

REMARKS

Remarks by President Trump, Vice President Pence, and Members of the Coronavirus Task Force in Press Briefing

HEALTHCARE

Issued on: April 6, 2020



James S. Brady Press Briefing Room

April 5, 2020

6:59 P.M. EDT

THE PRESIDENT: Okay, thank you very much, everybody. All these people have been working very, very hard today, I'll tell you. For a long time, they've been working.

But before I begin, I want to express our nation's well wishes to Prime Minister Boris Johnson as he wages his own personal fight with the virus. All Americans are praying for him. He's a friend of mine. He's a great gentleman and a great leader. And he's — as you know, he was brought to the hospital today, but I'm hopeful and sure that he's going to be fine. He's a strong man, a strong person.

Today, every patriotic American heart beats in solidarity with the incredible people of New York and New Jersey. They've really become a very hot zone, but some very good things are happening. In New York, the first time where the deaths were less from the previous day. That's the first drop so far. So maybe that's a good sign; it could be. And the hospital levels are starting to perhaps decrease. It's been very short, but perhaps decrease.

So we wish Governor Cuomo and all of the people in New York great. And, New Jersey, your governor is doing a great job. He's doing a great job in New Jersey. They got hit very hard.

I just want to say that the full power of the American government and American enterprise — it really is. This is an all-out military operation that we've waged, and especially over the last number of weeks. Fifty states and territories have now been approved for major disaster declarations, which is very unusual.

Thanks to the Army Corps of Engineers, New York City's Javits Center is now one of the largest hospitals in the United States. It's designated for treatment of the virus patients and staffed by hundreds of federal medical personnel deployed from two Army hospital units, and they're doing a great job. This was something that we didn't expect to do, but they needed help in New York and we sent federal troops — not only troops, we also sent a lot of very talented doctors, nurses, first responders. People are now running Javits.

Also, as you know, the USNS Comfort, which is in New York — there's been a lot of publicity about that coming in and all. That was not supposed to be for the virus at all, under any circumstances. But it looks like, more and more, we're going to be using it for that. So we'll see. That was supposed to be for people having other medical problems, but it's very interesting because there are virtually no cars on the road, no motorcycles on the road, no — no anything on the road. Things that would normally be taken care of, we don't see anymore. So we haven't seen that in a long time. It's, perhaps, a positive.

But the ship is ready. And if it has to, if we need it — if we need it for the virus, we will be using it for that. They'd prefer not, for obvious reasons, but if for any reason they need it, it's ready, willing, and able.

We have the best doctors, the best military leaders, and the best logistics professionals anywhere in the world. And we're orchestrating a massive federal response unlike anything our country has

ever seen or done. We've never done anything like this. And, more and more, we're using our medical people because of the fact that jurisdictions, states — in particular New York, New Jersey, the Connecticut area. Long Island now has become a hotspot — part of New York. We're sending a lot of things, a lot of supplies, and now we're sending personnel where it's needed. Military personnel.

As of Tuesday, we'll have deployed over 3,000 military and public health professionals to New York, New Jersey, Connecticut, and other parts of our country — 3,000 — and that number is going up. And we hope we're seeing a leveling off in the hottest spots of them all. So we'll see. You'll be seeing that over the next few days. Let's see what happens. But we're prepared.

In the last seven days, FEMA has airlifted critical supplies and protective equipment from every corner of Earth. They're coming from all over the planet, including from within the United States, where the equipment isn't as necessary.

Since last Sunday, cargo planes have delivered almost — listen to this — 300 million gloves, almost 8 million masks, and 3 million gowns. And many more fully loaded cargo planes are right now on the way. Three big ones landed today. And these supplies are being distributed directly to the hospitals and healthcare providers all across the nation so that that massive amount of material that we're getting in is being delivered all over the country.

Tomorrow, we'll deliver an additional 600,000 N95 masks to New York City to take care of the needs of the public hospital system. It was requested — Mayor de Blasio. We've been working great with Mayor de Blasio, getting him a lot of stuff. He's working very hard; I can tell you that. And we're working, really, very hard with New York City and with New York State.

And at the request of Congressman Lee Zeldin, out in Long Island, we will also be delivering another 200,000 N95 masks to Suffolk County, where they need it very badly. So we're getting that out on an emergency basis. It should be there tomorrow.

We'll also be deploying millions of N95 masks to other locations that Admiral Polowczyk will detail shortly. The Admiral will be up in just a couple of minutes.

Over the last 24 hours, FEMA has delivered an additional 500 ventilators to New Jersey. Five hundred. And again, the governor has been very thankful. We're working very hard with New

Jersey, including building hospitals.

We've also sent an additional 200 ventilators to Louisiana — a definite hotspot. Three hundred to Michigan — working very well, I think, with the governor.

Amazingly, 600 will be going or have gone to Illinois. And, I mean, there's a governor — I hear him complaining all the time — Pritzker. I hear him; he's always complaining. And yet, I just said, "Give me a list of a couple of the things we've done in Illinois." And we're building a 2,500-bed hospital in McCormick Place; that's the big convention center in Chicago. And we're helping to staff it and probably will end up staffing it because he's not able to do what you're supposed to be able to do as a governor. He has not performed well.

And we're also sending 100 ventilators to Massachusetts.

So we have 600 to Illinois. We have 100 to Massachusetts. We have 300 to Michigan. We have 200 to Louisiana. We have 500 ventilators — 500 — going to New Jersey. And this is being done by FEMA. It's being delivered by FEMA. And it's — that's some job. Just think of that. When you think about 500 ventilators, a ventilator is a big deal.

We're also establishing a federal medical station in the Washington, D.C., area to help Washington, D.C., and working very closely with the mayor and everybody in Washington, D.C.

At the same time, Governor Inslee — we appreciate this — of Washington State has returned 400 ventilators, which can now be deployed elsewhere in our country. So the State of Washington has done very well. They won't be needing some of the ventilators that have been sent — about 400. That's a lot. And we appreciate that he's able to give them back. He feels confident that they are in good shape for the coming weeks, until we can declare a final victory.

In the days ahead, America will endure the peak of this terrible pandemic. Our warriors in this life-and-death battle are the incredible doctors and nurses and healthcare workers on the frontline of the fight. We pledge to them our eternal gratitude and everlasting support. They make all of us very proud. Our country is very proud. We have people — they love our country. The world loves our country, most of it. Probably all of it; they just don't say it.

I can report today that the United States has now tested and given results — gotten results of 1.67 million people. That's far more than any other country has been able to do. And you remember, we inherited a broken system. So a lot of this has been developed.

By Tuesday, 1,200 brand-new rapid point-of-care testing kits has been produced by Abbott Laboratories. A great company. And they'll be distributed to all of our public health labs — that's a 15-minute test; even less — as well as the Indian Health Service, the CDC, and the Strategic National Stockpile.

So we're going to have 1,200. And on a weekly basis, we're making a lot more. They go very fast. They're very accurate tests. And other countries are wanting them. So, at the right time, we'll be able to do that. But right now, we're getting them to all of ours.

So we've done 1,670,000 tests. Think of that: 1,670,000 tests. And we have a great system now. We're working with the states in almost all instances, but we have a great system.

And the other thing that we bought a tremendous amount of is the hydroxychloroquine — hydroxychloroquine — which I think — as you know, it's a great malaria drug. It's worked unbelievably. It's this powerful drug on malaria. And there are signs that it works on this. Some very strong signs. And, in the meantime, it's been around a long time. It also works very powerfully on lupus. Lupus.

So there are some very strong, powerful signs, and we'll have to see. Because again, it's being tested now. This is a new thing that just happened to us — the “invisible enemy,” we call it.

And, if you can, if you have a — no signs of heart problems, the azithromycin [sic] — azithromycin — which will kill certain things that you don't want living within your body — it's powerful drug — if you don't have a problem, a heart problem, we would say: Let your doctor think about it. But as a combination, I think they're going to be — I think they're two things that should be looked at very strongly.

Now, we have purchased and we have stockpiled 29 million pills of the hydroxychloroquine — 29 million. A lot of drugstores have them by prescription, and also — and they're not expensive. Also, we're sending them to various labs, our military. We're sending them to the hospitals. We're sending them all over.

