

REMARKS

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

HEALTHCARE

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James S. Brady Press Briefing Room

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THE PRESIDENT: Thank you very much. Thank you very much. This week, America continues our aggressive effort to defeat the virus as we enter a crucial and difficult phase of the battle.

We continue to send our prayers to the people of New York and New Jersey, and to our whole country. But right now, New York and New Jersey are very hot zones, and we're with them. We're with everybody. Your struggle is our struggle, and we will beat this virus. We will beat it together.

I also want to send best wishes to a very good friend of mine and a friend to our nation, Prime Minister Boris Johnson. We're very saddened to hear that he was taken into intensive care this

afternoon, a little while ago, and Americans are all praying for his recovery. He's been a really good friend. He's been really something very special. Strong. Resolute. Doesn't quit. Doesn't give up.

We have made tremendous progress on therapeutics. I had a fantastic call today, which I'll be talking about a little bit later. And I've asked two of the leading companies — these are brilliant companies. Ebola, AIDS, others. They've come with the solutions and just have done incredible jobs. And I've asked them to contact London immediately. They have offices in London. They're major companies. But more than major, more than size, they're genius.

And I had a talk with four of them today. And they speak a language that most people don't even understand, but I understand something: that they've really advanced therapeutics and therapeutically, and they have arrived in London already. Their London office has whatever they need, and we'll see if we can be of help.

We've contacted all of Boris's doctors, and we'll see what is going to take place. But they are ready to go. But when you get brought into intensive care, that gets very, very serious with this particular disease.

So, the two companies are there. And with what they are talking about — and it's rather complex and has had really incredible results — we're working with the FDA and everybody else, but we are working with London, with respect to Boris Johnson.

Across the country, we're attacking the enemy on all fronts, including medical, scientific, social, logistical, and economic. We're pressing into action the full power of American government and American enterprise. And our military has been incredible. We've just sent 3,000 public health personnel. They're now deployed in the New York area, and they'll be over at the Javits Center, over at the great ship.

And as you probably have heard — and I was informed that Governor Cuomo has already told you and announced — he called me up a little while ago, and he asked whether or not it would be possible to use the ship, with respect to fighting the virus. And we hadn't had that in mind at all, but we're going to let him do it, and we're also going to let New Jersey. Governor Murphy — we spoke with him a little while ago, and New Jersey is going to use it also because New Jersey is a hot — a hotspot.

So Governor Murphy and Governor Cuomo are going to be using the ship for New York, New Jersey. And it's a big ship, and it's now COVID; it's set for COVID. And we are going to — hopefully that will be very helpful to both states. The Javits Center, which is 2,900 beds, just built by our military, also is going to be manned now by the military. And they should be in place tomorrow, and they'll start sending quite a few people over to the Javits Center. It's convenient. It's right in the middle of everything. So that'll be something great.

And we appreciated Governor Cuomo's nice — really nice statements and, likewise, Governor Murphy. We have worked very well with both of them and with, frankly, all of the governors. Vice President Pence had a call this morning with them that lasted for close to two hours. And I understand there wasn't a negative person on the call. Fifty governors — or just about fifty governors — I think they were all on, from what I understood. And they were very positive about everything their federal government has been doing for them. And you'll hear what that is, and it's — it's rather amazing, actually.

Nationwide, the Army Corps of Engineers is building 22 field hospitals — these are big hospitals — and alternate care sites in 18 states. So you have a combination of 22 field hospitals. In addition to that, we're building alternate care sites, which is a little bit of a smaller version of the hospital. And we have a lot of them, and they're going up in 18 different states.

In total, we have deployed 8,450 hospital beds from federal stockpiles. And, you know, if you think, this is done over a period of — really, a period of weeks. It's incredible, actually. More than 8,000 ventilators have been sent from the National Stockpile to our cities and states, backed by the Defense Production Act, which we've used very strongly, very powerfully. So powerfully that we don't have to use it too much, frankly. And it's nice when you don't have to. We're getting more than we ever bargained for.

American industry is stepping up. Manufacturers are really going to town. And we have thousands of ventilators being built as we speak, and we have hundreds that are being sent to different locations, and we're ready to roll with almost 10,000 that we have in the federal stockpile.

When I say "ready to roll," too, I mean exactly what that states: We are — wherever that monster goes, we're able to move with it. Great flexibility. We have tremendous flexibility. And we have people waiting, and they're ready, willing, and able, but waiting to bring them wherever it may be, if they need it. If they need it. It's possible that they won't be needed, that we're fully stocked,

because numbers are coming in where, because of what the American people are doing, we're having fewer hospital visits. I think that could be the case in New York. It could be the case in a few other states. And fewer beds, fewer hospital visits mean fewer ventilators. So we'll see whether or not our original projections were right.

But anyway, I had a very good talk with both governors, and I think they're very happy — extremely happy about the — what we're doing for them, and especially going all COVID. So that'll take place almost immediately.

FEMA and HHS have directly distributed 11.7 million N95 respirators. Think of that. Get the number. 11.7 million N95 respirators. 11.7 million. 26.5 million surgical masks, 5.3 million face shields, 4.4 million surgical gowns, and 22.6 million gloves. 22.6 million gloves.

We have also arranged for vast quantities of additional materials to be allocated through donations and existing supply chains. We've also given tremendous medical material and supplies throughout the 50 states and territories.

And through Project Airbridge, we have succeeded in bringing planeloads of vital supplies into the United States from overseas. We had an additional three. These are massive planes, by the way. The big planes — they're very big, very powerful, and they're loaded to the gills with supplies. And rather than bringing them into our stockpile, as we've discussed, we bring them to all the different locations where they're needed so we can save a big step and a timely step.

Because of my actions, under the DPA, I can also announce today that we have reached an agreement — a very amicable agreement — with 3M for the delivery of an additional 55.5 million high-quality facemask — facemasks each month. So that we're going to be getting, over the next couple of months, 166.5 million masks for our frontline healthcare workers.

So the 3M saga ends very happily. We're very proud to be dealing now with 3M and its CEO, Mike Roman. I just spoke with him and I thanked him for getting it done. And Mike was very happy to get it done. It's a great company. So we're getting 166.5 million masks, and mostly that's going to be for our frontline healthcare workers. Okay? That's 3M. Thank you, 3M.

I also want to thank Apple, one of the many great American companies that's taken into — that's really leapt into action. Today, Apple announced that it is now producing plastic face shields for

healthcare workers at the rate of 1 million per week. One million. And these are the shields that you see on television quite a bit. And they're at the highest level of quality and safety.

We're grateful, as well, to Salesforce, which has donated 48 million pieces of personal protective equipment, including masks, gowns, suits, and face shields. So thank you very much to Salesforce.

I urge all of our nation's governors to ensure that the massive deliveries that we've made to your states over the past few weeks are distributed as quickly as possible.

So again, we're working very well with the governors. Now, they may see you and say, "Oh, we're not happy." But they're very happy on the phone. And Mike Pence is a straight shooter, and he had a great phone conversation to them, with all of the governors. Teleconference. And they're very happy, every one of them.

Were there any negatives?

THE VICE PRESIDENT: No, sir.

THE PRESIDENT: See? I told you. Mike is the greatest. Mike — and you have done a great job, Mike, and I appreciate it. The whole country appreciates it.

THE VICE PRESIDENT: Thank you, Mr. President.

Anthony appreciates it, right? Aren't you — see? Everybody appreciates Mike. A special man.

So a lot of the things that we've done, again, are going directly to the states. The states seem to be very happy. If they're not, they can call me directly, they can call Mike directly, and we'll make them happy. But tremendous progress has been made in a very short period.

And I think, very importantly, the progress has been made before the surge comes, because the next week, week and a half, is going to be a big surge, the professionals tell us. And I think we're in good shape for it, Anthony. So it's good timing. Really good timing. We can have the stuff there. It's already there, for the most part, but we're bringing a lot of different resources to the various locations, especially where the surge is looking like it's going to take place.

Resources from the National Stockpile need to reach our warriors. And they are warriors. I tell it all the time. I saw it again this morning, these young, in many cases — in many cases, older — but they're walking into the hospital, and they're putting on — I mean, as that door is opened, they're going into this place, and, you know, it's not exactly too safe. And they're going in there and they're putting the outfits on and they're putting their masks on, and they're — it's incredible. It's no — it's truly — it's like no different than you watch the war movies or you watch the old clips of war, running up hills. It's — to me, it's the same thing.

Men and women, young and old, but a lot of young people, just going in there. They're not thinking about, "Oh, gee, this is dangerous." They're not saying, "Oh, I don't want to go in." They're — they're warriors. They're running through those doors. It's the most incredible thing. It's a beautiful — it's an incredible, beautiful thing.

Resources from the National Stockpile need to reach these warriors in the hospitals immediately, and we're making sure they do. And again, the states have that responsibility, but we're working with the states and we're getting the states a lot of things that they can distribute. Or when they tell us, we bring it directly to the hospital from the federal stockpile, or from the planes that land without even going to the stockpile.

If any state is having difficulty distributing supplies, we urge you to use the National Guard to assist in the delivery. And I have to say, you have done a fantastic job.

Deborah, you know that you've done great. Tony, you know that you've done great.

But what a job you've done. And I appreciate it. I really do. Your whole group has been incredible. That's a lot of stars you have. I'll tell you that. He's supposed to do a great job when you have four stars, right?

But the military has been incredible, and I thank them for all of us.

Conversely, if a state believes that it has surplus equipment or supplies — very important, because we actually have gotten so much to some of the states that they're able to now — they've done a fantastic job and they've kept — they've kept that line low. And we have some states that have surplus equipment and supplies, and they're working with us to rapidly redeploy those supplies to

areas of greatest need. We thought that might happen. If it worked out well, that's what was going to happen, and it's happening.

And I want to thank Governor Gavin Newsom, who's doing a tremendous job, who's announced California will send 500 ventilators to be distributed to other locations. I think some are going to Arizona. Some are going to Washington, D.C. We think they're going to Delaware. We're working it out. But 500 excess ventilators from the State of California. And we're going to get them taken care of wherever they have to go. Those decisions are being made right now.

The members of the White House Task Force and I are in close touch with mayors and governors and hospital administrators across our country. And we're told that the present time — at the present time, most of the critical needs are — are being more than met. States have to continue sharing detailed information in the amount and utilization rates of medical supplies so we know what to resupply them. Or they can get it directly; that includes ventilators. They can get it directly. Ideally, if they can get it directly, but if they can't, if they're unable to do it, we have tremendous amounts of supplies. And we're building it up very fast too. And this is before the big surge.

This information is fundamental to our ability to deliver the material when — when and where it's most needed.

Now, Mike, in his conversation today, I think got some information as to a couple of locations where we're going to be delivering large numbers of ventilators and large numbers of medical supplies. And we'll take care of that.

