the White House and she will host a diplomatic reception. She will speak there. There is open coverage on the lawn of her remarks in some of those events.

There are two meetings with the Finance Committee, a breakfast and a lunch, scheduled this week. And chances are the Vice President will sit in those. It was scheduled to be a visit with Don Regan and Secretary Baker, and the Vice President will probably sit in the full length of those meetings. The President was scheduled to drop by. He probably won't drop by.

Q Might he make a phone call to any of the Congressmen or the --

MR. SPEAKES: Not any plans to, no.

Q -- Senators?

MR. SPEAKES: Helen, and I'll have to work the back. Let me --

Q How about the CEA and Fed --

MR. SPEAKES: I don't know whether those swearing-ins will take place this week or not.

Let me work the front row and then I'll --

Q In the many interviews that Regan has given the past two days, he said that the President would meet the President of China next week, that he would be able to welcome him or greet him. Is that what's in the --

MR. SPEAKES: The President will meet him. It could be on somewhat of a reduced schedule, because that could very well be the first day or two that the President's nome from the hospital. But the President does plan to meet him.

Norm.

Q You got a meeting scheduled here between the President and Bush yet?

MR. SPEAKES: Not yet, no.

Q Expect that today?

MR. SPEAKES: I don't know whether it will be today or not. Chances are it will be tomorrow. But as soon as can, the Vice President will be coming out.

George.

Q Could you describe the incision, now long It is, whether it's a straight-line incision, if there's an angle? Could you tell us something --

MR. SPEAKES: As I understand it, it's a straight-line vertical incision. But I don't have the measurement. It was certainly long enough in order to allow the physicians — the surgeons to work inside and particularly to examine those organs. So, they paid particular pains on that. But longer than that, I —

Larry, when did the President make the decision on

all these appointments that you announced this morning?

MR. SPEAKES: The appointments? I'm sure they were made probably some time ago.

Chris, then Bruce.

Q Yes, why didn't the President meet with Regan when he came today? Was he asleep at that time?

MR. SPEAKES: Yes. He took a nap this morning.

Bruce.

 \dot{Q} Did the senior staff discuss in any more detail today arrangements for pacing what work the President is going to do? And, if so --

Mk. SPEAKES: No. I think we'll probably have a session sometime later today in which we will look over the schedule for the coming three or four weeks and just work out the details of how quickly that the President can jump back in.

Let me go on to the back.

Q Is there anything you can tell us about what the thinking is on how -- what are the arrangements over the next few weeks?

MR. SPEAKES: I think the arrangements are the President will be back in the white House sometime in a week or so. And he'll be convalescing, as anybody would that's had this type of surgery. He'll be coming to the office as quickly as he feels like it. I think there'll be a reduced schedule for a couple of weeks, and then it'll gradually pick up, as time goes by.

Owen.

Q I think this has been asked before, but when the original schedule was decided to have the President come here for the removal of the polyp, were there any prior indications or evidence or suspicion that something else might be found?

MR. SPEAKES: None except those we've spoken of, and that includes the hemoccult test, the finding of the polyp -- all of the things that we've said public. It would the the only thing that could give you any speculation there might be something else, but there was absolutely no knowledge that there would be anything else in there we were looking to see.

Q So the decision to begin researching how the 25th Amendment works, and the decision to tape the President's Saturday Radio Broadcast was done as a precaution in the event --

NR. SPEAKES: Well, it was really -- the researching of the 25th Amendment was something that had taken place, really, since the administration began, and particularly so after 1981. It was not as if the Counsel's Office didn't have a fairly thick book of research on it, and a number of options that could be used to exercise it.

As far as taping the radio broadcast, it was taped really in case the President did not get away from the hospital on Saturday morning in time to get up to Camp David to meet the 12:06 air time.

Q When exactly was the tape made?

MR. SPEAKES: It was taped Thursday afternoon, I believe.

MR. WEINBERG: Thursday afternoon.

MR. SPEAKES: George?