I just think it's something — you know the expression, I've used it for certain reasons: "What do you have to lose?" What do you have to lose? And a lot of people are saying that when — and are taking it — if you're a doctor, a nurse, a first responder, a medical person going into hospitals, they say taking it before the fact is good. But what do you have to lose? They say, "Take it."

I'm not looking at it one way or the other, but we want to get out of this. If it does work, it would be a shame if we didn't do it early. But we have some very good signs. So that's hydroxychloroquine and azithromycin.

And, again, you have to go through your medical people, get the approval. But I've seen things that I sort of like. So what do I know? I'm not a doctor. I'm not a doctor. But I have common sense. The FDA feels good about it. They've — as you know, they've approved it. They gave it a rapid approval. And the reason: because it's been out there for a long time and they know the side effects and they also know the potential. So, based on that, we have sent it throughout the country and we have it stockpiled — about 29 million doses. Twenty-nine million doses. We have a lot of it. We hope it works.

Driven by the goal of the brightest minds in science — we have the brightest minds in science, but we're driven by the goal of getting rid of this plague, getting rid of this scourge, getting rid of this virus. These brilliant minds are working on the most effective antiviral therapies and vaccines. We are working very, very hard. I have met many of the doctors that are doing it. These are doctors that are working so hard on vanquishing the virus.

They're staying — we strongly recommend staying at home, practicing vigorous hygiene, and maintaining social distance, so you're — you're just not going to catch it. It's the most effective weapon in this war.

And I will tell you, the — we are committing to the — to you. We're committing to the people of our country like few administrations, few people, few professionals have ever committed before. They are — they are working so hard. I see them. I see them before my eyes, exhausted — people that I'm dealing with every day, exhausted. They haven't left their offices. They haven't left their hospitals. We meet with them. We see them.

And tremendous strides have been made. I think the vaccines — we'll have a report on that. But the vaccines — we're working together with other countries. We're also working with other

countries — many other countries. And we all want everyone else to be first. We're very happy. But we are very far down the line on vaccines. We'll see how that all works. Johnson & Johnson is doing a great job, working very hard. A vaccine would be great. Therapy — a therapy and therapeutics would be great. We'll see what happens. In the meantime, you may listen to what I said about the two drugs mentioned.

My administration is rapidly implementing the largest emergency economic relief package in American history. You've seen what's been happening. Billions of dollars in small-business loans have already been processed through Paycheck Protection Programs.

So we went out on Friday and, literally, it's become so popular. It's been worked with the banks. They get it to the small business. It's all about employment. It's all about jobs. We want you to keep your jobs. It gives small business funding to keep the workers on the payroll. And we're sending direct cash payments to millions of Americans and rushing aid to the hardest-hit industries. We're saving industries. We will be — you'll be seeing it. And if we do more, we're going to do more, and we're going to try and get directly to people that are hit so hard.

But we're going to take care of our workers. We're going to take care of our citizens. We're going to take care of our small businesses. We're going to take care of our large businesses: the airplane industry, the — the airline industry. A lot of great industries that we have that are in trouble because of what took place over the last short period of time.

These are industries that were doing better — for the most part, doing better than ever. The airlines were doing great. Oil was doing great — oil and gas. And the energy industry was doing phenomenally well, and it got hit like nobody has ever been hit before. Just about like no industry has ever been hit before. There's never been anything like this.

But we see light at the end of the tunnel. Things are happening. Things are happening. We're starting to see light at the end of the tunnel. And hopefully, in the not-too-distant future, we'll be very proud of the job we all did. We can never be happy when so many people are dying, but we're going to be very proud of the job we did to keep the death down to an absolute minimum — the least it could have happened with this terrible, terrible virus.

In closing, I also want to note today is Palm Sunday and the beginning of Holy Week for Christians in America and all around the world. While we may be apart from one another, as you can see from

our great churches, our great pastors and ministers are out there working very hard. But we may be apart — we can use this time to turn to reflection and prayer and our own personal relationship with God.

I would ask that all Americans pray for the heroic doctors and nurses, for the truck drivers and grocery store workers, and for everyone fighting this battle. I had mentioned yesterday, where I see the nurses rushing into hospitals, and they're putting on their outfits, and they're putting on their masks and goggles, in some cases. They're rushing into war. They're rushing into war.

And I see people from apartment houses screaming and shouting and singing their praises. It's an incredible thing. They're warriors — these doctors and nurses. They're running into buildings, and they're literally putting it on as the doors are opening. They're putting all their stuff and running inside. And they're running inside to tremendous danger. Tremendous danger.

But, most of all, I'd like to ask for your prayers for the families who have lost loved ones. Ask God to comfort them in their hour of grief. It's a great hour of grief for our nation, for the world.

This morning — I was talking 151. For four days, I said 151. A hundred and fifty-one countries. This morning, it's 182 countries. It jumped up a lot. So, as of this morning, it's 182 countries are under attack from this monster.

With the faith of our families and the spirit of our people, and the grace of our God, we will endure, we will overcome, we will prevail. We have learned so much. We will be stronger than ever.

And I just want to thank everybody. I want to thank the incredible professionals on the task force also. We had a big meeting today. We — were calls all day long to so many different people. And I think our package to get everyone working when we're ready is really turning out to be successful. We may have to make it larger because it's been really successful. But all of that comes back to this country. We want to get them back. We want to get our people back to work. Everybody wants to be back. We want to open up our country as soon as possible.

So, with that, I'm going to ask Dr. Birx to say a few words, and she's got some charts to show you. And thank you very much. Thank you.

DR. BIRX: Thank you, Mr. President. As you can see from the hopeful signs in Italy and Spain, where we see, finally, new cases and deaths declining, it's giving us hope of what our future could be.

We wanted to give you an update on where all of the states were. We're looking at this as states normalized per 100,000 citizens. It looks very similar to last week. We wanted to update you. We've been covering throughout the week the states that were moving on this map.

You can see very clearly where New York is as a state, although this is very much still centered in the New York metro area. New Jersey is the orange line. The green line is Louisiana. That's followed by Massachusetts, and then Connecticut and Michigan are together in those lines towards the bottom. And then, of course, Washington, D.C., is now visible on this map, which was not visible before. And the yellow line towards the bottom is Washington State.

Next slide, please.

So this just summarize all of the states we're tracking very closely at the county level. So we're tracing and tracking not only the epidemic at the state level, but understanding what's happening in county by county with new cases and, of course, also the deaths.

We're also triangulating that with all of the laboratory data. And just to tell you how we're kind of doing that: For New York, which you can see at the top, their serology is now about 36 percent positive. They were in the 40s. So, day over day, their percent positive is finally starting to decline. New Jersey's is increasing, however. They're now up to 42 percent of the specimens that come to the laboratory are positive. Louisiana, 25 percent. Massachusetts, 20 percent. Connecticut and Michigan, 20 percent. District of Columbia, 15 percent. Washington, 8 percent. And then, Illinois and Colorado are at about 16 percent. Pennsylvania, which is also new to the graphic, is it about 12 percent.

Next slide, please.

So, if we could go back one — I'm sorry. If you go back one slide. One more. All of the states here, those are 38 of the states. Thirty-eight of our states have less than 50 cases per hundred thousand. They are testing. Their laboratory results are consistent with that. Their seropositivity rate for their laboratories are less than 5 percent.

So this is how we're tracking and triangulating both case reporting, mortality or fatalities, and also triangulating that with the laboratory.

The New York metro area, New Jersey, Louisiana, and a series — and Washington State — have all tested at a rate greater than Italy and Spain. I know many of you are tracking that. Remember, many of us, we pushed out a lot of those assays at the beginning, over the last two to three weeks. And I want to just thank Admiral Giroir and HHS, who's been working very closely to make sure that the states that were having an outbreak had access to all of their assays.

Next slide, please. And then next one.

So just to give you an idea of how we're looking at this, we look at cases every day. I want to just thank my data team. They spend all evening compiling data. I get it about 2 o'clock in the morning. And it looks at all of these metro areas by their granular counties. So we can see the counties that have new cases. That also helps us identify the hospitals and understand what hospitals will need ventilators or PPE.

So, this is the Detroit area; it's Oakland and Detroit. Wayne County.

Next slide.

We also then — also track mortality. It gives us insight into how many clients are in the ICU and need care. And we want to make sure that we're meeting the needs both on cases and really appreciating the frontline healthcare workers that are really saving many people's lives.

Next slide.