But some of the states are very happy. Even Governor Pritzker, from Illinois, is happy. Of course, he may not be happy when he talks to the press, but he's happy. He's a very happy man.

We're increasingly hopeful that the aggressive mitigation strategy we put into place will ultimately allow our hospital system to successfully manage the major influx of cases that — that we have right now. Again, I say that we're finding, because of the incredible job done by the American people in conjunction with everybody — governors, the military, federal government, state government, local government — had a lot of conversations with New York City and Mayor de Blasio. I've gotten to know him. I didn't know him. Gotten to know him. And a lot of people are

working hard. Everybody is working hard. A lot of people are doing a great job — I'll tell you that. A lot of people are doing a great job.

But the goals that all Americans have been sacrificing to achieve these last few weeks are things that a lot of people thought were not possible to achieve. And I think we've more than achieved, but we have to go through.

Again, we're going to have a rough week. We're going to have maybe a rough a little more than a week. And — but there's tremendous light at the end of that tunnel. I said it last time. I said it last night: There's tremendous light at the end of the tunnel. There's so many things happening with therapeutics, with vaccines, with things that we really want.

Deborah, Tony, they're all working so hard on this. But those therapeutics — I mean, look, the vaccines are going to be always a little bit later because of that testing period, but the therapeutics — getting the kind of things that I heard about today, talking to these brilliant companies and brilliant people on the phone was fantastic. It was such an incredible conversation.

And I also spoke, just a few minutes ago, with Vice President — former Vice President Biden, who called. And we had a really wonderful, warm conversation. It was a very nice conversation. We talked about pretty much this. This is what we talked about. This is what everyone is talking about. This is what they want to talk about. And he gave me his point of view, and I fully understood that. And we just had a very friendly conversation. It lasted probably 15 minutes, and it was really good. It was really good. Really nice. I think it was very much so. I appreciate his calling.

As we continue our efforts to develop treatments and cures, this afternoon I spoke with leaders of the American pharmaceutical companies. And just to give you their names: Amgen, Genentech, Gilead, Regeneron. These are four the greatest in the world for doing exactly what they're doing.

And currently, 10 different therapeutic agents are in active trials and some are looking incredibly successful, but we have to go through a process. And it's going to be a fairly quick process, I will tell you, based on what the FDA told me. And another 15 are in plans for clinical trials. So they're advancing rapidly.

And today, a second company announced that the FDA has authorized its vaccine candidate to begin clinical trials. So you have — Johnson & Johnson is already there. I believe they're the one that's first. And now we have a second company that just — just announced. And we were just — it was just approved. So we have two companies at that level for the vaccine itself.

We've now performed 100 — well, if you think of this: 1.79 million tests. That's 1,790,000 tests nationwide. And I think we're going to put up a screen here someplace. Good. They're on cue. They're just on cue. And here it is. This is the process starting on 5 March and ending right there. Right about now. Right? That's about it.

ADMIRAL GIROIR: Yesterday.

THE PRESIDENT: So — and it's going up at a rapid rate. Nobody has done more testing.

And one of the reasons why they say — and I think I can say this, Deborah, very strongly — but one of the reasons that we have more cases is we've done more testing. If I went to some of these countries that have, in my opinion, far more people than we do, that had the problem, and if we did the kind of testing proportionately that we're doing, they'd have many more cases than us. But we have more cases because we do much more testing.

So when you do the testing, you have cases. Otherwise, you wouldn't know about the cases. People sit home; you don't know about it.

But we have now done 1,790,000 tests nationwide. That's more than any other country in the world, hence we have more cases. And that number is growing by nearly 125,000 people per day. Think of that one. So it's growing by 125,000 people per day.

I told you about South Korea. This is a, you know, vastly faster — and we also have, they say, the most accurate of tests.

CVS is launching — and they've been great — two new drive-through testing sites in Atlanta, Georgia, and Providence, Rhode Island. And each location will be able to test up to 1,000 patients per day using the ultra-fast five-minute test developed by Abbott Labs. Now they're down to five minutes. They call it the "ultra-fast" and it's very accurate. Abbott Labs, I want to thank them. They've been fantastic.

We're also speeding urgent economic relief to the American worker and families and the employers. As of today, tens of thousands of small businesses have applied for more than \$40 billion in relief under the Paycheck Protection Program. You've all been reading about it. And it's really — I mean, it's only been going for a couple of days. It's really been performing well. A couple of little glitches — minor glitches that have already been taken care of, what they say.

These funds will result in nearly 2 million jobs being preserved. So we're taking care of our workers — small businesses and our workers.

Nearly 3,000 lenders have already made loans under the program, and we're signing up additional lenders very quickly — rapidly.

Community banks have been very responsive, and larger banks are also stepping up. If this — if we run out of funds — by the way, we're already preparing because it's going so fast for the small businesses and their employees — we'll ask Congress to refill it immediately. But the banks have been great. The big banks — the Bank of America was right up there at the beginning. JPMorgan Chase was — has been great. After the first day, they really — they really came through, and a lot of the big banks. But the community banks have been fantastic.

As we announced last week, we are providing \$100 billion in direct support for our hospitals. And the first tranche, \$30 billion, will be distributed this week.

So I want to — I want to say one other thing. Our farmers — we love our farmers — and, as you know, as of April 1st, the China trade deal — 250-billion-dollar — they purchased \$250 billion from us, if not more. And of that, approximately \$50 billion is expected to be with our farmers.

So it kicked in as of April 1st, and we'll see how it goes. It seems like they're buying. So we'll let you know how that's going. But they're buying anywhere from \$40- to \$50 billion worth of our agricultural product. That should have a huge impact on our farmers — a tremendous impact on our farmers. But we're watching it very closely.

To fight the medical war, we've mobilized the unbeatable — and it just — it is unbeatable — strength of American determination, ingenuity, and compassion. I got to see that when I spoke to the great science — because I call them “science companies” more than drug companies. They're scientists.

We've seen businesses, charities, and private citizens making generous donations. So many people are making donations. We've seen states and cities supporting and helping each other and caring for our citizens. And we've seen Americans of all backgrounds and beliefs uniting together to answer the challenge and rise to the moment. And that's what they're doing.

Above all, we have been awe-inspired by the exceptional courage of the doctors, nurses, EMTs, and healthcare workers who are the soldiers of this war. No words can ever express the complete measure of our gratitude for these intrepid heroes.

One Cleveland patient credited his medical team for not only saving his life through their skill, but forever changing his life through their example of selfless devotion. Couldn't believe it — so generous he was with his statements. And he talked about their bravery in an area that was in such trouble — an area of that hospital where people were dying. And he talked about their bravery.

Another survivor in Houston said simply, "I will consider them my angels forever." "I will consider them" — think of that — "my angels forever."

As our nation endures the depths of loss and grief, we are also witness to the summit of American virtue, character, and courage. With the love and dedication of every American patriot, we will win this battle, we will defeat this enemy, and we will rise from this present crisis with new strength, unity, and resolve. And that's what's happening.

Tremendous stories are coming out of this horrible moment. A very dark moment for the world. One hundred and eighty two. I was saying 151 for a while, and then it got up to 160. And it's 182, as I announced yesterday. A hundred and eighty-two countries are being attacked by this virus.

So I just want to thank everybody, and I want to thank the American citizens for doing a great job. Stay inside. And let's win this, and let's get our country open as soon as we can. I think it's going to be sooner than people think. Things are going really well. Again, light at the end of the tunnel.

And with that, I'll take a few questions. And then Mike is going to take over and talk with the Admiral and with the professionals. And we appreciate you being here.

Yes, please.

Q Mr. President, you mentioned that you were asking U.S. drug companies to provide treatment to the British Prime Minister.

THE PRESIDENT: Yeah.

Q What sort of treatment is that? Is that something that's available to the American public?

THE PRESIDENT: Well, it's a very — yeah, it's a very complex treatment of things that they've just recently developed and that they have a lot of experience with, having to do with something else, but recent for this. And they'll be — they've already concurred. They've already had meetings with the doctors. And we'll see whether or not they want to go that route.

But when you're in intensive care, it's a big deal. So they're there and they're ready. I think we have — we have three of them. We have — I spoke with four. You know who the four would be. And you know the people within those — you probably — you'd know the companies if I told you the companies. But the people are the greatest — the greatest in the world.

So they're at the hospital, and we'll see. And they have — they have everything with them, should it be needed. Hopefully — hopefully it won't have to be needed, but should it be needed.

I just — I've found him — I've found Boris to be a fantastic person. Just, like, a fantastic warm, strong, smart guy. He loves his country. You see that. I mean, he fought like — like hell for his country. And intensive care is big stuff. Really big stuff.

Q Yesterday, you were asked about this as well, but now that he has been moved to intensive care, does that give you and the Vice President any pause or additional concerns, steps that you're taking to preserve the continuity of government here?

THE PRESIDENT: No, I don't think so. Mike had his test a couple of days ago. I had my test a couple of days ago. So — and we're here, and here you are. So, no, I don't think so. But I think we'll probably — just because of questions like that, I think we'll probably have maybe quite a few tests. It's not the worst idea.

You know, the system of testing now is so quick and so easy. So, I could see —

THE VICE PRESIDENT: I was tested again today.

THE PRESIDENT: And you were tested again today?

THE VICE PRESIDENT: Yes, sir.

THE PRESIDENT: You sure you're okay?

THE VICE PRESIDENT: I'm okay.

THE PRESIDENT: Good. Then I'm staying here.

Q Mr. President —

THE PRESIDENT: Yeah.

Q Despite the nearly 1.8 million tests that you say the United States has done, the Inspector General for the Department of Health and Human Services released a report today — a survey — of more than 300 hospitals across the country. And the number one complaint from those hospitals were severe shortages of testing supplies and a really long wait time.

THE PRESIDENT: Well, it's just wrong.

Q I mean, a week or longer.

THE PRESIDENT: It's just wrong. Did I hear the word "inspector general"? Really? It's wrong. And they'll talk to you about it. It's wrong.

Q But this is your own government.

THE PRESIDENT: Uh, it's — well, where did he come from — the inspector general? What's his name?

Q It came from the inspector general report —

THE PRESIDENT: No, what's his name? What's his name?

Q I don't know his name off of the top of my head.

THE PRESIDENT: Well, find me his name. Let me know. Okay? If you find me his name, I'd appreciate it.

Q But, sir, these are hospitals that do not —

THE PRESIDENT: All I can tell you is this: We put up on the board —

Q Sir, these are hospitals —

THE PRESIDENT: You're going to ask — you're going to ask the Admiral. But we are doing —

Q Sir, these are hospitals who say that they're waiting a week or longer to get their test —

THE PRESIDENT: Fine.

Q — results.

THE PRESIDENT: Then speak to the Admiral.

Q Why is it still taking so long?

THE PRESIDENT: But we've done more testing and had more results than any country, anywhere in the world. They're doing an incredible job. Now they're all calling us. They want our testing.