 $\mathbb Q$. I want to clarify when he will be going back to the White House. You mentioned a week or so -- earlier --

MR. SPEAKES: Seven to ten days after the surgery.

Q But you expect him to be back in the White House early next week?

MR. SPEAKES: Yes. A week would be Saturday or Sunday, ten days would be Monday, Tuesday or somewhere -- Wednesday -- somewhere in there.

Q Nothing has changed on that?

MR. SPEAKES: No, nothing has changed. Seven to ten days -- we'll play it by ear.

Barbara?

Q I just want to make sure I understand. Are you saying that the biopsy report is not ready?

MR. SPEAKES: The pathology report is -- I assume is not ready. We've not had doctors show up and say, "Here is the report," so --

Q Larry, I wonder if I can check a quote with you.

MR. SPEAKES: All right.

You told us that when the President resumed power, he was offered an opportunity to send you away and bring you back later, and he said, "No, gimme a pen."

MR. SPEAKES: Right.

Q The Chief of Staff was quoted by some people today as saying --

MR. SPEAKES: Saying, "Give me that."

Q -- saying, "Hell no, then I wouldn't sign the letter -- gimme that." Can you tell us which quote is correct?

MR. SPEAKES: Well, the -- my part -- my quote is a partial quote, "Give me the pen." I would have to overrule the Chief of Staff that the President did say, "Give me the pen." The first part of the quote is also correct; it was said in a jesting manner.

Q Can you tell us why you didn't give us that at the time?

MR. SPEAKES: I guess my note-taking was a little faulty. But, no.

Okay, let me help the back out nere. Nelson.

Q The indication yesterday was that the President would meet with staff members, plural. Is he going to do that or is he not going to do that because of scheduling, because he slept, or because of his condition?

MR. SPEAKES: This morning, after staying up so late, he did take a nap this morning, or is in the process of taking a nap. I think he'll be up around noon, awakened around noon, and then -- with surgery taking the better portion of Saturday, you attempt to get the President on an appropriate day-and-night schedule. And that's what we're doing. He just stayed up late last night. Simple as that.

But he'll meet with Don Regan this afternoon and probably others of us.

So, Frank?

Q Larry, we sought to set up an interview with a doctor from the National Cancer Institute and were told that all such interviews would have to be cleared by the White House. Is that true, and why?

MR. SPEAKES: That's correct. That is true. The Reagans nave very strong feelings about doctor-patient relationship. And those doctors that are involved in the President's case will not be doing press interviews except in this briefing room.

Q These were not, to my understanding, doctors involved in the patient's case. These were other experts --

MR. SPEAKES: I would judge that the National Cancer Institute probably is looking at some of the ethical standards and don't feel that it's appropriate for doctors who are not involved in a patient's care to comment on a case when they don't know the particulars of it. I guess it's -- second-guessing is out of business over at NCI.

Q Well, why is the White House involved in directing that traffic?

MR. SPEAKES: I don't think we directed it specifically, but we certainly did talk to Dr. Rosenberg about his own personal relationship with the media. But --

Q We were specifically told that you, the White House, would be setting up those interviews and would make any arrangements.

MR. SPEAKES: If there are any set up, we'll set them up. But, meanwhile, I don't think anybody has been at a loss for a doctor to get on television and comment on the President's case.

Q Of course, this was not the procedure followed in '81. Dr. Aaron and other doctors made themselves available just as they'd choose for press interviews. What's the difference?

MR. SPEAKES: The difference is that we just don't think it's appropriate. The Reagans have very strong feelings about doctor-patient relationships, as I think you would if you were in the hospital. I don't think you would want ---

Q -- you told us that, but, apparently they developed these strong feelings after 1981.

MR. SPEAKES: Well, I realize the President is doing extremely well today and there's -- as the President continues to

improve, I'm sorry that that doesn't make headlines. But, nevertheless, I don't intend to stand here and brow-beat the tenth of degree of temperature or whether or not doctors are giving interviews. So, if you have another subject, I'll be glad to talk about it. Other than that, go fly a kite.