This just gives you an idea from New Orleans. We are now also tracking St. John the Baptist Parish also. But this was the New Orleans and Jefferson County, and really tracking those on a case-by-case basis to look for changes over time. And next slide is their mortality. And you can see it's starting to stabilize.

So this is how we've been tracking and tracing the epidemic as it moves through states and counties and communities. But as we started, we just wanted to note again: We do see hopeful signs in Spain and Italy. They have completed nearly four weeks of mitigation with people really

doing social distancing, staying at home, ensuring they were washing their hands. If they have to go out to the grocery store, they're extraordinarily careful; they send one person from the family.

And so we can really see that beginning to work, and we're very hopeful that, over the next week — although we'll see rising number of cases of people who lose their lives to this illness — we're also hopeful to see a stabilization of cases across these large metro areas where the outbreak began several weeks ago.

So thank you for your attention.

THE PRESIDENT: Thank you very much. Admiral? Please.

REAR ADMIRAL POLOWCZYK: Thank you, sir. What I thought I would do is update on the average first, and then follow up on Dr. Birx and how we're geographically aligning the supply chain.

So the average: We had three additional flights come in today, bringing a million gowns, 2.8 million N95 masks, 2.8 million surgical masks, 11.8 million gloves, 18.6 thousand gowns on three flights. And that material will be pushed out across the nation, delivered to hospitals, nursing homes across the country.

Dr. Birx went through the geography. And so, over the last few days, I've been aligning the supply chain to those areas, and then reaching down into those areas and extracting data from those areas on PPE burn rates.

So, for example, I spent the weekend talking to the chief operating officer of Detroit, Hakim Berry, for example, and talked to the leadership at Detroit Medical Center, Audrey Gregory; talked to the health officer at Oakland County, Michigan; and then also with the Chicago health officer, Dr. Allison Arwady. So, reaching down to the — to a level to understand their needs.

So we're geographically aligning the supply chain. Right? So you can see Dr. Birx went through these counties, and we're getting down to the county level. And then aligning it by priorities of point of care: public hospitals, first, VA hospitals, private hospitals, nursing homes, first responders, acute care.

Over the coming days, we will be making a push to the geographic areas that Dr. Birx mentioned — increasing the volume through the supply chain to those areas to give them weeks, not just days' worth of supply — primarily using our industry partners that we are directing: Cardinal, McKesson, Medline, Owen & Minor, Henry Schein, Concordance Healthcare — directing them to put product to the hospital door, the nursing home door, the first responders, directly to them.

We're also working to push out millions of doses of hydrochlor- —

THE PRESIDENT: Hydroxy.

REAR ADMIRAL POLOWCZYK: Hydroxychlorine [sic]. Right.

We are working the distribution there to push the same thing to the same impacted areas, working to get it into hospitals and to every pharmacy.

And so my team is back there right now working the arrangements to make — make that to the hospital front door and primarily to the local pharmacies so a doctor can write those prescriptions and you can get it prior to having to go to a hospital.

THE PRESIDENT: Great job. Thank you very much, Admiral. Mike, please.

THE VICE PRESIDENT: Robert Wilkie, Mr. President.

THE PRESIDENT: Oh, good.

THE VICE PRESIDENT: I know you didn't see him.

THE PRESIDENT: Good.

SECRETARY WILKIE: Thank you, Mr. President and Mr. Vice President. My last appearance here, I mentioned that the President had given the Department of Veterans Affairs very specific instructions to be as aggressive as possible in response to the virus crisis, not only to protect veterans but also to help the American people.

As many of you know, we have three primary missions at VA: One is to support veterans health. The other is to provide veterans with benefits. And the third is memorial services. But we have a fourth mission, and that is to support the nation in times of national emergency, both in war and in peace.

We provide a bridge from the federal government to the states and localities during these emergencies. As a result of that, I have ordered our veterans hospitals to begin preparing more than 1,500 beds to make them available both at the ICU and the acute-care level to the states and localities across the country. As a result of that, we have opened up approximately 100 beds in the metropolitan New York area, in Brooklyn, and in Manhattan, and East Orange, New Jersey.

We will be informing the governor of Louisiana, John Bel Edwards, tomorrow, that we will give him access to our VA Medical Center in Shreveport, Louisiana, to come to the aid of the people of the Pelican State.

I've also given instructions to initiate the fourth mission in Michigan. We will be providing the people of Michigan access to hospital beds in both Ann Arbor and in Detroit. We've also provided a pharmaceutical trailer to be used by the governor of Michigan, at Cobo Hall, to support the citizens of Michigan who will be coming into that facility for medical care.

We have also informed the state — the Commonwealth of Massachusetts that we will be helping them in their efforts to protect their most vulnerable citizens in two of their nursing homes.

So, in accord with the President's instructions, the 400,000 men and women of the Department of Veterans Affairs are in this fight. We are in the fight not only for the nine and a half million veterans who are part of our service, but we are in the fight for the people of the United States.

THE PRESIDENT: Thank you, Robert.

SECRETARY WILKIE: Thank you, sir.

THE PRESIDENT: Thank you.

Mike?

THE VICE PRESIDENT: Thank you, Mr. President. And you all have just heard from several members of the President's White House Coronavirus Task Force, and we are — we are truly blessed to have the kind of leadership that we have.

And whether it be Admiral Polowczyk, who is organizing the distribution of tens of millions of supplies; whether it be Dr. Birx and Dr. Fauci, who are analyzing the data literally hour by hour; or whether it be that whole-of-government approach that you stood up, Mr. President, calling on every agency of government, including the VA, HHS, and every agency — I hope the American people know, at this President's direction, we are — we are sparing no expense. We are doing whatever it takes. We're marshaling the full resources of the federal government to respond to the challenges facing communities impacted today by the coronavirus and making sure every community in America has the support.

We've also — as the President has said so many times, we forged a seamless partnership with states around the country. As the President just reflected, by this Tuesday, with another 840 military medical personnel arriving in New York City, there will be some 3,000 Department of Defense and HHS personnel on the ground to supplement and to provide relief to healthcare workers, really, at the epicenter of the coronavirus in the New York City area. And you just heard the VA is opening up — opening up bed space.

In New Jersey, I spoke, at the President's urging today, with Governor Murphy. Five hundred ventilators, announced today, being built on the supplies that we have already provided. We were able to coordinate with him to extent all federal coordination on testing in New Jersey through May the 30th, if the need is there, and also opening up VA beds.

I spoke with Governor John Bel Edwards in Louisiana and was encouraged to hear from him that, as you heard Dr. Birx say, that new cases were down slightly. In fact, we're seeing a trend of some leveling among all the governors I spoke to today. And I know what the Secretary of the VA just announced — about opening up VA facilities — has been a priority for Governor Edwards, but I assured him we're going to continue to send resources and supplies and personnel to support their healthcare.

In Michigan today, I spoke to both the governor, Gretchen Whitmer; and Mayor Mike Duggan of the city of Detroit. Governor Whitmer and I spoke about a new program in Detroit that will make

hydrochloroquine available for 3,000 patients through the Henry Ford Hospital. They'll be tracking, in a formal study, the results of that.

But at the President's urging, I assured her that we're more than prepared to make hydrochloroquine broadly available to pharmacies and doctors' offices across the Detroit area as they deem appropriate.

I also heard from Mayor Mike Duggan, as I told you, Mr. President. And he was so grateful to the FDA, not only for approving the Henry Ford Hospital tests that will be exploring hydrochloroquine, but also for the rapid approval of the 15-minute test. In fact, Mayor Duggan told me that he was able to use the 15-minute test this weekend to test 150 first responders who had been sidelined because they'd been exposed to the coronavirus. They all got the 15-minute tests. They're all back in the line of duty. And the mayor couldn't have been more grateful.

In Illinois, I spoke with Governor J.B. Pritzker, as well as Mayor Lori Lightfoot of Chicago. As you just heard, not only have we sent 600 ventilators to the State of Illinois, but I assured — I assured the governor, I assured the mayor that while the principal focus that we have in the next several days is on the rising cases in the Greater New York City area and Louisiana, that Michigan and Illinois are in the forefront of our thinking. And at the President's direction, we're going to make sure the people of Illinois and the people of Michigan have the resources, equipment, and support that they need.

The governor did express great appreciation for the fact that our Army Corps of Engineers had constructed 500 beds at McCormick Place, and before the end of this week would construct another 2,500 beds for an overflow healthcare facility in Chicago.