“What are we doing?” “How do you do the five-minute test?” “How do you do the 15-minute test?”

So, give me the name of the inspector general. Could politics be entered into that?

Go ahead, please.

Q This is our —

THE PRESIDENT: Go ahead.

Q Thank you, sir. Are you worried about retaliation to your decision to ban export of medical goods, like Indian Prime Minister Modi's decision to not export hydroxychloroquine to the United States and other countries?

THE PRESIDENT: I don't like that decision, if that's — I don't — I didn't hear that that was his decision. I know that he stopped it for other countries. I spoke to him yesterday. We had a very good talk. And we'll see whether or not that is. I would be surprised if he would, you know, because India does very well with the United States. For many years, they've been taking advantage of the United States on trade. So I would be surprised if that were his decision. He'd have to tell me that.

I spoke to him Sunday morning. I called him. And I said, "We'd appreciate your allowing our supply to come out." If he doesn't allow it to come out, that would be okay, but, of course, there may be retaliation. Why wouldn't there be?

Yeah, please.

Q Thank you, Mr. President. The Paycheck Protection Program has gotten off to a confusing start for small businesses because —

THE PRESIDENT: I don't think so. I think it's done very well.

Q Well, Wells Fargo has stopped taking applications. Bank of America initially prior- —

THE PRESIDENT: Not anymore, they haven't.

Q — prioritized taking applications from clients that were already borrowers.

THE PRESIDENT: Bank of America has been the leader, taking tremendous numbers of applications, and, of course, there may have been — they wanted to have a slightly different application, they wanted to have a little different information. But Bank of America has been a leader. They had number one in terms of applications.

I wish you'd ask the question differently. Why don't you say, "It's gotten off to a tremendous start, but there are some little glitches" — which, by the way, have been worked out? It would be so much nicer if you'd do that. But you're just incapable of asking a question in a positive way.

Q Sir, what oversight measures is the federal government putting in place to —

THE PRESIDENT: It's already done. It's already done.

Q — ensure that there is fairness?

THE PRESIDENT: It's taken the measures. It's taken the measures. And we may even do a different system. Not with this. We're going to have to probably add more money to this, to save — and to keep our small businesses going and to keep the employees of those small businesses working.

But it's such a positive event and you ask it in such a negative way. It's just — I wish — I wish we had a fair media in this country, and we really don't.

Speaking of unfair, go ahead.

Q Mr. President, the Acting Secretary of the Navy told the crew of the USS Roosevelt that Captain Crozier was either, quote, "too naive or too stupid" to be in command. Is it appropriate for the Chief Officer of the Navy to be speaking this way about this captain? Is this the right way to —

THE PRESIDENT: Well, I haven't heard it exactly. I haven't heard. I heard they had a statement that was made. If that were the statement — it's a strong statement.

Look, the letters shouldn't have been sent, and certainly they shouldn't have been leaked. This is a military operation.

I must tell you, I've heard very good things about the gentleman — both gentlemen, by the way — I will say this. But about both gentlemen. And I may look into it only from the standpoint that something should be resolved, because I'm hearing good things about both people.

Q What might you look into, sir?

THE PRESIDENT: I may just get involved, if it's okay with you.

Q (Inaudible), you mean?

THE PRESIDENT: Yeah, because, you know what? You have two good people and they're arguing. And I'm good, believe it or not, at settling arguments. I'm good at settling these arguments. So I may look into it in great detail — in detail. And I'll be able to figure it out very fast.

But that was a statement — and it's a rough statement. But look —

Q Might you reinstate him if you decide it was —

THE PRESIDENT: Look — look, letters should not have been sent to many people, unclassified. That was a mistake. It's a mistake that shouldn't have been made, because it's unfair to the families of the people on the ship because they get nervous. And it shows weakness. And there's nothing weak about us now. Not anymore. We have the strongest military we've ever had. And we're not going to be showing weakness to anybody because we have — that ship is incredible — nuclear-powered aircraft carrier. And we don't want to be doing — writing letters. We don't want to have letter-writing campaigns where the fake news finds a letter or gets a leak. We don't want that.

So, the letter —

Q Would you consider reinstating him —

THE PRESIDENT: Excuse me. So the letter shouldn't have been sent. With all of that said, his career prior to that was very good. So I'm going to get involved and see exactly what's going on there. Because I don't want to destroy somebody for having a bad day. Okay? Does that make sense?

Okay.

Q Mr. President, Vice President Biden's spokesperson said that he had made some suggestions to you about actions that you can be taking —

THE PRESIDENT: He did.

Q — to deal with the pandemic.

THE PRESIDENT: He did. We had a very good talk. We agreed that we weren't going to talk about what we said, but we had a very, very good talk. It was a warm talk. I enjoyed it. I hope he enjoyed it, too. And it was short. It was 15 minutes.

Q Did he have good suggestions? Anything that you're going to do?

THE PRESIDENT: Well, he had suggestions. It doesn't mean that I agree with those suggestions, but certainly he had suggestions. And I also told him some of the things we're doing. But the conversation was a friendly — very friendly conversation.

Yeah, please.

Q Thanks a lot, Mr. President. You've mentioned, other members of your task force have mentioned, over the course of the next two weeks it's going to be a very difficult time for our country in terms of fatalities. And there —

THE PRESIDENT: It will be a difficult week and a half...

Q Yeah. And there are a number of governors who are close allies of yours, Mr. President, who have refrained thus far to have these stay-at-home orders. And Dr. Fauci, who of course is on your task force, has said that —

THE PRESIDENT: True.

Q — it would — the states that don't have stay-at-home orders are putting themselves at risk and the country at risk. Do you agree with that?

THE PRESIDENT: Well, if Dr. Fauci said that, I would be inclined to call them up. You know, we do have a constitutional problem in doing that. You understand that. I mean, there's a double — there's a double-edged sword. You understand. I can do it, but it is a constitutional — you can say federalist, you can say there's lots of different reasons, where I would rather have the governors do it, make their own determination.

They're smaller — and not in all cases but, sort of, they're smaller cases. But I'm not sure 100 percent that Dr. Fauci said that, but you can ask him.

Tony, you want to say something? Please.

DR. FAUCI: So I had — I had good conversations with the governor of Nebraska and the governor of Iowa here. And it's interesting that, functionally, even though they have not given a strict stay-at-home, what they are doing is really functionally equivalent to that. And we had a really good conversation with both of the governors.

And — and I — you know, when I had mentioned that, I think there was a public response that they weren't really doing anything at all. And they really are doing a very good job, both of them. Those are the only two that I spoke to, but — but it was a really good conversation.

And I want to make sure people understand that just because they don't have a very strict stay-at-home order, they have in place a lot of things that are totally compatible with what everyone else is doing.

Q If I can ask a question of Dr. Fauci before he —

THE PRESIDENT: Go ahead.

Q About getting back to normal: You said you wanted to get back to normal as soon as possible. Will we truly get back to normal in this country before there's an actual vaccine that's available to everybody? And how do you — how do you start lifting the restrictions safely?

DR. FAUCI: Yeah. Well, Jon, if back to normal means acting like there never was a coronavirus problem, I don't think that's going to happen until we do have a situation where you can completely protect the population. But when we say "getting back to normal," we mean something very different from what we're going through right now, because right now we are in a very intense mitigation.

When we get back to normal, we will go back gradually to the point where we can function as a society. But you're absolutely right. I mean, if you want to get to pre-coronavirus, you know, that might not ever happen in the sense of the fact that the threat is there. But I believe, with the

therapies that will be coming online, and with the fact that I feel confident that over a period of time we will get a good vaccine, that we will never have to get back to where we are right back now.

So if that means getting back to normal, then we'll get back to normal.

THE PRESIDENT: I think that with the therapies and I think that with the vaccines, which I have total confidence are coming — and I'm dealing with the companies. I'm talking to Johnson & Johnson, I'm talking to all of them.

I think that when you add the tremendous stimulus that we're giving — like, for instance, deductibility for restaurant expenses, for restaurants and entertainment; the money that we're talking about for small businesses and employees to keep everybody working; and other things that we're, frankly, working on right now, which are going to be great for our people — I think when you add that to it, I think we can get more than back to normal, from an economic standpoint. It would actually be better. But more than back to normal.

But I — I would agree that we'd love to see a vaccine, but immediately, we'd love to see a therapeutic. And I think we're getting very close.

Q Do you think you'd be able to lift restrictions on April 30th right now — (inaudible)?

THE PRESIDENT: I don't want to comment on that, but I can tell you that we certainly want to try. We certainly want to see what — what's going on. We're doing very well. Look, if you look at those, you look at most places where that — you can call it the “bump.” You could call it the “hill”. You can call it the “mountain.” You can call it — whatever you want to do it. It's very flat. You take a look. And that was done through mitigation. That was done through a lot of good work.

And that far exceeded our expectations before. I mean, you — people can't even believe how — how low some of those bumps are, some of those hills are. They're very surprised. They have a couple of tough ones. New Jersey has been very tough and New York has been very tough. They're crowded in. You know, it's tight, it's tougher. But far exceeding. California far exceeds; Washington State far exceeds.

You look at so many of these states, how well they're doing. The eight states, by the way — and I haven't spoken to the governors, but Tony is so right: They may not have it from the standpoint that

they're saying it, but those people are practicing it and they're doing a fantastic job. Take a look at where they are, in terms of the levels. But take a look where they are.

So — but if I thought it was something that — and I've looked at them, and I've looked at them very carefully. I looked at them today, looked at them yesterday. From a constitutional standpoint, I'd love not to get involved with that. And not from a legal standpoint, just from a moral, constitutional standpoint. Because legally, I can, but morally, I — you know, I believe in our Constitution, much more so than most people.

And I'd love to be able to let the governors do what they have to do. Those states are doing a fantastic job, all eight of them. They're doing a fantastic job. So we'll see what happens.

As for your question, you fully understand what I'm saying, so thank you.

Yes, please.

Q Hi. I have two questions, if I may. One from somebody outside the room. But first, could I ask: Do you think Boris Johnson, when he talked about shaking hands with hospital patients, did he downplay the threat of this virus too much? And do you know exactly what his current condition is?

THE PRESIDENT: Well, I think Boris was looking at it differently. He was looking at it earlier. He was looking at it like "ride it out." There were many people thinking about riding it out, meaning, you know, whatever it is, it is.

But then you see what starts to happen and the numbers become monumental, and they decide not to do that. We actually moved early. We moved early because of what we did with respect to the ban on China coming in and then Europe coming in. That was an early ban too. And then UK.

So, no, he — he waited a little while, and he — he felt that, but he got — you know, he made a decision very quickly thereafter to do what they did. And they they — they've gone to a very strict lockdown. But they're suffering greatly as a nation right now. They're going through a lot. You know, they're — they're a nation that's having a difficult time.