Q Just one thing. I mean, doesn't it have something to do with the fact that these doctors are either government employees or have a government connection, whereas the doctors in 1981 were private individuals?

MR. SPEAKES: Not necessarily. We have a private physician on the President's surgical team. He has not given interviews. Dr. Lee -- Dr. Smith -- Dr. Lee Smith has not given any interviews. So that's just the way we feel about it. And if anybody's got a problem with it, so be it.

Q Larry --

Q We're asking you questions. You needn't try to make it appear that we're the neavies in some play about whether we or anyone else is nappy or unnappy that the President is doing well. That was a cheap shot, wasn't it?

MR. SPEAKES: What seems to be -- the allegation that they were government employees had anything to do with it, that seems to be a little heavy.

Q We're simply asking why, in 1981 when doctors who attended the President were not talked to by members of the White House staff and asked not to give interviews, that doctors are now --

MR. SPEAKES: If we had thought about it at the time, we would have done so.

Yes, sir.

Q Does your timing on the release of the pathology report this afternoon, no matter what that report shows, have anything to do with the closing times of the financial market?

MR. SPEAKES: No, it does not.

Joanne?

Q Have you got any guidance on when the family members might be meeting with the President or talking with him or --

MR. SPEAKES: Family members?

Q Yes, sir.

MR. SPEAKES: Mrs. Reagan probably will shortly after noon today.

Q Children, relatives?

MR. SPEAKES: Children are in their homes. They've talked to Mrs. Reagan, including Maureen a couple of times in Nairopi, so -- I don't think they have any plan to come to the hospital.

Joanne?

Q Do you have any idea of the cost of this nospitalization and the surgery and everything?

MR. SPEAKES: No, I don't. The hospital room is -- what? -- \$425, \$435 a day?

MR. WEINBERG: \$452.

MR. SPEAKES: \$452 a day. But I do not have any idea for the surgical costs and so forth.

Q Does the President have Medicare and private hospital insurance?

MR. SPEAKES: The President has both, but I do not think he will be using his Medicare. And as far as his personal insurance, whatever bills come to the White House, they'll be reviewed. What is not paid for by insurance or other means, the President will pay himself.

Is the National Security briefing written or is Bud going to come and give it orally?

MR. SPEAKES: It's written.

Q So Bud is -- will ne be meeting with nim this afternoon?

MR. SPEAKES: I don't think so today, no.

Q You said no family members are going to be coming over here other than Mrs. Reagan? That was your anticipation?

MR. SPEAKES: That's about what I said.

Q Is that a medical reason why the family might not come or just personal reasons?

MR. SPEAKES: No, it's distance, Paul. It's a long haul from Nairobi when Maureen is over there on pusiness. The other kids are in California and wherever else so they'll see their father in due course. They'll talk to him on the phone in due course.

Bruce?

Q Larry, as long as the National Security briefings are routine, there's nothing out of the ordinary, is it unlikely that McFarlane will be coming over --

MR. SPEAKES: Well, chances are that Bud will be here a day later in the week.

George.

Q As Commander-in-Chief, is Reagan entitled to free medical care here? And if he is, why doesn't he take it?

MR. SPEAKES: That might be true, George. I do not know the answer to that.

Q Wny doesn't ne accept it if he is?

MR. SPEAKES: Pardon?

Why doesn't he take the free medical --

MR. SPEAKES: I'm sure he will if that's standard practice.

So, Bernie?

Q Has the Vice President been in touch with the President at all?

MR. SPEAKES: Not talked to him, no. No, the Vice President is in the White House this morning and I don't think he's

talked to him -- I know he's not talked to him on the phone.

Yes, ma'am.

Q Is the President required by law to check into a federal hospital or is it just tradition?

MR. SPEAKES: No, it's -- Eisenhower went to Walter Reed, this President went to Betnesda. Others have gone -- where did Jimmy Carter go, Sam?

Q Here at Bethesda.

MR. SPEAKES: Oh, did he?

Q Here.