In fact, Mr. President, Mayor Lightfoot told me that the Army Corps was just outstanding in the job that they have been doing in constructing that extra bed space.

As I close, let me just — let me just express, as the President did, our profound appreciation for Governor Kate Brown and Governor Jay Inslee. The State of Oregon and the State of Washington are leading by example. Oregon sent 140 ventilators to New York City. They looked at their circumstances and concluded that they could spare those at the point of the need. And because of the low and steady numbers in Washington State and in California, Governor Inslee today announced that they were sending 400 ventilators back to the Strategic National Stockpile. And those will be deployed at the point of the need.

You know, not only are California and Washington State low and steady but, frankly, as I talked to governors and mayors today, I want to say to the American people that we — we are beginning to see the glimmers of progress. The experts will tell me not to jump to any conclusions, and I'm not. But like your President, I'm an optimistic person and I'm hopeful.

And the truth is, we're starting to see cases and, most importantly, losses and hospitalizations begin to stabilize. But make no mistake about it: I want to say to the American people, if that holds, if that's happening, it's because of what all of you are doing. It's because the American people are putting into practice the coronavirus guidelines for America. You're listening to your state and local officials. You're practicing social distancing. You're using drive-throughs instead of going into restaurants.

And so on behalf of your President and all of us who are working, really, at every level, I just want to say: Thank you, America. Thank you for responding. Thank you for putting other people's lives in the forefront of your thinking, and putting it, again, over and above your own inconvenience and difficulty.

Because of your efforts, there is, as the President just said, light at the end of the tunnel. And I'm absolutely convinced: With the continued cooperation, patience, persistence, and prayers of the American people, we'll get through this, and we'll get through this a lot sooner than we first thought it would take.

Thank you.

THE PRESIDENT: Thank you, Mike, very much. Thank you.

Q Mr. President —

THE PRESIDENT: Go ahead. Yeah.

Q Mr. President, if I could start with the Admiral, if that's all right with you, sir. I wanted to ask you about the air gap flights, sir. There were the two flights that came through — or the three flights. Where did they come from, sir?

REAR ADMIRAL POLOWCZYK: They came from Asia.

Q Asia. Okay. And then, you were mentioning all these supplies being dropped off — the masks, the gowns, the hydrochloroquine. How are you guys making sure that there's not a run on these products? You know, you drop them off at hospital A and that people just don't rush and go grab every mask, gown?

And then a question for you, sir, after that.

REAR ADMIRAL POLOWCZYK: So, it's going to the loading dock, and there's an invoice. And so those people that are responsible for that loading dock and that invoice, they're going to make sure that there's not going to be a run on the bank.

Q You're not worried about a run on any of these supplies?

REAR ADMIRAL POLOWCZYK: No.

Q Okay. Thank you, sir. I appreciate it.

Mr. President, first, did you have a chance —

THE PRESIDENT: They do get orders for a lot more than sometimes we think an area needs. Generally speaking, we like to either negotiate that down or give it to them as they want.

So we've had a lot of orders that we think are high, but we generally like, if we have it — if we have, for instance, with the medicines and with other things, we like to give it to them.

Every day, we're building up and building it up very rapidly, and deploying it. But we do get orders from some of the states where we don't think they need it. We try and get it for them what they want anyway.

Okay? Go ahead.

Q And you mentioned the Prime Minister off the top.

THE PRESIDENT: Yes.

Q Any chance to speak to him today, sir?

THE PRESIDENT: I didn't speak to him, no. I did get a call from the ambassador. And, hey, it's a big — it's a big move, going to the hospital. That's a big thing.

He's a great gentleman, so I — you know, I just hope he's okay.

Q And then also, you mentioned the nurses, the doctors, the people that you see celebrating.

THE PRESIDENT: Yes.

Q Sorry, the people that are gearing up and getting ready — the people that are applauding and celebrating them.

Has there been any talk on any level whatsoever of some sort of either compensation fund or protection for nurses, doctors? Because there's been a lot of fear. There's been some people that said, "I can't risk my family's livelihood. I can't go back to the ER." Has there been any discussion —

THE PRESIDENT: Well, we're talking about it, and we're talking about doing something for them. But we're really looking at the conclusion. We want to just — we don't want to focus on that now. They're incredible. There's — they're not saying, "We're not doing it." They go in with good equipment, with great equipment, and with stuff that's not so good. And sometimes they catch it wearing the best stuff you can buy — brand new, the best stuff.

This is a very tough enemy. But these are amazing people. No, we are talking about something, but we're really thinking about, let's get it finished first before we do that.

Please.

Q Mr. President, the Surgeon General, this morning, was talking about the coming week being among the hardest and saddest weeks of our lives.

THE PRESIDENT: A tough — tough week.

Q He was talking about this being our Pearl Harbor, our 9/11 moment. You all are talking about glimmers of hope and stabilization. How are the American people supposed to bridge those different descriptions that they're getting from this administration?

THE PRESIDENT: I don't think they're so different. I think we all know that we have to reach a certain point, and that point is going to be a horrific point in terms of death. But it's also a point at which things are going to start changing.

We're getting very close to that level right now. And the next week and a half, two weeks are going to be — I think they're going to be very difficult.

At the same time, we understand what they represent and what that time represents, and hopefully we can get this over with because this is a very horrible thing for the world. Hey, look, we're one country out of 182 now that have — 182 countries.

I have a friend of mine — said he didn't know we had so many countries in the world. A hundred and eighty-two countries are now affected by this. So we want to get it over with. Okay?

Please.

Q And with those numbers, sir — could I just ask one follow-up —

THE PRESIDENT: Yes.

Q — on those numbers that you were talking about earlier? How does that change the projections that you were making earlier this week of 100,000 to 240,000 deaths?

THE PRESIDENT: Well, we hope we can stay under those numbers. Those are numbers of death. And we hope we can stay under those numbers. That would be terrific. And as far under those numbers as possible.

Now, if we did nothing, you know that number too. But the American people really stepped up; so did the professionals. They just really stepped up. So we're hoping to stay under those numbers.

And that means the minimum and the maximum, but we're hoping to stay under the minimum number. You know what that number was.

Q Right. But do the numbers that you were talking about today, have they changed those projections?

THE PRESIDENT: I would say the answer is "yes," but I would also say that we're not going to know really in terms of a final toll until we get out to the end. And we're probably, possibly, not so far away. We're getting closer. But it's our goal to stay as far under that minimum number — the minimum number as possible. Okay? That's what we want to do.

Go ahead.

Q Mr. President, as President of the United States, your words carry enormous weight in this country and around the world. And while you acknowledge you're not a physician, you do promote these medicines extensively here. How do you not go so far as to be giving medical advice? And you said, yesterday, you might take some of these medicines, even though you don't have symptoms. Are you still planning to do that? And how do you calibrate being enthusiastic —

THE PRESIDENT: Yeah.

Q — and not playing doctor?

THE PRESIDENT: Because I want people to live and I'm seeing people dying. And I see people that are going to die without it. And you know the expression. When that's happening, they should do it. What really do we have to lose?

We also have — this medicine has been tested for many years for malaria and for lupus, so it's been out there. So it's a very strong, powerful medicine, but it doesn't kill people. We have some very good results and some very good tests. You've seen the same test that I have.

Q But for those without symptoms, sir?

THE PRESIDENT: In France, they had a very good test; they're continuing. But we don't have time to go and say, "Gee, let's take a couple of years and test it out. And let's go and test with the test

tubes and the laboratories.” We don’t have time. I’d love to do that. But we have people dying today. As we speak, there are people dying. If it works, that would be great. If it doesn’t work — we know, for many years, malaria, it — it’s incredible what it’s done for malaria; it’s incredible what it’s done for lupus. But it doesn’t kill people.

That’s one of the things with a vaccine. When we have a vaccine, we have to do tests because when you inject that vaccine, when they take whatever ever it is they have to take, we have to make sure it doesn’t have a horrible impact, destroy somebody. Good? So we have to test it for a long period of time. This one, not so much because it’s been out there.

Now, I’m not acting as a doctor. I’m saying, “Do what you want, but there are some good signs.” You’ve read the signs, I’ve read the signs. With the other one, there’s some very good signs also. Different — going together works very well. But there may be an indication that if you have a problem with your heart, you shouldn’t take what we call the Z-Pak. You shouldn’t take it, and that’s okay.