But I've gotten to know him. He's just such an incredible guy. It was just so shocking to see that because you know what that means. Intensive care is a big deal with regard to what we're talking

about. That's a very big deal, a very scary deal.

Yeah, please.

Q Just, somebody who can't be in the room because of social distancing has asked me to ask a question. It's Thomas Howell of the Washington Times: How many health workers in the U.S. have become infected with COVID-19? And if the answer is not known, will the CDC be publishing that data?

THE PRESIDENT: Yeah, I could get you that information. I think they'd — I think they'd probably be willing to give that. Right?

DR. FAUCI: We'll have that.

THE PRESIDENT: Yeah, we could get you that information.

Jeff, please?

Q Mr. President, OPEC is meeting on Thursday —

THE PRESIDENT: Yeah.

Q — and they have said that they are willing to make a cut in production if the U.S. chips in as well, which suggests that they want you to ask U.S. producers to do an orchestrated cut.

THE PRESIDENT: Well, you're the first one that's told me that. I don't know. We'll have to make that decision. And maybe we will, maybe we won't. But we'll have to make that decision.

Q But do you —

THE PRESIDENT: I think the cuts are automatic. If you're a believer in markets, I can guarantee you there's a cut from pre this condition.

You know, look, this happened because of the virus. The virus knocked out 40 percent. It was — it went down in one hour. I mean, literally, when places close up, you're talking about a 40 percent

cut.

No, I think it's happening automatically, but nobody has asked me that question yet, so we'll see what happens. I'll —

Q But you would —

THE PRESIDENT: I'll let you know Thursday evening.

Q All right, that's the deal.

THE PRESIDENT: Okay.

Q But you would consider asking U.S. companies to refuse —

THE PRESIDENT: Well, I think it's automatic because they're already cutting. I mean, if you look, they're cutting back.

Q But OPEC is asking for a signal —

THE PRESIDENT: Because it's — its market, it's demand. It's supply and demand. They're already cutting back, and they're cutting back very seriously.

Q But if OPEC is asking for a signal from the U.S. —

THE PRESIDENT: Well, nobody has asked me that. So, if they ask me, I'll make a decision. Okay? But I'll — but again, it's happening anyway.

Yes, please.

Q In light of all the discussion about Prime Minister Johnson and his health, can you update us on the status of the second half of your physical that you were going to have this year?

THE PRESIDENT: Yeah, so I had a physical. The first half was very successful. I did it on a day when I was in the White House and we were able to do that, as the doctor reported. And I have some —

the second half of the physical different. Probably is done at Walter Reed, and I'll do that at the appropriate time, but I feel very good. And according to the doctor, very good shape.

Q And can I just ask you again on the idea of a national stay-at-home recommendation? What is giving you so much pause about making this recommendation?

THE PRESIDENT: I told you. I told you. He understood very well. I appreciate your understanding.

Q I understand the Constit- — but it's not an order, just a recommendation.

THE PRESIDENT: It's called the Constitution of the United States. And I'd rather have, if possible, for the governors to make the decision. If a decision was very necessary — and they have done a good job. And Tony said it better than anybody. They are — they are doing — they are doing what we're asking them to do without having to put the seal on it.

But I will say, if I thought it was necessary, I'll do it in a heartbeat.

Q Do you agree with the Georgia governor opening the beaches?

THE PRESIDENT: Opening what?

Q The beaches.

THE PRESIDENT: I haven't seen — I'm going to have to see to what extent. I'm going to have to see how many people you're talking about, are they crowded, are they packed, are they not packed. We'll have to take a look at it. Right now, it's very early for beaches in Georgia. So, right now, very early. So I'll take a look at it.

He's done a very good job as the governor. He knows what he's doing, but we'll have to take a look. It really does depend on, you know, how crowded it may be. But I will talk to him and I will ask him that question. I would ask him.

Yeah, please.

Q Mr. President, you said last week that you were considering travel restrictions around hotspots. Is that something that's still on the table? And at what point —

THE PRESIDENT: We're looking at it. And the airlines have been cutting their routes. You saw that yesterday. They announced big cuts in routes. We need some — some flights for emergency use for military people. We need some flights for medical people. And they are very few flights, as you know. And the flights that are going out are — I think they said they're 3 to 4 percent full. You have 3 percent of the plane is occupied. So it's — they're very, very — generally, very, very empty planes.

But it's good to have — it's a — it's a tiny amount of flights, relative to the overall.

And we need them also for medical workers, for — otherwise, we're going to have to do a whole big thing with our own planes. So they're done for a reason. There's also testing done when people get onto those planes and also when people get off the planes.

Q Mr. President, if I can follow up on this question of the HHS inspector general. And, by the way, her name is Christi Grimm. And it wasn't so much her opinion, but they interviewed 323 different hospitals.

THE PRESIDENT: Well, it still could be her opinion. But when was she appointed? When was she appointed?

Q I'm not sure when she was appointed.

THE PRESIDENT: Would you do me a favor? Let me know.

Q I'll — I'll check on it.

THE PRESIDENT: No, no, let me know now. I have to know now, Jon. Let me know now.

Q But the point is —

THE PRESIDENT: Because we are doing an incredible job of testing. We are doing a better job than anybody in the world right now on testing. There's nobody close. And other nations admit this.

Other nations have admitted it very strongly. Other nations are calling us, wanting to know about our testing. Let me know when she was appointed, would you?

Q But specifically, what she was saying —

THE PRESIDENT: Go ahead, please.

Q Sir, is it —

Q — was that there had been a delay in the lab results.

THE PRESIDENT: Okay, thank you very much. Go ahead, please.

Q Thank you, Mr. President. Only last week, there were multiple flights coming from China full of medical supplies.

THE PRESIDENT: Yes.

Q Companies like Huawei and Alibaba has been donating to the United States —

THE PRESIDENT: Right. People I know very well.

Q — like 1.5 million N95 masks, and also a lot of medical gloves and much more medical supplies. So —

THE PRESIDENT: Sounds like a statement more than a question.

Q And Ambassador — Chinese Ambassador Cui Tiankai last night wrote an op-ed on New York Times, calling to cooperation with the United States. So are you personally working directly with China on medical supplies —

THE PRESIDENT: We just signed a trade deal.

Q — also fighting with the virus?

THE PRESIDENT: It's the biggest deal probably ever made. And I hope they're going to honor that trade deal. If they don't honor the trade deal, then I'll tell you a different answer, but I think they will. They're going to spend billions of dollars for agriculture. They're going to spend billions of dollars for many different things.

Whereas China never spent money in our country —

Q Specifically on medical supplies.

THE PRESIDENT: — we spent money. We had a deficit — a trade deficit — with China for years of \$500 billion, \$400 billion. We had the biggest trade deficits in the history of the world with China. Now China is going to spend a lot — has agreed to spend \$250 billion — many billions of dollars in our country, much of it going to farmers and manufacturers.

So, I'll let you know. I mean, I hope they're going to honor the deal. We'll find out.

Q (Inaudible) with China? Are you cooperating with China?

THE PRESIDENT: I don't know. Who are you working for? China? You work for China or are you with a newspaper?

Q I'm — no, I'm working for Hong Kong —

THE PRESIDENT: Who are you with?

Q Hong Kong Phoenix TV.

THE PRESIDENT: Who owns that? China? Is it owned by China?

Q It's based in Hong Kong.

THE PRESIDENT: No, is it owned by the state?

Q No, it's not. It's a private-owned company.

THE PRESIDENT: Okay, good. Okay.

Look, I'll let you know. I'll give you a good answer to that in a few months. I want to just see what they do because it's time for them to help us. Okay? It's time right now for China to help us, and hopefully they do. And if they don't, that's okay too.

But we signed a deal. It was signed in — with great goodwill and spirit. And it's time that our farmers benefitted, our manufacturers benefitted, and we'll see whether or not that deal is honored. And I think it will be because I know President Xi, who I like and respect. And I think he will honor the deal he made with us.

It just went into effect four days ago. I will see whether or not. In fact, I called up just a little while ago. I said, "How are the farmers doing with respect to China? Are they buying the product as anticipated?" And the answer was, "Yeah, I think so." But it wasn't the most positive, but it was — it was starting. It was starting. The deal just started.

So I'll let you know. But, you know, for many, many years, China ate our lunch because we had people in this position that I'm in right now that allowed China to get away with absolute murder, and it should have never happened.

Q What about fighting the coronavirus?

THE PRESIDENT: But we are — we are now dealing with China. We'll see what happens.

Yeah. Go ahead.

Q Mr. President —

THE PRESIDENT: Wait. Wait.

Q I'll tell you when she was appointed.

THE PRESIDENT: How many do you want to ask? How many do you want to ask?

Q So I just wanted — I was going to answer your question you asked me. She was appointed in January of this year to her current position —

THE PRESIDENT: Good.

Q — as the principal deputy inspector general.

THE PRESIDENT: Okay. We're going to take a look at it.

Go ahead.

Q Mr. President, I know you don't want to talk about —

Q On the issue of —

THE PRESIDENT: Don't — don't interrupt. He's — he's talking.

Q On the issue of small-business loans, sir, you said that businesses have applied for \$40 billion in loans. But can you tell us how much of that money has actually gone out to the small businesses?

THE PRESIDENT: I can't tell you, but I know it goes out very quickly once the loan application is approved. And the process is very fast. And you have to understand: These are banks, and that's what they do. But they were swamped. They were actually swamped.

Okay, go ahead. Please.

Q I know you don't want to talk about the inspector general report, but testing is still a big issue in this country. When can hospitals expect —

THE PRESIDENT: Put the — put the slide up again, please. Just put it up.

Q When can hospitals expect to receive a quick turnaround of these test results?

THE PRESIDENT: Are you ready? Are you ready? Hospitals can do their own testing also. States can do their own testing. States are supposed to be doing testing. Hospitals are supposed to be

doing testing. Do you understand that?

Q But it takes a while for the —

THE PRESIDENT: We're the federal government. Listen —

Q — results to come back.

THE PRESIDENT: We're the federal government. We're not supposed to stand on street corners doing testing. They go to doctors. They go to hospitals. They go to the state. The state is a more localized government; you have 50 of them. And they can go — 50 within here; you also have territories, as you know. And they do the testing.

And if you look at the chart, if you take a look — did they put it up? Yeah. Just take a look. And these are testing and the results are now coming in very quickly.

Initially speaking, the tests were old, obsolete, and not really prepared. We have a brand-new testing system that we developed very quickly, and that's your result. And you should say, "Congratulations. Great job" — instead of being so horrid in the way you ask a question.

Please. Go ahead.

Q Mr. President, today —

THE PRESIDENT: Yeah, I'd love to have the Admiral speak to that question. Yes. That's a great idea.

ADMIRAL GIROIR: So, I can talk a little bit more about testing later on, but as the President said, 1.79 million tests have been done. And this does not count the hundreds of thousands of tests that are done within hospitals that are now currently not reporting. So I'm sure we're well over 2 million.