MR. SPEAKES: Okay.

Q But they're all government --

MR. SPEAKES: I'11 --

 $\ensuremath{\mathtt{Q}}$ He was a Naval officer and, of course, Mr. Reagan was a horse cavalryman.

MR. SPEAKES: There's no horse cavalry hospital, so he -- (laughter) -- come here.

Q But he did --

Q Larry?

MR. SPEAKES: Yes?

Q Why will the President not use his Medicare -- just his feeling towards the program?

MR. SPEAKES: I don't think he'll need his Medicare.

- Q There's no motion picture hospital.
- Q No motion picture hospital. (Laughter.)
- Q -- his own personal insurance?

MR. SPEAKES: No, it's his own insurance -- goes back to his days as California Governor.

Q Larry, doesn't the President get free health care here?

MR. SPEAKES: He may, Bob. I do not know the answer to that. If he does, he does and he'll take it if he -- if it's standard practice.

- Q I mean, I don't think there's any room price or anything.
 - Q Hey, there he is. He's leaving the hospital.

MR. SPEAKES: No, there is a room price -- yes.

Q In this case?

MR. SPEAKES: Pardon?

Q -- this is a medical -- military facility. I can't

Mk. SPEAKES: I understand. But there's a standard price placed on that room.

Q In fact, don't the President and all federal officers, including Congressmen and Flag Officers all get this care for free?

MR. SPEAKES: I don't know.

- Q It's just --
- Q Does he still have the tube?
- MR. SPEAKES? Yes -- his nasogastric tube, as I said

earlier.

Bob?

- Q Are you in pain, Larry? (Laughter.)
- Q Do you have any quotes --

MR. SPEAKES: Mark Weinberg has stayed here -- who's paying for his room? I know he's not.

Q -- gotta get per diem. (Laughter.)

MR. SPEAKES: -- getting better than the cafeteria food, huh?

Bob?

Q Do you have any quotes from the President concerning his condition today?

MR. SPEAKES: His what?

- Q Quotes.
- Q Quotes -- Presidential quotes?
- MR. SPEAKES: No, I have not -- do not.
- Q Larry, any chance Don Regan can come out and talk to us sometime today?

MR. SPEAKES: No.

- Q The three people he didn't talk to yesterday.
- Q Yes, the three people he didn't give exclusive interviews to. (Laughter.)
- $\ensuremath{\mathbb{Q}}$ Was that your quip about the President staying up to see if the butler did it, or was that --

MR. SPEAKES: No. That's what he remarked last night.

Q He actually said that?

MR. SPEAKES: Dave?

Q Larry, was there any strategic reason that the President decided to go ahead with the budget compromise without getting concessions from the Democrats on domestic spending first?

MR. SPEAKES: No, Dave. I think the President's decision was that there was an impasse on Social Security COLAs, that -- and if that was not going to be done, then the heat needed to be put on the House conferees to make some movement in non-defense spending.

- Q Larry?
- Q Larry, what is your briefing schedule? When are you planning to move the operation back to the White House.

Mk. SPEAKES: Tomorrow.

Q Larry, how are these quotes being conveyed -- like the one about the butler?

MR. SPEAKES: Got to get it from the nurse.

Q So you talked to the nurse?

MR. SPEAKES: Talked to the nurse, all the doctors, all the corpsmen -- whoever's there. Talk to all of them.

- Q But not the President --
- Q But not the President directly?
- $\ensuremath{\mathtt{Q}}$ Are we going to have some pathologists here this afternoon when the report's issued?

MR. SPEAKES: We will have a physician here. I do not know who it'll be yet.

Q A physician --

MR. SPEAKES: Well, one or more.

Q More logistics, Larry. As you move the operation back to the White House tomorrow, what becomes of the filing center and so on?

MR. SPEAKES: I think we'll have to address that -- Have you arrived at any conclusion with the Admiral yet?

Q I think we ought to keep it.