But I would love to go to a laboratory and spend a couple of years testing something. We don’t have time. We don’t have two hours, because there are people dying right now. If it does help, great. If it doesn’t help, we gave it a shot. We gave it a shot. That’s the way I feel.

Q Were you serious about taking it, sir?

THE PRESIDENT: You know, we passed something — yeah, I would — I would be very serious about taking it.

We passed something that I’m very proud of. It’s called Right to Try. For 45, 50 years, they’ve been trying. It makes so much sense. We have the greatest doctors and labs and lab technicians, the greatest medicines, the greatest minds in the world. Everybody admits it. And when we’re close to having something, or when we have something that tests incredibly well, you couldn’t use it for years because they would take years and years to test.

So with the help of also Democrats — I got it bipartisan, but they’ve been trying to get this passed for — for decades. You know that. It’s called Right to Try. So a person would be diagnosed terminally ill from something. And in the old days, meaning before a year ago, they would say, “Do you think I could try this — this pill, this whatever, this medicine that’s testing so well?” “No, you

can't do that. You can't do that under no circumstances." They'd leave for Asia, they'd leave for Europe, they'd leave for — if they had money. If they had no money, they'd go home and die with no hope.

We got a thing called Right to Try. If somebody is very ill, terminally ill, they're going to die. They — and it was very complex. It wasn't as easy as it sounds because there were huge liability problems. The drug companies didn't want to do it because they didn't want it on test results — because these are very sick people, so they didn't want to bring down their test results. The insurance companies had tremendous problems.

I got everybody in the room, I said, "Look, we'll sign a waiver." The person taking it will say, "We're not going to sue." The family is not going to sue the drug company, not going to sue the insurance company, not going to sue the state, the city, or the federal government. Okay? It's called "exculpation." And we got it done. It's a very simple agreement. I don't know why nobody ever thought of it, but they never thought of it. I did. And we got it done.

Now we have Right to Try, which is actually, in my opinion, much more difficult than what we're talking about here. But if there's a medicine or something, a possible cure, or something that's looking good and somebody has something that's going — they're going to die or they're very sick, they take it. And, you know, we've had some unbelievable results. Unbelievable results. And it also gives the people hope.

Yes, please.

Q Mr. President, but the doctors who are treating coronavirus patients, they have the medical expertise to determine whether or not they should prescribe hydroxychloroquine.

THE PRESIDENT: That's true. And many of them do.

Q And there are already clinical trials in place —

THE PRESIDENT: Sure.

Q — looking at hydroxychloroquine.

THE PRESIDENT: Sure.

Q So, why not —

THE PRESIDENT: They should be finished in about a year.

Q Why not just let the science speak for itself? Why are you promoting this drug?

THE PRESIDENT: I'm not. I'm not. I'm just saying —

Q You're coming out —

THE PRESIDENT: — very simply. I'm not at all. I'm not.

Look, you know what I'm trying to do? I'm trying to save lives.

Q Well, you come out here every day — right, sir? — talking about the benefits of hydroxychloroquine.

THE PRESIDENT: I want them to try it. And it may work, and it may not work. But if it doesn't work, it's nothing lost by doing it. Nothing.

Q What do you —

THE PRESIDENT: Because we know — long term, what I want, I want to save lives. And I don't want it to be in a lab for the next year and a half as people are dying all over the place.

Q But it's already out there. Doctors are already able to prescribe it off label.

THE PRESIDENT: That's right.

Q Right? So what do you accomplish?

THE PRESIDENT: All I'm doing is saying — well, I'll tell you what I accomplish. We bought massive amounts of it — 29 million doses of it. We have it coming from all of the labs. We're actually now

doing it here, because in case it does work, we want to have it. And we've given it to drugstores, we're — we're sending it all over. FEMA is doing it. FEMA is doing it. We're doing it through different channels, many different channels, including the companies that make it.

Q So you —

THE PRESIDENT: It's a very special thing. Now, it may not work, in which case, hey, it didn't work. And it may work, in which case, it's going to save a lot of lives. Now, a lot of people say, if the people walking in prior to getting it, if they take it, it has a profound effect. Well, maybe it does and maybe it doesn't.

Q Where is the conclusive medical evidence of that, sir?

THE PRESIDENT: I don't want to wait a year and a half to find out.

And only CNN would ask that question. Fake news.

Go ahead.

Q Sir, I have one for you on oil —

THE PRESIDENT: A bunch of fakers.

Q — but, first, I was hoping to ask Dr. Birx a question. The President just said that — based on the most recent data, that you've seen some change in the projection. I'm wondering if you could — you obviously have a week's more worth of data since the, sort of, 100,000 to 240,000 potential death figures that you gave us last week.

So I'm wondering, with all the caveats that this is, sort of, based on — continuing social distancing — that we might see — you know, if one city pops, things could change dramatically. What — what are the, sort of, range that you're now looking at in terms of total death impact?

DR. BIRX: I think the most important thing right now is when we were talking about why we are hopeful. We're hopeful because last time I was here, I wasn't able to really tell you that Italy and Spain were coming across their apex and coming down the other side. And I think, to me, that's

extraordinarily hopeful. They just completed four weeks of really strong mitigation. And I think that's our word to the American people, is we can look like that. Two other countries look like that now — two other countries with a very similar experience to our experience, with higher case numbers and higher mortality.

So that's what the promise is. The promise is: If we do this, we could potentially be better. Now, Dr. Fauci and I today got another update from another independent modeler, and the numbers came in close to that hundred thousand number.

Again, but we believe — Dr. Fauci and I — that if every American follows the guidelines — six feet, washing hands, not social gathering — that will have an even greater impact. And the other side of the equation certainly is our remarkable healthcare providers, our respiratory therapists, our laboratory technicians, our nurses and doctors. They're saving lives every day. And so that changes the number too.

THE PRESIDENT: I also think that Dr. Fauci and Dr. Birx are very impressed with the American people. And I'm not going to put words in anybody's mouth — I would never do that — but I am, and I will say that they are doing maybe a better job than we all thought even possible.

When you look at streets in New York where there's nobody in the street, no cars, no nothing — I see it. You know, I've seen those streets for a long time and they're packed all the time. And now you see there's nobody. You look at other places; you look at what's going on in California where they're doing a fantastic job. They really are. The governor is doing great. I'm proud of them. I'm proud of a lot of people — proud of a lot of people on the other side. You know, of a lot of people.

Really — I'm really delighted to work with people that, frankly, on other issues, I didn't get along so well with. We disagree on this or that; we don't have to go into that now. But we're getting along with a lot of people. And they're happy with us. We're happy with them.

But I really believe that the American people are doing a better job than anybody would have thought even possible, and that's one of the reasons we can even be talking about the kind of number that we hopefully will be talking about, which is at the minimum level instead of the maximum or beyond. It's not even the maximum — it's much beyond a maximum level, which would be horrific.

Yes, please.

Q Oh, go ahead.

Q Mr. President —

THE PRESIDENT: Please.

Q Secretary Esper mentioned the Department of Defense might be moving in the direction of using face coverings. Former Vice President Biden had mentioned that he was going to be using a mask whenever he goes out now. Are we getting to a point where we might see members of the Coronavirus Task Force also wear face coverings?

THE PRESIDENT: Well, it was voluntary, as I saw it yesterday. And certainly, if they'd want to, I would — I would encourage it. I would have absolutely no problem with that if they wanted.

We had a long meeting today. There's good separation. But the task force meets and I would certainly have absolutely no problem if they wanted to. I think, frankly, it's something, at least for a period of time, where it might be advisable. And you know, it's advisory. And we'll see what happens.

Yes, please.

Q Thank you, Mr. President. On Project Air Bridge, we've seen reports that Chinese shipments, testing kits, and PPE have turned out to be faulty to some capacity. We obviously don't have overstock.

THE PRESIDENT: Not here. No, not here. No, no, no —

Q No, but to Spain, in particular.

THE PRESIDENT: Well, no, you've seen in Spain and you've seen in different — they're not sending faulty things to us.

Q So we're not concerned that any of the PPE we're importing is defective?

THE PRESIDENT: No, we test it. We look at it. We check it out.

REAR ADMIRAL POLOWCZYK: (Inaudible.)

THE PRESIDENT: Please.