That inspector general report was done here — 23rd and 24th — during our ramp-up period, quite a long time ago. There was clearly — and it's hard to interpret the report because it mixes up all kinds of things — but clearly, there was complaints by some hospitals of a backlog. Probably had sent out tests.

And that is true. There were several days of backlog at some of the major labs that have been taken care of. We know now that the ACLA labs now have a 24- to 48-hour turnaround.

THE VICE PRESIDENT: They do.

ADMIRAL GIROIR: They're doing well over 100,000 tests a day. We now have the Abbott machine; that's point of care. That's 18,000 of those instruments throughout the country. The Cepheid machine is now all across the country with a 45-minute turnaround on.

So we have worked directly with many of the hospitals that have their own laboratory-derived tests. Some of those really, quite frankly, didn't understand the regulatory freedom they have to use other different kinds of instruments or different kinds of reagents.

THE VICE PRESIDENT: They do now.

ADMIRAL GIROIR: So — like they do now. Like they do now. And I'm on the phone with them all the time to make sure that everything is clear. We have a 24-hour call number. But that's what it was there for.

And I don't know the inspector general. I don't know that person. I tell you one thing I have a problem with: If there was such a problem that she knew about or he knew about on March 23rd and 24th, why did I find out about the test from them on the —

THE PRESIDENT: He's the one in charge.

ADMIRAL GIROIR: — on the news media at 8 o'clock this morning?

If there was a problem, I think you're ethically obliged to tell me where that is so we can interact with it like I do every single day.

But that's a discussion for the future. I think testing is really in a good position right now, and I'd be happy to expand on some of the really good tests that are coming up.

THE PRESIDENT: How long has that person been in government? Could I ask you that?

Q Did serve in the previous administration.

THE PRESIDENT: Oh, you didn't tell me that. Oh, I see. You didn't tell me that, Jon.

Q She was appointed for her current position in January of this year, by your government.

THE PRESIDENT: You didn't tell me that. Did serve in the previous admin- — you mean the Obama administration. Thank you for telling me that.

See, there's a typical fake-news deal.

Q Well, you asked me when she was — you asked me when she was appointed.

THE PRESIDENT: No, look. Look —

Q I told you when she was appointed by your administration.

THE PRESIDENT: You're a third-rate reporter. And what you just said is a disgrace. Okay?

You asked me — you said, "Sir, just got appointed." Take a look at what you said.

Now, I said, "When did they — when did this person — how long in government?"

Q But, but —

THE PRESIDENT: "Well, it was appointed in the Obama administration."

Q But her current job was in your administration, sir.

THE PRESIDENT: Thank you very much, Jon. Thank you very much. You will never make it.

Go ahead, please.

Q On the ventilators —

THE PRESIDENT: Boy, that's a terrible thing.

Q — and maybe this is best for Admiral Giroir — but can you tell us today how many ventilators are in the federal stockpile?

ADMIRAL GIROIR: I'm not going to tell you how many are in the stockpile, but I can tell you that we look at ventilator use granularly every single day, in every single state, and down to the hospital level.

So we have been able to meet and easily meet all the ventilator requirements that have been brought us — to us by the state. No one has not gotten a ventilator that needs a ventilator. And as far as we can project, looking at all models, every person who needs a ventilator will get a ventilator.

I'm a ventilator doc, right? I'm an ICU physician for children. Spent every day of my life managing people on ventilators. This is my community. It's also the Surgeon General's community as an anesthesiologist.

So what we have in the stockpile, I think, is not a number that we — we give out. But we have thousands remaining in the stockpile. And now you're seeing out of the — out of the appropriate American spirit that, when a state like Washington or California doesn't need that ventilator, they're doing the right thing by moving them around the country.

THE PRESIDENT: It's about 9,000, just so you understand. It's about 9,000.

And, by the way, you didn't tell me also that this inspector general came out of the Obama administration. You didn't tell me that either.

Q Sir, everybody up here —

THE PRESIDENT: Okay, please go ahead.

Q — worked in the Obama administration except for you and Vice President (inaudible)?

THE PRESIDENT: Go ahead, please.

Q I'm looking, sir, at — just quickly here, I'm looking at this inspector general's bio. She appears to have served in government since 1999.

But I was hoping to ask you about your call with former Vice President Joe Biden. Is there something that you learned on that phone call? And has that changed your thinking —

THE PRESIDENT: No, I understood his views before the call.

Q But has that changed your opinion about speaking to people like —

THE PRESIDENT: I just think he's a very nice — I think he's a nice man. I've always thought he was a nice man. I've — I don't know him. I don't know if I ever spoke to him before, other than to say hello. But I think he's a nice man. We had a very nice call.

Q And do you want to seek now the counsel of some of your predecessors — George Bush, Barack Obama?

THE PRESIDENT: No, but we may — no. Not really. We may — we're doing a great job.

Hey, I inherited — we, this administration — we inherited a broken system, both militarily, but we've rebuilt our military where we now have so much ammunition, whereas you remember a very important general said, "Sir, we have no ammunition." They wanted to save money on ammunition.

They didn't want to save money because they spent money like nobody ever spent money. But you know what? We now have a great military rebuilt. And we have so much ammunition, we don't know what to do with it. Okay? And that's a nice feeling to have.

But they also gave us empty cupboards. The cupboard was bare. You've heard the expression: "The cupboard was bare." So we took over a stockpile where the cupboard was bare and where the testing system was broken and old. And we redid it.

And, frankly, it would be okay for a small event but not for a big event. And they had a chance to do it. Somebody said that a certain person — I won't tell you, but a certain person said this will

happen. And that's true. The problem is that person never did anything about it — previous administrations. In previous admin- — they never did anything about it.

You know, we all know all about pandemics and all of the things that we're seeing now, but nobody thought it was going to happen. And if we did think it was going to happen, the problem is nobody did anything about it.

We did. We have rebuilt the system. And now we're a fine-tuned machine. We built thousands of hotel beds for New York. We moved a ship in that now we're going to make for COVID — COVID-19. We are going to make it so that people having this horrible thing happen to them will be able to use the ship. The ship, as I said, is going to be shared with New Jersey — New York and New Jersey.

We've done things that are incredible. When you build — what was it? Eighteen hospitals. We built 18 hospitals. We built medical centers all over the country. And when you have Gavin Newsom and other governors who really have been very nice and generous in their statements — because they make the statements to the press, not just to my face. Others tell us how great we're doing — like the call that Mike had today. I heard from other people that were on the call; they said it was incredible. It was two hours, and it was — everything was positive. They were so happy with what we've done.

And we're ready to do more if they need it, because we're ready to march. The Admiral can tell you: We are sitting there with 9,000 ventilators and we're ready to march when we see that. We can move quickly. As soon as we see that need, we can move very quickly. We're ready to march. We built a great system.

The problem is, the Democrats — like a guy like Chuck Schumer, who's a total lightweight, by the way; I've known him for a long time. He'll say, "Why don't you put a military man in charge?" A military man? I have all military men. This man is doing an incredible job. We have two admirals, numerous generals. We have the Army Corps of Engineers. We have FEMA. We have this whole force that like nobody has ever seen before. We have a great military operation and they've done an incredible job.

And honestly, people should respect — because nobody has ever seen anything like what we've done. And what they end up — what — forget about me; don't worry about me. I get — I will only get bad — if I say, "How many ventilators do you need, Governor?" "A thousand would be great." I

said “Nope, I’m going to send you 10,000.” And then you’ll call up from the media. You’ll say, “How did Trump do?” “We’re not happy. He didn’t send us enough ventilators.” Because that’s called politics.

But if you look at what’s happening, that — and I’m even surprised. The governors are saying all good things. But the Democrat governors, and a couple of RINOs — frankly, they’re RINOs. It’s all they are — one RINO, in particular. But the governors are saying great things.

He had a call that lasted two hours today. I heard about the call, not just from Mike. It was a perfect call. Now I’m sure you were on the call, even though you’re not supposed to be. I’m sure you were on the call — meaning some of the media was on the call, because they’re constantly reporting the call. If they’re honest, they will say it was a great call.

Okay. Okay. Next question, please.

Q Mr. President?

THE PRESIDENT: Here we go. Here we go.

Q You didn’t mention the hospitals that were built in New Orleans and Dallas today, but you have mentioned them a number of times previously. There seems to be some concern in Texas that they might lose the hospital in Dallas if it’s not used —

THE PRESIDENT: We’re never going to do anything that hurts Texas.

Q — if it’s not used yet.

THE PRESIDENT: We’re only — we’re only helping Texas.

Q How patients is there —

THE PRESIDENT: By the way, the governor is doing a great job over there with the situation.

And Texas is so big, you have some parts of the state that are affected, other parts that aren’t affected at all. You know, it’s an incredible place.

Q But do they keep this hospital, even if it's unused? Or is the federal government going to shift those resources elsewhere?

THE PRESIDENT: No, we're going to use whatever we need, and we're doing it totally in conjunction with the governor. Okay? We're doing it in conjunction with your Texas governor, who's done a fantastic job. Great.

Q Can I ask what — Governor Abbott also has set up checkpoints at the border to check people —

THE PRESIDENT: Yeah.

Q — coming in from Louisiana. We've seen checkpoints in Florida, other state borders. Americans are not really —

THE PRESIDENT: Very few people are coming through our border. And you'll be happy to know we're up to mile 161 of the wall.

Q No, no, I'm talking about internal borders between states.

THE PRESIDENT: Oh, I see. Okay.

Q Americans are not used to seeing —

THE PRESIDENT: But on the border between Mexico, we have 161 miles of wall.

Q We're not — but I'm talking about internal borders.

THE PRESIDENT: Okay, good.

Q Americans don't — they're not used to seeing border checkpoints between states. How much longer — and is that something that states have to (inaudible)?

THE PRESIDENT: Well, I mean, look, you — first, you want us to call eight governors and tell them to do something. And then you're complaining that another governor is so strict that he actually checks the borders. I understand why he's doing that: because he knows who he has and he

doesn't want people coming in if they should maybe, you know, not be to — to the liking of the doctors.

Q Is the role — is the role of the federal government to decide when borders are closed —

THE PRESIDENT: No, I think it's — look, he's done a great job. He's done a great job with this case, as have many other governors. But he's done a great job.

One of the things I thought you were going to say is we've been very tough on our southern border, as you know. Very very tough.

Q And another one for Dr. Fauci.

THE PRESIDENT: And part of that is because of the fact that we have so much — you know, when you talk about 160 miles of new wall, nobody is coming through that. Nobody. Not even close. And we're building it rapidly. We will have — early next year, we'll have close to 500 miles of wall, which is what our goal was.

Please go ahead.

Q You mentioned Senator Schumer just a moment ago. He had a conference call today and he said that he believes that a COVID four relief bill will be necessary. Do you share that belief? And what would be contained in such a bill?