MR. SPEAKES: The Admiral didn't like you throwing chicken bones on this floor in here in the auditorium, so -- (laughter) -- if you won't throw chicken bones today, maybe we can negotiate to at least have your phones operational.

I think we'd always be prepared to -- for any contingency here and we'd try to leave your electronic setup --

Q Considering how long it took to set into operation, if we could keep that as long as he's in the hospital, I think it would be --

MR. SPEAKES: But once -- once, and we'll tell you firmly this afternoon if we'll start operating from there tomorrow. And we'll just -- once we do that, then there'll be no statements made here, so you don't have to worry about it. But I know you will want to -- someone will want to stay.

Yes, ma'am.

Q Yes, I don't mean to belabor this thing about the Cancer Institute, but in my many years of covering Presidential health things, I can never remember anything like this. When Mrs. Ford had her breast cancer, for example, no one from the Cancer Institute commented specifically on her, but we were free to call on the experts --

MR. SPEAKES: Yes. I really don't know the genesis of this. We've had a couple of conversations with Dr. Rosenberg who's the head of it. I don't know whether he's interpreted that as given instructions all down the line not to comment, but we'll check on that and see.

Yes --

Q Do you know whether his abdominal discomfort has had any effect on his ability to take deep breaths or cough?

MR. SPEAKES: I don't believe so. The respiratory rate has been, as I say, normal. It's been very good. And I have not heard any complaints nor anything from the doctors about the deep breathing and so forth. I think that's been fine. And oftentimes — and his lungs are clear. So, oftentimes, when you're not able to take those deep breaths, then is when you begin to have problems with the — some areas of the lungs temporarily collapsing or something like that. But that — his respiratory rate is good and his lungs are clear, so there's no indication he's had any problems there.

Q How will we know when the briefing's -- how are you giving us warning when the --

MR. SPEAKES: I usually call over here and try to give you a warning. And then Leo and his crowd are right outside my office with their walkie-talkies.

Q Can you give us -- particularly the one this afternoon -- because I'm sure we're all going to go live with it -- as much warning as you can.

MR. SPEAKES: We'll try to. Sure. I understand.

Yes.

Q what time did the President go to bed last night? You said it was late.

MR. SPEAKES: He went to sleep shortly after -- sometime after midnight. I don't know the precise time, but --

Q Did ne just not sleep?

MR. SPEAKES: Pardon?

Did he just not sleep or he wasn't tired --

MR. SPEAKES: He was reading, trying to find out what nappened at the end of the book, "Jupal Sackett."

Q Don't tell me.

MR. SPEAKES: He wouldn't tell me. That's number six on the Best Seller List. See what happens next week.

Terry. All right, Terry --

Q Can you tell us have any Presidential decisions been deferred or delayed because of the hospitalization?

MR. SPEAKES: None that I'm aware of.

And will there be an effort made to spare the President any of the policy debates that he might normally be involved in?

MR. SPEAKES: Well, I don't think we'll bring the Cabinet in around the foot of the bed to argue over -- or anything like that. But, Terry, I think when there's not a consensus, like a couple of Cabinet Councils were scheduled to meet this week on their own, they will continue to do so. That's where the policy depate will take place. If Regan wants to present that to the President, he can. If he wants to present an option paper to the President and have somebody talk it through with him, then that's the way it'll work. But --

Q Would maybe Regan make some decisions for the President that the President might normally make?

MR. SPEAKES: On, I wouldn't think that the Chief of Staff would make any decisions that he doesn't know that the President wisnes him to make. But I'm sure that Don will be very thorough with the President. He has a good working relationship, and he knows what -- can do on his own. But I don't think any Constitutional decisions will be made by anybody, other than --

Q But then he would be making at least some decisions that might normally go to the President.

MR. SPEAKES: You'll have to wait until those decisions come up to see. I can't fine tune that.

Q And linked to that, will the Vice President be doing more than he normally does in the day-to-day operations?

END

MR. SPEAKES: Wait and see. It won't be news today. It'll be news when he does it.

THE PRESS: Thank you.

11:50 A.M. EDT

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