REAR ADMIRAL POLOWCZYK: One of the things we're doing to prevent that is using those six companies that are the ones in the major supply chain. We're actually going to facilities, looking at product, inspecting it, and clearing it before it comes here. So you've — we've heard those things. That's why — that's why we're doing that.

Q Okay. Thank you. A follow-up for the doctors if possible —

THE PRESIDENT: And we're also sending it to other — from other locations.

Q Right.

THE PRESIDENT: And when it comes to the ventilators, which are very complex, we are now building — we have now, under construction, literally thousands of ventilators. So — but so far, I think our projections on ventilators have been right. They've been correct.

Did you have something? For who?

Q Well, for yourself and for Dr. Birx and Dr. Fauci if they want to take a crack at it. Some of the models that you guys were using — the IHME model, in particular, has been very accurate when it comes to projecting deaths over the last couple of days. But there's a couple of other metrics that they seem to be pretty far off on — specifically hospital beds. Are you guys, you know, happy with the models you're currently using? Is there any need to adjust those?

THE PRESIDENT: Well, it's turning out that we need less hospital beds.

Q Right, but —

THE PRESIDENT: That's what you're talking about. And that's what we — well, we may have models, but we've been sort of saying that. In New York, we were saying we think you're going to

need less. Now, let's hope that continues. But right now — I heard Governor Cuomo this morning, and he was saying less hospital beds, also less death. That was a very big thing.

First time — less death today than yesterday, right? That's a big thing. But also less hospital beds. That means less patients because basically it's less patients. And we were saying that. And it also means less ventilators. So there's a lot of — a lot of very positive things happening.

Okay. Please.

Q Thank you, sir. With Prime Minister Johnson hospitalized —

THE PRESIDENT: Yes.

Q — I noticed a few minutes ago you were standing right next to Vice President Pence. Are you considering staying away from each other just to make sure we have continuity of government in the executive branch?

THE PRESIDENT: We have — we have this tiny platform and I'd love it to be wider. You're staying away from each other.

Mike, you were tested?

THE VICE PRESIDENT: Yes, sir.

THE PRESIDENT: Okay. Like recently. So was I, a couple of days ago.

Q But what I mean: You keep interacting with groups of people —

THE PRESIDENT: We are. We are. We are. You know, here we are on this platform. And — but I get next to him, I don't breathe. I'm only kidding. We are — we are sometimes forced into positions that I'd rather — I'd rather be away, but it's — you know, you're all looking for questions. Mike is a very big part of this; I am. It's very difficult maintaining like, this distance on this little area.

Q Mr. President, I just wanted to ask really quickly, under what circumstances you would consider leveling imports — tariffs on imports of oil to the United States.

THE PRESIDENT: Well, if the oil price stays the way it is because of people that really want to see it go up — when I say get — we want to save a great industry. We built a great industry in this country. If they don't get along, I would do that. Yeah, I would do tariffs, very substantial tariffs. Because we're independent now; we have our own oil.

And if I did the tariffs, we essentially would be saying, "We don't want foreign oil. We don't want any foreign oil. We're just going to use our oil." And that would help to save an industry. And, you know, it's become a tremendous job producer. And it's great to be independent. We're independent. Our energy is now independent. We produce more oil than — oil and gas than anybody else, than any other country. And that all took place over the very recent time.

Now, in the meantime, I'm seeing 91 dollars — 91 cents a gallon out on the road. Okay? A lot of people are happy. I see very inexpensive jet fuel. We're trying to save the airline industry. But I want to save our great energy industry and that's what we're doing.

Yeah. So I would — I would absolutely do that. And what we'll do — the price will still be very low — but what we'll do is we'll save — and, very importantly, we'll save tens of thousands of jobs.

One of the other things we're doing is having oil shipped to our strategic oil reserves. Okay? And, you know, we're buying it for the right price and we're shipping it. In some cases, we're storing it for nothing. They're there. We're filling up our reserves with this very inexpensive oil. Nobody thought they'd ever see a price — this is like from the 1950s, where they had big dollars, okay?

So, no, I would use tariffs if I had to. I don't think I'm going to have to because Russia doesn't benefit by having this and Saudi Arabia doesn't benefit by having it. They — you know, oil and gas are their major sources of income. So it's obviously very bad for them.

But we have to — we have an industry that's a very important industry and it's really formed beautifully. It was the virus that killed it because what happened is it's down 40 percent from the day this happened — 40 percent. Otherwise, it would be doing phenomenally well. So that's it.

Yeah.

Q Mr. President, can we get an idea of a timeline for those people that are waiting for the stimulus checks — how many more days they may have to wait?

And then, Speaker Pelosi, today — or I think last night said, in the next bill, that they would like to see additional stimulus checks made. Have you guys thrown around an amount of how much money —

THE PRESIDENT: No, but I like the concept of it. I think it's good. We're talking about a different way of doing it, but I like the concept.

I like the concept of infrastructure. Our country has to be rebuilt. They spent all this money in the Middle East — \$8 trillion. We're up to now \$8 trillion in the Middle East. We got to rebuild our country. Okay? We have to rebuild our roads, and our schools, our bridges. We have to rebuild our country. So, I like an infrastructure bill.

I also like money going directly to people. It's not their fault that this happened.

And I do think this — especially the faster we can get it open, our country — can you believe we're talking about our country, getting our country open? The faster we get it open, the bigger the boom, the bigger the rocket ship going up. I think it has a chance to go really quickly, relatively quickly. I'd like to see very quickly, but we'll see.

But part of the stimulus and part of what we're doing, that will help it. And the nice part is we're paying practically zero interest rates. You know we're paying very little. It's one of the reasons I like the infrastructure bill, because we're borrowing — we have a strong dollar. And the advantage to a strong dollar is everybody wants to invest in this country. They all want to buy our dollar.

Q On the direct payments, sir: Just in terms of timeline, are we talking still two weeks? Are we talking ten days?

THE PRESIDENT: I think so. Yeah, from what I'm hearing that's —

THE VICE PRESIDENT: Two weeks.

Q Two weeks? Okay, two weeks. Thank you.

THE PRESIDENT: Yeah, a couple of weeks. That's what I'm hearing. Yeah.

Please.

Q Thank you, sir. I wanted to follow up on the hydroxy question. Thanks for the numbers. Has there been any tension with the medical staff on that? Are they in agreement with all these numbers?

THE PRESIDENT: Yeah, we — we discussed it with the staff. We discussed it with FDA. Well, the FDA approved it. So, you know — which is another point. I mean it's been approved by FDA, which is very important. If it wasn't approved by FDA, then I couldn't do this. But FDA has approved it, the hydroxy.

Q And also, if this turns out not to work, are hospitals and doctors going to be exculpatory from the federal government under the Right to Try?

THE PRESIDENT: Well, we'll see if it works. No, it's not going to — it's not going to hurt people. It can help them, but it's not going to hurt them. That's the beauty of it, you see. It can help them, but it's not going to hurt them. What do you have to lose?

Okay, a question? Yeah, in the back, please.

Q Yeah, you know, obviously we know anyone can spread the disease, right? Unwittingly.

THE PRESIDENT: Right.

Q So why even have a few businesses open? Why not just shut everything down? There are grocery stores that are open, fast food places. Why even take a little chance? Just shutter them all down for — temporarily.

THE PRESIDENT: Well, we're going to have to — we'll answer that question later. All I can say is that right now things are looking now things are looking really good and opening up with a bang will be a great thing. And there's nobody going to be happier than me.

Please, go ahead.

Q Just to follow up on your comments about the ventilators —

THE PRESIDENT: Yeah.

Q — the IHME model suggests that 32,000 ventilators will be required by the peak in mid-April. GM is not expected to have ventilators ready before —

THE PRESIDENT: Thirty-two thousand will be what?

Q Required across the country. GM --

THE PRESIDENT: In addition to the ones that we've already sent?

Q Just in — in general.

THE PRESIDENT: Don't forget, we have almost 10,000 — a little more 9,000 right now. And those are ready to rock should we need them.

And we had to keep it. You understand that: flexibility. So that if we need them in New York — which we might not — if we need them. But they're ready to move. We have — we're all ready. Military — it's a military operation. We are ready to move. They'll be moved immediately into whatever section of the country we need.

Would you like to answer that by the way?