THE PRESIDENT: I don't know necessarily, but I certainly want to listen. And what I want to do is two things: a real infrastructure, not a Green New Deal. You know, the carbon footprint. I'm not looking for the carbon footprint. We want to put people to work.

But a real — and, frankly, for so many years, we've let our infrastructure go to hell because we were wasting all our money in the Middle East and other places. Okay? I want to rebuild our country. I don't want to rebuild — we're tired. We've built — we've rebuilt, if you call it that — or destroyed, frankly. What we've done is so crazy. What we have done — the direction that this country has taken is so sad.

But we're in the Middle East for \$8 trillion. And if you want to fix a pothole in a highway, you can't do it because they don't want to give you the funds. So we want to have an infrastructure bill — a real one, like in the vicinity of \$2 trillion — to completely rebuild our roads, our bridges, our highways, our tunnels, everything. And I'm totally open to listening to that.

I'm also open to listening to and even putting forward — because we're going to be putting something forward — more money for our citizens because they've gone through trauma. This has been trauma. This came out of nowhere.

Q (Inaudible.)

THE PRESIDENT: When — and I say it and I'll say it again: We had the greatest economy in the history of the world. We had the most people working in the history of our country, almost 160 million people — far more than ever before.

And then one day, our professionals correctly came to us and they said, "Sorry, sir, we have to close down our country." And I said, "Say it again. Say it again." "We have to close down our country." And the entire world closed down because of this hidden enemy.

No, we — we are going to take good care of our people. It was not their fault.

Q May I ask Dr. Birx to clarify something that she said on Saturday, sir?

THE PRESIDENT: Go ahead. Yes, please.

Q May I ask Dr. Birx to clarify something that she said on Saturday? If I may, Dr. Birx —

THE PRESIDENT: Deborah?

Q — this is a question that comes from a radio colleague of mine, Tamara Keith. And on Saturday, it sounded like you said that for the next week people in high-risk areas should not even go to the market or the drugstore. Is that what you meant to say or is that accurate?

DR. BIRX: You know, out of respect for every single healthcare worker that's on the frontline, whether they're a nurse, a doctor, a respiratory therapist, the phlebotomist, the persons who come

in the rooms to clean — you know, out of respect for them, we as Americans should be doing everything possible.

And what I meant was, if you can consolidate, if you can send one person, the entire family doesn't need to go out on these occasions. We really need — this is a highly transmittable virus. We've been saying that we want every American to know that what they're doing is making a difference, but we need to have solidarity of commitment from everyone to really — so, you know, maybe once every two weeks, we can do a grocery store and pharmacy shop for the entire family.

So it was really about: We have to do everything we can. I know — I see on the TV stations the level of human suffering in the hospitals.

Dr. Fauci and I and Admiral Giroir have spent our lives taking care of others. We need to take care of each other now as Americans and do everything that's in those guidelines.

And I know they're tough. I know incredibly how tough they are. My grandchild of 10 months got a fever of 105 this weekend. I'm the doctor and I couldn't get there. I mean, so I'm trying to explain to my daughter how to listen to her lungs. How to listen to her lungs and then the baby's lungs.
(Laughs.)

THE PRESIDENT: So you did not get there? You did not get there?

DR. BIRX: I did not go there.

THE PRESIDENT: Good, I'm very happy about that.

DR. BIRX: (Laughs.) Because of you two. (Laughs.) I mean, when you — you can't —

THE PRESIDENT: (Inaudible.)

DR. BIRX: — you can't take that kind of risk with the leaders of the country.

THE PRESIDENT: Your grandson is okay?

DR. BIRX: Daughter. But she's coming out of it.

THE PRESIDENT: That's a lot of temperature, 105.

DR. BIRX: Yes. But, you know, we're all —

THE PRESIDENT: That's a lot of temperature.

DR. BIRX: — and that's just an illustration. And I know you all are making sacrifices. And I guess I want everyone to take this seriously. So that was really a call of seriousness of how important this is and how we're starting to see the impact.

But you can see what can happen when you come at this a little bit too late. And that's why the message — before you see it, before you have to see your hospitals and your emergency rooms overwhelmed — it is on us, as a member of this community, of this country, to do everything possible to save one another.

And so that was really what I was saying, and I will continue to say that because I do believe it's making a difference. You can start to see it making a difference. But we have to do even more right now because that will predict where we are two or three weeks from now.

THE PRESIDENT: Thank you, Deborah.

And it is making a big difference. I saw where Governor Cuomo was a little bit upset today. Over the weekend, a lot of people outside and they were — they were pretty big groups of people. I saw that. I noticed that. And he wasn't happy with that. And I could understand that.

Look, we have a period — a short period of time — hopefully, it's a short period of time to go. And let's get it done. Let's get it done.

Kristen, did you have a question?

Q Yes, I did. Thank you. Quick follow to —

THE PRESIDENT: You're so quiet today.

Q Just got here. Apologies.

THE PRESIDENT: It's because you have your own show now, right?

Q (Laughs.) No. Quick follow to the question about legislation. I know there's discussion about a phase four —

THE PRESIDENT: Yeah.

Q — but are you also looking seriously at a second round of direct payments? And are you putting discussions on a potential phase four on hold for now while you pursue that?

THE PRESIDENT: Well, I was opposed to the way of distribution — money distribution — through, as you know, unemployment and through the state offices because they have very old com- — not all of them, but many of them — have 40- year-old equipment, as I've said. And it makes it very difficult.

But that's what they're looking — that's what they to do. That's the way it's mandated to do. I thought it would be better if we did a direct payment system, but the Democrats really wanted it. And I think they had some — some help from a couple of people that I would have — had I spoken to them, I would have convinced them otherwise, I really believe.

But, so — but it's getting out. And the federal government has done its job. All we can do is give this massive amount of money to the states. The states then are responsible to distribute it — a little bit like we're talking about here. But the money will be right on time from the federal government, then the states have to do their job in getting it out.

Q Does there need to be a second round of those payments, do you think?

THE PRESIDENT: We could very well do a second round of direct. I would do it direct.

Q Is that — is that under serious discussion right now?

THE PRESIDENT: It's under — it is absolutely under serious consideration.

Q And in terms of Chuck Schumer, he also said he spoke to your chief of staff about potentially appointing a czar to oversee the supply chain. Is that something that you would consider doing?

THE PRESIDENT: Well, we have people that are so talented.

Q Who is the point person for that?

THE PRESIDENT: I know the people he suggested. They're wonderful people. They worked here. They're wonderful people.

He's just doing that because it's politics. Because you know what?

Q But who's the point person right now, Mr. President?

THE PRESIDENT: We have many. Depending on what? In terms of testing, this gentlemen right here.

THE VICE PRESIDENT: I can speak to that.

THE PRESIDENT: In terms — you know who the point person is? This gentleman right here. He's the one in charge of the task force. But, Mike, you may want to tell him about the — because this is really a military operation.

Q Mr. Vice President, in terms of supply chain, in terms of getting out PPE —

THE VICE PRESIDENT: Let — let me answer your question if I may —

Q Please.

THE VICE PRESIDENT: — because it's — it's a very good question. And I spoke to Senator Schumer the night before last about just that. When the President signed a declaration of national emergency, he stood up FEMA as the lead agency implementing his policy to marshal a whole-of-government response. And, under FEMA, we provide federal support, the state manages the healthcare response and healthcare providers and first responders implement that response on a local level.

Our lead on this issue in implementing it is Administrator Pete Gaynor. But the man managing all of the supplies — and you heard a presentation this weekend about our Air Bridge; what we also

called a control tower — we literally, with Admiral John Polowczyk at the helm of our logistics effort, we have visibility now on all the supplies that are moving across this country and into this country from around the world. It really is extraordinary.

I mean, when the President tapped FEMA to lead this effort, he — we essentially wanted to say we want to organize this in a military fashion. And we tapped, really, someone who is widely regarded as the number-one supplies and logistics military officer to do just that. He really is an extraordinary individual. Admiral Giroir has known him for a long time. And to be working with Admiral Polowczyk — we speak every morning. Our team reviews the data. We go over that with Administrator Gaynor and Admiral Polowczyk.

We talk about an extensive team that's identifying supplies around the country and around the world. And then, as we were explaining to governors today, we work with the requests that are coming in from states, with a priority on the areas that are dealing with widespread outbreak — like the Greater New York City area, New Jersey, Louisiana — focus on Detroit, focus on Chicago and Illinois.

And then what — what Pete Gaynor and Admiral Polowczyk are doing is directing those commercial distributors to send the resources directly to the frontlines of the battle against the coronavirus. It is an extraordinary system.

And as I explained to the governors today, as I've explained to congressional leaders who've made a — what I think is a good-faith recommendation that we have — that we organize this in a manner of military logistics — it's exactly what President Trump has done. And it's what we're doing every single day to make sure that healthcare workers, to make sure that the states that are dealing with a widespread outbreak of coronavirus can be confident that we're going to spare no expense, leave no stone unturned, and use this extraordinary apparatus, centered in FEMA, to get the people of our country what they need, when they need it, to battle the coronavirus.

THE PRESIDENT: Thank you, Mike.

And, Kristen, when Schumer makes a statement like that, he's only doing it for politics. He knows. We have the best generals, the best admirals. We have the best people. These are incredible leaders. These are vibrant people. They've done such a good job.

And again, you'll get a tape of the conversation because I'm sure some of the governors probably had their favorite reporter listening to the conversation, even though they weren't supposed to. But that's happened before.

Just so you understand, we had a call today that was a beautiful call — everybody friendly, everybody happy. They also know, in some cases, we'll get them a little bit more. And if they need it, we'll get them a lot more, depending on where this monster is going.

But when Schumer does that, take a look — take a look at the past —

Q Well, he's not the only one, to be fair, Mr. President.

THE PRESIDENT: Well, you know, you're going to have to tell me who.

Q There are other people who have raised that — that point.

THE PRESIDENT: They certainly don't — well, yeah, some Democrats, because they view this as a campaign issue, they want to make Trump look as bad as they can because they want to try and win an election that they shouldn't be allowed to win, based on the fact that we have done a great job.

We built the greatest economy in the world. I'll do it a second time. We got artificially stopped by a virus that nobody ever thought possible. And we've handled it, and we've built a team, and we've built an apparatus that's been unbelievable.

Take a look at the swine flu. Right? That's H1N1. Take a look at that. And it's not the other way around, by the way. It's H1N1. Take a look — you know what I mean by that. Take a look at the swine flu. It was a disaster; 17,000 people died. The other administra- — they didn't even know — it was like they didn't even know it was here. And that was peanuts compared to what we have, in terms of the power, the magnitude of what we're going through. This is attacking 182 countries, simultaneously.

So Schumer is just all about politics. I've known him almost all of my adult life. And he's — he's a disgrace. In many ways, he's a disgrace. And he knows it's (inaudible). He just wants to do that. But he knows the job we're doing.