REAR ADMIRAL POLOWCYZK: Yes, sir. So, correct. FEMA is working on plan to be able to move ventilators. So, for example, if DOD gave another 500 ventilators, they're on the move to being staged at Fort Dix, to be able to rapidly deploy them to locations. And to include — you know, you heard the President mentioned states giving to states, things like that. So there's — there's the ventilators that aren't in use that conceivably we could rapidly move as well.

Q Right, but you mentioned that there were thousands that are currently being made.

THE PRESIDENT: Yes.

Q So I just wondered if there was any update with GM and Ford just because they —

THE PRESIDENT: No, but they're not going to be long. They've started. GM, Ford, we have many — we have 11 companies — approximately 11 companies — building them. And we're going to have a stockpile for future — hopefully, we never have to use them. They should have — the hospitals, the states should have bought a stockpile. They didn't do that. So we've made up for it.

But if we have extras — other countries need them. I mean, you see UK needs them badly, France needs a badly, Italy needs them badly. They need them. So, it's complicated. It's a big piece of equipment. It's expensive. And we'll be able to help other countries after we take care of our needs.

Yes, please. Go ahead.

Q Yeah, thank you, sir. On infrastructure spending, as you have remarked —

THE PRESIDENT: I actually choose you, but that's okay.

Q Oh, I'm sorry. I'll let —

THE PRESIDENT: I'll let him go. That's all right. Go ahead.

Q Thank you. On infrastructure, you have remarked about how empty the roads are. Is there any thought, is there any way to speed up infrastructure? I mean, the beltway in Washington, it takes forever to do any road repairs, because of all the traffic —

THE PRESIDENT: No, I know. And because they don't do construction techniques that work and that are better. I mean, I see a highway and that's — which is what I do. I do construction — what I did.

I see highway that's good but it's got a bad top, and it's got a big base — concrete base underneath. And I'll see them come in — I don't want to say where, but I could tell you; I could give you plenty of examples — and they rip the hell out of it. They take out the base. They take out everything. Now they pour a new base that isn't as good, isn't as deep, isn't as thick. The concrete base was fantastic — the footing. It takes forever.

Q What I mean is —

THE PRESIDENT: Wait a minute. It takes forever. And instead of scraping out the asphalt, or whatever may be the top — scraping it off and putting the new asphalt down, putting the new median in. They could have done it.

And then they open the highway and it starts to crack. The reason is because it hasn't been set. And they spend 10, 15, 20 times more money than they have to. I never believe, when I watch these people doing highways and doing roadways and doing work, how they take the most expensive solution. And the bottom line: The job itself is far worse.

Q So that's — that's what I'm getting at, is taking advantage of the fact that so many people are staying at home —

THE PRESIDENT: Yeah.

Q — not on the roads. Is there a way to do it more cheaply and efficiently?

THE PRESIDENT: Well, yeah, but hopefully they're not going to be staying at home for long. Hopefully, this will be out and we're not going to have that kind of time. If we have that kind of time, we made a big mistake.

Please, go ahead.

Q Thank you, Mr. President. How many rapid tests has the federal government already deployed across the country? And which regions received those tests?

THE PRESIDENT: Who has that information?

THE VICE PRESIDENT: I can speak about that.

THE PRESIDENT: Go ahead, Mike.

THE VICE PRESIDENT: Deb can follow up.

The 15-minute test has really been a breakthrough. I've reflected on the progress that they've made in Detroit to put first responders back on duty with the Abbott Laboratories test. Abbott Laboratories started last Tuesday producing about 50,000 tests a day.

And there's — I'm informed of that there are about 18,000 of these machines already all across the country. I mean, they are — they're actually the same machines that you use to get a strep test quickly when you go to the doctor. But now Abbott is surging these new 15-minute coronavirus tests out to healthcare professionals and healthcare facilities around the country.

In addition, as the President said, FEMA has purchased 1,200 of these devices. We're distributing them to all 50 states and the Indian healthcare system, and then we'll be distributing the tests.

Dr. Birx, is there anything to add further on that?

DR. BIRX: That's perfect, sir.

Q So (inaudible) these tests?

THE VICE PRESIDENT: Let me ask Admiral Polowczyk about the 1,200 devices.

REAR ADMIRAL POLOWCZYK: I didn't hear the question.

THE VICE PRESIDENT: Have they received the 1,200 or what's the timetable?

REAR ADMIRAL POLOWCZYK: I believe they're on the shelf at Abbott — a good majority of them.

THE PRESIDENT: Tuesday they go out.

REAR ADMIRAL POLOWCZYK: Right. Yes, sir. So, I don't have the exact numbers. I think there is some manufacturing in there, but the large balance of them are on the shelf.

Q Mr. President —

THE PRESIDENT: Some have gone out, by the way, but the big bulk of them go out on Tuesday.

Yeah, please.

Q Sir, in some of these previous briefings, you referred to the federal government as the backup. Today, there's definitely a different approach here, I think —

THE PRESIDENT: No.

Q — with the distribution. The sense of it, in listening to your presentation today, is that you are embracing taking a leader role for distribution. Is there a change?

THE PRESIDENT: No, there's not a change, but we're supposed to be the backup. But like in Illinois, the governor couldn't do his job so we had to help him. We're sending 600 ventilators. We're building a hospital in McCormick Place. We're doing it.

So we have some people that were not able to do. We have other people that needed a little help. We had — in New York, we had to give a lot of help, but we've worked very well with Governor Cuomo and with Mayor de Blasio.

But, no, we are meant to be the backup, but we've taken on a much bigger role than that, and that's okay. I have no objection to it.

Now, in some cases, it's worked so well, where they're actually now seeing — they think they're over — over the big problem. And they're actually calling us and they're saying, "You can take your equipment back now." But we're really deployed as a backup, but I feel we're much more than that. They've done a much better job.

I will say this: I don't think that the people that have represented this country, the federal government — whether it's the Admiral and the generals and all of the people that we call to the fore — I just — they're heroes for what they've done. What they've been able to do in a short period of time — they took a system that was broken, just like we did the military. Our military was broken. Our military was depleted and it was broken, and we've rebuilt our military. We've rebuilt this whole system too.

And I — in a way, Kelly, I appreciate your question because, you know, you're hearing all of the things that we're — the millions of masks, the hundreds of thousands of gowns. And they're

surgical — you know, they're protective gowns at the highest level. We're getting it to the various states. And most of the governors are very happy.

Now, a lot of times, you know, it's politics. Maybe I do the same thing, I don't know. But they'll try and act not so happy.

I will tell you, when I speak to them or when the Vice President speaks to them, they're singing the praises of all of these people. So I always take umbrage when — when somebody says something about what we've done.

Now, to do this — to do this should have taken —

Q And does the buck stop with you next, sir? Is that what has happened?

THE PRESIDENT: To do what we've been able to do and to build it to a level, it should have taken a year. It should've taken two years. They did it in a matter of weeks. And we're helping states.

No, it's them. As an example, New York had the right to buy 16,000 ventilators. They could have bought them. They didn't. I understand why they didn't. It was a very expensive purchase. You know, a very expensive — and that's a lot: 16,000. And they chose to do something else with their money. I understand that. The problem is when something like this comes along, which you don't expect.

Look, 1917 — that's a long time ago — perhaps 100 million people died. That's a long time ago. So people don't think it's going to happen. I would have, frankly — I mean, did anybody in this room think a thing like this could happen? But it happened. And we built up a force. This is a military operation, as it turned out — it really is — with FEMA, with the Army Corps of Engineers.

I mean, Army Corps of — and you were very gracious on that point. The Army Corps of Engineers is building 2,500 units of beds and everything else now. And then Governor Cuomo called and he wanted it to go COVID, meaning, for the problem. And we said, "Well, it wasn't supposed to be that way, but we want to get it done." And we've moved military personnel, so now military personnel are operating it.

And I'll tell you what's — what's good. It hasn't been very full. That's a good thing, not a bad thing. It hasn't been. Now, maybe over the next week, something will happen, but it hasn't been.

But we have — because it's better than the other alternative where we run out. But they built actually 2,900 beds. And we have — also, we built four medical centers in New York. We've built four hospitals, four medical centers, and a lot more than that.

It's such an honor to have done it. But the people that did it are amazing and they have to be appreciated by the states, not me. They don't have appreciate me at all. I don't care about me. They have to appreciate the generals, the admirals, the doctors, the nurses.

I mean, we're bringing now 3,000 people in that are medical professionals that are coming from all over the country to help New York City, help New York State, and help many other places.

I just think it's incredible what they've done, and I don't think that they've been appreciated. Me, you can forget about. Me, you can forget —

Q Really, sir?

THE PRESIDENT: Yeah. Yeah, I rea- — I actually mean it. They have to be appreciated.

Go in the back, please.

Q Mr. President, when you said that you're seeing the light at the end of the tunnel, and yesterday you said —

THE PRESIDENT: I do. I do.

Q Yeah. Sure.

THE PRESIDENT: I see light at the end of the tunnel.

Q But yesterday —

THE PRESIDENT: If I didn't, I would not be — I would not be very thrilled with what we've done. No, I see light at the end of the tunnel. I think indications are some of the numbers coming out today. I think, you know, we had a very good meeting today. We're seeing things that we don't even report because we think it's too early to report.

No, I think, you know, we're seeing things happen that are very good. And we also know — all of us, including the medical professionals — that we have to open our country up. We have to get go- — we have to open our country up. No country was designed for this, where you close it. We're in the midst of the greatest economic boom in history for any country. Our country had the greatest economic boom in history. We had the most people working that we've ever had, almost 160 million people. And then from 160 million, they want nobody to leave the house.

You know, you could use the term "cold turkey." Right? That's called "cold turkey." Countries are not designed — this country is not designed for that. We have to get our country back. And I think it's going to come back, and I hope it's going to come back very quickly.

Q So my question, sir —

Q A question, sir —

THE PRESIDENT: Yeah, please. Go ahead.

Q Sir, the First Lady has been tweeting and encouraging people to wear face masks. Has she —

THE PRESIDENT: That's good.

Q Has she been talking to you about this —

THE PRESIDENT: No, she feels that way.

Q — encouraging you to wear one?

THE PRESIDENT: She feels that — I — I would wear one. I mean, I just — generally, I'm not in a — like, I should — would you like me to wear one right now and answer your question? That would be a little awkward, I guess.

But, no, I mean — again, I would wear one if it was — if I thought it was important.

She — she thinks — she likes the idea of wearing it, yeah. She does. A lot of people do. Again, it's a recommendation, and I understand that recommendation and I'm okay with it.

Q What about your family in New York? Are they going to be wearing them? Are you encouraging them to wear them?

THE PRESIDENT: Wouldn't be surprised.

Q Can we hear from Dr. Fauci, Mr. President?

THE PRESIDENT: Sure. What would you like to know?

Q If we're going into this most difficult of times, how can the American people, sort of, emotionally prepare for that? And while the President is talking and is eager to see the country reopen, how do we balance the mitigating factors that still need to take place before we get to that point?

THE PRESIDENT: Sure. Doctor?

And, by the way, he — he'd like to see the company [sic] open too. I mean, you know —

Q Everyone would, sir.

THE PRESIDENT: He's called "an American who loves our country."

DR. FAUCI: Okay, so part of the answer to your question, I think, relates to two other questions I heard. And I think it came from the back about how can you, on the one hand, have said yesterday that this is really going to be a bad week at the same time that we're talking about the light at the end of the tunnel.

It seems to be inherently contradictory, but it really isn't. And it has to do with what we explained before about the lag in when you look at the indications that Dr. Birx and the President was talking about, where you see a flattening out of cases, and you don't see the realization of what that means

until two weeks later. So right now, we're seeing, as we all said correctly, that this is probably going to be a really bad week. That is a reflection of what happened two and a half weeks ago.

So if we start seeing now a flattening or stabilization of cases, what you're hearing about potential light at the end of the tunnel doesn't take away from the fact that tomorrow or the next day is going to look really bad. So we've got to make sure we realize we're always talking about a two-and-a-half-week lag.

So I want to make sure — because I think a couple of people asked that question. It's really not incompatible with what we're saying.

Now, with regard to what do we tell the American people, what — Kelly, what we've been telling them all along, that the — the only tool, but the best tool we have is mitigation. We know it worked in other countries, and we're seeing how it's working here. So if we really want to make sure that we don't have these kinds of rebounds that we're worried about, it's mitigation, mitigation, mitigation. That's the answer.

Q When new cities or new states come on the chart —

DR. FAUCI: Yeah.

Q — what's the message for people in those places that have not been the focus?

DR. FAUCI: It's the same thing. It's mitigation mitigation, mitigation. In fact — (laughs) — (looks for chart) — here's the famous Vice President chart — is that this is the minimal of what we should be doing. You know, everyone should be doing that.

And everything on here, one way or the other, points to physical separation, whether it's no crowds, whether it's six feet, whether it's staying away from theaters and restaurants or what have you.

Q And churches and places of worship?

DR. FAUCI: Exactly. Exactly.

Q Doctor, are you worried at all about people becoming complacent? Are you worried — I mean, because a couple of days of this, I think people are about ready to go nuts staying in their house.

And I'm just curious, are you worried at all that after, you know, seven days from now, people are going to say, "Look, I gave it my best shot. I got to get out"? I mean —

DR. FAUCI: You know, I wouldn't say I'm worried about it because I don't think it's going to happen. I mean, from what I've seen — and I mentioned it the other day — my own experience is that people really understand the responsibility that they have for themselves, for their family, and for the country. So this is about all of us. This isn't just about us. Because if everybody does their part, you are going to not have those kind of rebounds that we're worried about.

THE PRESIDENT: Yeah.

Q Dr. Fauci, how many additional asymptomatic cases do you think there are currently in the United States? There's 330,000 more confirmed cases. How many asymptomatic, given what we've learned in recent days?

DR. FAUCI: You know, we don't know. And even among us, good friends that we are — (laughs) — we — we differ about that. I mean, it's somewhere between 25 and 50 percent.

Q More than —

DR. FAUCI: Yeah. Yeah, in other words, about the people —

Q — the current level?

DR. FAUCI: Yeah, about the people that are out there. Yeah.

And trust me, that is a estimate. I don't have any scientific data yet to say that. You know when we'll get the scientific data, when we get those antibody tests out there and we really know what the penetrance is. Then we can answer the questions in a scientifically sound way. Right now, we're just guessing.

THE PRESIDENT: And we've made great progress with the antibody testing. Fantastic progress.

DR. FAUCI: Right.

Q And would you also weigh in on this issue of hydroxychloroquine? What do you think about this? And what is the — what is the medical evidence?

THE PRESIDENT: Do you know how many times you've answered that question?

DR. FAUCI: Yeah —

Q But I'd love to hear from the doctor.

THE PRESIDENT: Maybe 15. Fifteen times. You don't have to ask the question.

Q He's — he's your medical expert, correct?

THE PRESIDENT: He's answered that question 15 times.

Q Dr. Fauci, why are you not wearing a facemask?

DR. FAUCI: What do you mean? Why am I not wearing a face mask now? Okay, there are a couple of reasons. One of them is that part of the — in fact, the major reason to wear a facemask is to protect you from infecting you. I had my test yesterday, and it's negative.

THE PRESIDENT: Good.

DR. FAUCI: Okay.

THE PRESIDENT: That's a very — a very good answer. All right, I think that really could be it. That was a very — I love that answer, especially on the facemask. I thought it was very good.

Go ahead.

Q Sir, on the equipment issue, records show that federal agencies did not begin —

THE PRESIDENT: Oh, stop it.

Q — did not begin —

THE PRESIDENT: Who are you with? By the way, who are you with?

Q With the Associated Press, sir.

THE PRESIDENT: Who you with?

Q The Associated Press. Agencies didn't begin bulk —

THE PRESIDENT: That's another beautiful — that's another beautiful (inaudible) —

Q — bulk purchases of respirators and N95 masks until mid-March.

THE PRESIDENT: Are you ready? Are you ready? Let me just answer your question because I know exactly — you know, the same question you ask all the time. Ready?

Q It's the first time I've asked this, sir.

THE PRESIDENT: They have done an unbelievable job in delivering —

For the Associated Press, which is, you know, not so great, not like it used to be.

The people that you're looking at — FEMA, the military — what they've done is a miracle. What they've done is a miracle in getting all of this stuff. What they've done for states is incredible. And you should be thanking them for what they've done, not always asking wise-guy questions.

Thank you very much, everybody. Thank you. Thank you.

END

8:21 P.M. EDT