Everybody is amazed at the job we're doing. And the public is starting to find out. They're starting — you know, one of the reasons I do these news conferences — because if I didn't, they would believe fake news. And we can't let them believe fake news. They see us up here. They see us with admirals. They see us with this talent. They see the job that Mike Pence has done, which has been an unbelievable job. An unbelievable job.

I put him there. I thought he'd do well. He did great as the governor of Indiana, and I thought Mike would do well. He's done much better than well. And he gets along with people, I think, much better than I do. Because I like people being 100 — Mike can put up with things that — sometimes I say, "It's amazing that he can put up with it." But he's done an incredible job and so has the entire team.

This is a military operation. And again, we built 2,900 beds in Javits Center. We — we built medical centers in New York. In Chicago, we built 1,000 beds — much more now — in McCormick Place. That's their big convention hall, the equivalent of Javits convention hall. Big McCormick Place. Fantastic place.

By the way, the mayor of Chicago — at least on the phone — is extremely happy with what we're doing. She's thanking us. Has a great relationship with Mike. Thanking us.

And I just wish the politicians would say to you what they say to us. Really. And it's a good question.

Do you have one? Yeah, please. And we'll get to you.

Q Yes, Mr. President. A national security question and then a question about Governor Cuomo. On the national security front, to the extent that you can comment on this: Your administration is making heavy preparations to move against the cartels in Latin America right now. And I — could you expand —

THE PRESIDENT: You said Latin America?

Q Yes.

THE PRESIDENT: Yeah.

Q Could you expand on the reasoning of why now? Are their supply and logistics especially weak? Is it political? What's the reasoning?

THE PRESIDENT: Yeah. It's a good question. We've moved a tremendous number of boats and ships to the area of — you know, different areas of exactly where you're talking about — because we are tired of drugs pouring into our country from other places. And we're tired of seeing drugs pouring into different parts of Latin America, South America, and just coming into our country.

Now we've got them stopped at the border and they're trying to do it by sea. So we stop them at the border with — and, frankly, with the help of Mexico. Mexico, right now, has 27,000 soldiers on our southern border. They never had any soldiers. They're doing that because I've asked them to do it. That's the only reason they're doing it. They have 27,000 soldiers.

So now they're trying to bring it in by boat and by ship — the drug lords and the people doing drugs — and trying to destroy our country from inside with drugs. And we're hitting them very, very hard. And that's why we're doing that.

Q Are there other illicit activities that U.S. assets are targeting or —

THE PRESIDENT: Say it?

Q Is it beyond narcotics? Are there other illicit activities that U.S. assets are targeting?

THE PRESIDENT: Well, there are — there are the activities of human trafficking, and especially with respect to women. And, as you know, proportionally, it's mostly women.

Q (Inaudible) —

THE PRESIDENT: And it's a horrible thing. It's a horrible thing.

Q — just particularly opportunistic?

THE PRESIDENT: And there's never been a time like it. And it's because of the Internet. And this is all over the world. But, for the most part, they're coming through — in this country, they're coming through the southern border. But we're hitting them very hard. They have tremendous illegal

trafficking in women — and children also, but mostly in women. And it's illegal. And it's horrible. And it's disgraceful. And I've seen things that are an absolute disgrace. And we're trying to knock them out, and we're knocking them hard.

And again, I want to thank the President of Mexico because he has really stepped up to the plate. Twenty-seven thousand soldiers. They've never had any soldiers on our border. And I did that because the Democrats will not approve anything to stop — because they want to have open borders. They want to have all these people flowing through our border. And, in many cases, they're sick. They have problems that we — you don't want to know about. Or they're criminals, in many cases. Not in all cases, but in many cases. And they don't want to have bor- — they want to have open borders. They want to have sanctuary cities. So they protect criminals. And I don't want to have it.

And Joe Biden does want to have that also, as you know, because he said that during numerous debates.

I want to have strong borders, and I don't like protecting criminals with sanctuary cities. But we're doing it for drugs. We're doing it for human trafficking. We're doing it because you have to do it. We either have borders or we don't have a country.

All right. Go ahead, please.

Q On Governor Cuomo, why did he move —

Q Mr. President, on the question of antibody testing — which is FDA approved now, but not widely available yet — I know the Admiral said, by May, expect to have millions available. How are you going to prioritize who's going to get the antibody tests? And what does — what is that going to show you? Do you think that's going to be immunity?

THE PRESIDENT: Okay. I mean, I have an answer, but I'd rather have the Admiral answer that.

ADMIRAL GIRIOR: So, let me clarify — and I know you probably understand this — is the antibody test does not tell you if you have the active virus in your nose. If you're positive for the antibody, it strongly implies — it means that you have had the virus before. And to the degree that we know of

medical knowledge, you will probably — highly probably — be protected against getting the virus again in the future.

So I want to make something clear: There's no antibody test approved. Okay? "Approved" is not a word we talk about. There is a test or two that has received emergency use authorization, and many, many — many others out there that have not gone that way yet.

And I want to take this opportunity to caution: There is a very consolidated effort between the FDA, CDC, NIH to validate some of the tests that are on the market right now, because it is very important that they actually do what they say they do. And we have reason to believe that not all of them are going to perform well. I don't know the primary source, but the Financial Times just reported that the UK had 17.5 million antibody tests that they bought, and none of them work.

So we're not going to get in that situation. We're going to be very careful to make sure that when we tell you you're likely immune from the disease, you're really — that test really said that.

Now, I will also make a statement, and I'm — there's a lot of work on here, and I'm very excited about it. As opposed to the test for a novel virus, the antibody-type tests are very sophisticated technology, but they're old technology. This, we expect to have many tens of millions of tests the first month that we are really sure that the test makes sense.

So this — this allows for surveillance screening — and Dr. Birx is one of the world experts — to understand is 1 percent, 5 percent, 30 percent of Americans have been infected. But it also allows us to have very widespread — tens and tens of millions of people screened with a finger prick on the spot.

Q And by when? Just to be — by May you're saying this will happen or when —

ADMIRAL GIROIR: So — so we're — science doesn't run on rails. Right? So we need to make sure that the FDA, the NIH — which they're actively doing right now — assure that the tests that they're testing really do perform the way they should.

And if things work out the way we believe they will, we will have millions on the market by May — in a sophisticated way, in a prospective way — that we get the surveillance we need. We can test

people to see if they've been exposed, immune, and go back to work. And a combination of that kind of test with the current kind of tests we have now is how America opens back up again.

Q And how do you prioritize who gets those tests? I mean, tens of millions — we're a country of 300 million. How do you determine who you're going to have have that test?

ADMIRAL GIROIR: Well, we are having active discussions under the leadership of Dr. Birx and the task force. But you can imagine how that is, right? But with tens and tens and tens of millions of tests per month that are available, you could really do wide- — very widespread testing.

But let me just give you an example.

THE PRESIDENT: Which nobody else can do, by the way. No other country can do it.

ADMIRAL GIROIR: I'll just give you one example. It would be very important to know if the virus is still circulating here — whether, for example, a healthcare worker or a long-term-care nursing home worker is immune from the virus and can't carry it. Very, very important to protect our elderly in that situation. But also, if you haven't been exposed, to make sure that you really take precautions and maybe take care of the people who don't have the virus — and you don't have the virus.

So there are very — it's complex, but it's not complicated on how you go about looking at this in different segments of society. And I don't want to take too much more time to the podium, but antibody tests are a different thing. They're coming — we're highly confident that this can be scaled very rapidly and provide us a bit of information we just don't have now.

THE PRESIDENT: Jeff, go ahead.

Q Mr. President, may I follow up on what you said?

THE PRESIDENT: A few more. We'll do a few more.

Q May —

THE PRESIDENT: And then Mike is taking over, and you're going to see some incredible work that's been done.

Go ahead, please.

Q May I please follow up on what you said with regard to Captain Crozier before?

THE PRESIDENT: Yes.

Q You said you didn't want to punish him for having a bad day.

THE PRESIDENT: He had a bad day or a bad — bad week.

Q Would — does that mean —

THE PRESIDENT: But I — I don't — yeah, I want to — I'm going to look into it.

Q What does that mean —

THE PRESIDENT: And I also — I also think our Navy Secretary — he's a highly respected man. So sometimes that happens with people, and I'll — I'll take a look at it.

Q But what does — what do you mean by that? Would you consider reinstating him?

THE PRESIDENT: He had a bad day. When he sends a letter out and he sends copies all over the place and it's not a classified letter. And it was very disconcerting to the families of the people on the ship — were very disconcerting. So, number one, they get worried and scared. It was weak. We don't want weak.

But I'm going to take a look because he's — I think he — you know, looks to me like he's an outstanding guy. I looked — I looked at his whole — just a little while ago, I looked at his file. And people have bad days and we'll take a look at it.

Q I guess my question is: What would you consider doing for him?

THE PRESIDENT: Well, we'll take a look. I want to look, I want to speak also to the Secretary. I also want to speak to the Secretary of Defense, who is Mark Esper, who is doing a fantastic job. And we'll — you know, maybe I can help the situation out.

I mean, you guys are saying, “Why is the President getting involved and going...” Well, I like to solve problems. It’s a problem. You know? I — I don’t want to see men hurt, women hurt. I don’t want to see people hurt unnecessarily. Maybe we can solve it easily where, you know, it’s not life changing.

But he did — he did a bad thing, sending a letter out and many, many copies, as you know. I don’t know, I heard 28 copies. I heard a lot. That’s a lot of copies. Plus, the letter was five pages long. I haven’t read the letter, but I think it was five pages long, single spaced. That’s a lot of writing.

You know, he’s the captain of a ship. He’s the — he’s a very important person of a very expensive ship, a nuclear-powered ship. He shouldn’t be writing letters like that. But it happens. Sometimes, I’ll write a letter that I say, “I wish I didn’t send it.” Not too often, but it happens.

Q Can I follow up on that? Mr. President, can I follow up on that?

THE PRESIDENT: Go ahead. Yeah, go ahead.

Q A quick follow-up on that, because the Acting Navy Secretary — and I know you were asked about this, but I just want to try one more time. He did say, in remarks to soldiers on the USS Roosevelt, that Crozier was, quote, “too naïve or too stupid” to be in command if he didn’t think that writing that letter was a bad idea.

THE PRESIDENT: Well, I don’t know want to comment on what he said. I — I understand.

Q Do you wish he had used different language, Mr. President?

THE PRESIDENT: It’s — it’s tough language, but I don’t want to — let’s not get into that. It’s tough language. Now, there are some people that think, “Oh, wow, he says it like it is.”

Look, he made a mistake. He should not have sent that letter or he should have gone through his chain of command, which is the typical way of doing it. You know, he’s in the military. He’s a very important person in the military. He knows it better than anybody in this room what he should have done and I’m sure he feels he made a mistake.

But I’m going to look into it, and I’m going to see — maybe we can do something, because I’m not looking to destroy a person’s life who’s had an otherwise stellar career, as I understand it. I looked

at his file just now because I've been seeing what's going on.

Q Potentially reinstate him?

THE PRESIDENT: If we can save — if we can save a person's career — I don't mind going after a person if they did something wrong. And, you know — but this was a mistake. He made a mistake. I'm not justifying what he did. He made a mistake. He shouldn't be sending letters. He's the captain. He's a very important person in the military. You don't send letters and then it leaks into a newspaper. Of all newspapers, that was a beauty. Right? So you just don't do that. So, it was a mistake.

But I may get involved. I'll call Secretary of Defense and find out a little bit about it. And if I can help two people — two good people — I'm going to help them.

Q Mr. President, your tone seems to have changed a little bit since Saturday.

THE PRESIDENT: Say it?

Q Your tone seems to have changed a little bit on the captain since Saturday.

THE PRESIDENT: On the captain?

Q Yeah. Has —

THE PRESIDENT: No, it hasn't. I mean, look —

Q But is it the news coverage or did somebody speak to you on his behalf?

THE PRESIDENT: Okay, ready? I — I said — when you asked me and when the question was asked the last time, I said, "Shouldn't have sent the letter." I haven't changed. He shouldn't have sent the letter. And it should've — if there's a letter, it should go classified and it should go to his superior. And he shouldn't be jumping over his superior.

Q Why did you look at his file, sir? Did somebody ask you to?

THE PRESIDENT: So, I'm — it hasn't changed, in that regard. The only thing that has played right up here with me is that I looked at his record. And he's been an outstanding person. If he wasn't, I wouldn't even be talking about this. He's been an outstanding person. He's had a very exemplary military career.

I mean, you know, he started off as a helicopter pilot. They called him "Chopper." His name was "Chopper." He was a great helicopter pilot. It's a tremendous skill. I know a lot about helicopters. And then he went to F-16s or F-18s, and he was a tremendous pilot. And then — he's very smart. He studied nuclear energy and he was fantastic — and very few people have the aptitude, they have the mentality to do that. Nuclear energy is very complex. Very — it's very hard. Very few people can do it. And he did it well.

And then he became the captain of a nuclear ship. Right? He became — of a — a replacement costs — if you look at replacement costs: \$18 billion of replacement cost. Right? So he's got — on a replacement-cost basis, an \$18 billion ship. You know, the President Gerald Ford — very expensive. That's, you know, the nearest thing I can think of. But they're spending money on that one like nobody's ever seen.

So, he made a mistake. He made a mistake. And maybe we're going to make that mistake not destroy his life.

Q Does that mean you would reinstate him, Mr. President?

THE PRESIDENT: Okay, a couple of more. A couple of more. Go ahead.

Q Mr. President, you mentioned medical professionals and compared them to soldiers going onto the battlefield.

THE PRESIDENT: Yeah.

Q Many doctors and medical workers today — some of them seeing pay cuts. They're going into a sort of environment where they're concerned about their own health, their family's livelihood —

THE PRESIDENT: I know.

Q — if something were to happen to them.

THE PRESIDENT: Very much on my mind.

Q As part of this phase four, are you going to prioritize —

THE PRESIDENT: It doesn't have to be phase four. I think it could be a separate phase when it's all over. Right now, I don't think they want to think about it. These people don't want to think about it. These people are incredible. They're not thinking about, "How much am I getting paid?" These people are incredible. I've seen it. I see the spirit. I hear about it all the time from Mike, from the Admiral. I hear about it all the time. These people are incredible.

When it's all over, I do want to seriously think — maybe in the form of bonuses. These people are — what they've done is incredible.

I just — I just admire the attitude and I've said it. I just — they walk into those hospitals and they are seriously — you know, one of the things that came up with the Comfort, the ship, is that when we — we fulfilled the request of Governor Cuomo and Governor Murphy — and they're going to be splitting it. But, you know, a lot of the things happen to ships when you do the — you know, it's a lot of — they didn't want to do this. In fact, they specifically didn't want to do this: have patients that were affected with this horrible disease or whatever — the plague — because, frankly, it's a plague. That's exactly what it is. You'd read about it in the old days. The plague. And that's exactly what it is.

But we're doing it. But when I see the bravery of these people walking through doors without their stuff — I mean, they're half — they're just getting — they're not standing outside, "Hey let's get ready. Let's..." They're running through doors, putting on the stuff. It's not even on. I think it's incredible.

I'm telling you, the nearest thing I can think of is soldiers in battle and soldiers going right into battle, because that's what they're doing. It's really — in many ways, it's the same thing.

All right. How about one more?

Q Mr. President, one more question. Mr. President, you may have seen this: The Masters Tournament has been rescheduled to November. Two questions: A, is that an outgrowth of your conversation that you had with sports commissioners on Saturday?

THE PRESIDENT: Could be. I hope it's rescheduled. I hope — I hope football is able to start. I hope baseball can get to play a little bit. I hope basketball can maybe do their playoffs.

Q What about the — Mr. President?

THE PRESIDENT: I mean, hey, I have no — I have no interests or anything other than I want what's good for the country.

Q What about the U.S. Open, which you've attended many times?

THE PRESIDENT: Yeah, a lot of people are tired — yeah, a lot of people are tired of looking at games that are five years old. I looked the other day, I saw somebody, I said, "Wow, he looks great." I forgot. I said, "Oh, that was nine years ago." You know, I said, "He's really in great shape." Well, not in a great shape now, but he was in great shape then. It was nine years ago.

You know, you get tired of looking at 9-year-old baseball games and — and playoff games that took place 12 years ago. I don't have much time to do that, frankly, but that's what people are doing, and they want to see sports. Sports are a great thing for this country.

And I hope football can start. And I told them, "I think you might be able to." They may very well be able to. I hope they can start and I hope they can start with people in the stands. You know, we're not going to be separated. But you have seats. Those seats are meant for people to sit next to each other. And when this virus is gone, people are going to be sitting next to each other.

And just for the restaurant industry, so they understand, when the virus is gone, people are going to be sitting next to each other. One man said, "I have a 200-seat restaurant. It's been great. But if I go by these rules, those 200 seats goes down to 60." I said, "No, no. You have a 200-seat restaurant. That's what you have." But we have to wait till the virus goes away. It wouldn't even do well at 60. Frankly, there's a warmth to it also. There's a warmth. But not when we have the virus in the air.

Well, ladies and gentlemen, thank you very much. So I'm going to let our Vice President take over. He's got some really interesting numbers, statistics. And I want to thank the Admiral. I want to thank Tony and Deborah and everybody else. I want to thank everybody that's working. And I really do — I see a lot of tremendous things happening. And the therapeutics — the call I had today was one of the most exciting calls I've had in a long time.

And again, I want to wish my best to the UK and the family of Boris Johnson. And we just hope he's going to be okay because he's — he's a fine guy.

Thank you very much, everybody. Thank you. Thank you, Mike. Thanks.

THE VICE PRESIDENT: Thank you, Mr. President.

A few updates on the activity of the White House Coronavirus Task Force, then I'm going to ask Dr. Birx to speak about what we're seeing in the numbers.

We know we are at the beginning of what's going to be a very tough week in America. But as Dr. Birx will reflect, because the American people have been embracing social distancing, putting into practice the advice of state and local leaders and the President's coronavirus guidelines for our country, as Dr. Birx will describe, we are not only seeing remarkable progress in Washington State and in California, where the numbers remain low and steady. That's a great tribute to the people of both of those states and to all of their dedicated healthcare workers. But we're also beginning — we're beginning to see a leveling just at the very beginning. And she'll reflect on those in just a few moments.

A couple of quick updates: At the present moment, the President has approved 50 major disaster declarations and will likely be issuing a disaster declaration for the state of Minnesota before the end of the day. We've distributed more than \$4.1 billion to states. And right after our incredible healthcare workers, we couldn't be more proud of more than 21,000 National Guard that have been activated and are working in states all across the country.

During my conference call today, I learned that Governor Brian Kemp is actually using the Georgia National Guard to sanitize and clean up nursing homes. But National Guard are being deployed in a variety of ways all across the country. And to them and to the families of all these citizen soldiers, you have our admiration and our respect.

As the President mentioned, our focus remains on the New York metro area, New Jersey, Louisiana, and then, Michigan and Illinois. We're watching every area of the country, but those are the priorities today.

And in that spirit, I spoke today, as the President did, with Governor Cuomo of New York. The President made the decision to open up the USNS Comfort to COVID patients. And he also informed the governor of New Jersey that we would be taking New Jersey COVID patients. So now there will be two facilities: one at the Javits Center that's all COVID, and in the USNS Comfort that will be managing COVID patients.

At the present moment, there — by this evening, there will be 2,179 medical military personnel in New York City. And over the next two days, that number will rise to 3,000.

Speaking with the governor, speaking with Mayor de Blasio, the President and I were informed that while we have surged ventilators, we have surged personal protective equipment, that sending in some relief for healthcare workers was vitally important. And so, again, I want to emphasize that those are medical personnel — doctors and nurses and medical assistants — who are on the scene now and will continue to arrive to a total number of 3,000.

I spoke to Governor Phil Murphy of New Jersey. New Jersey is very much in the forefront of the coronavirus in America, today. We want to — want to commend the governor for his extraordinary leadership in the state.

During our briefing today, we learned about the progress that they were making and also about the governor's decision to temporarily reactivate retired healthcare personnel in the state. And just as a reminder of all that we're dealing with, this weekend, Governor Murphy told me that New Jersey surpassed the number of lives that were lost on September 11th — to the state of New Jersey. And it breaks our heart to think of that. And our hearts go out to all of the families of the more than 10,000 Americans who have succumbed to the coronavirus.

We also — as the President said, we express our gratitude to governors in Oregon and Washington State yesterday for donating ventilators to help the states at the epicenter of the coronavirus. Governor Gavin Newsom of California donated 500 ventilators. And I just learned that those will be going — 200 to the state of Maryland, 50 to the District of Columbia, 100 to the state of Delaware,

100 to Nevada, and we'll also be deploying the remaining 50 to the Northern Marianas Islands and to Guam.

And we want to thank Governor Gavin Newsom. The State of California has provided extraordinary and compassionate leadership for their citizens. They're making progress there.

As the governor said the other day, they're not out of the woods yet, but the numbers speak for themselves. And the generosity of the people of California and the governor is gratefully received.

Beyond that — before I recognize Dr. Birx, let me — let me just say that at the beginning of this challenging time, we want to — we want to challenge every American to continue to do what every American can do. And clearly, what we see in Washington and California, and what we are just beginning to see elsewhere, is put into practice the social distancing recommendations of the coronavirus guidelines for America. Listen to your state and local authorities. We really do believe that while this will be a week of heartache, it also is a week of hope.

And as we see some of the cases beginning to level, just for a day or two, it is our hope that what we have seen begin in the greater New York area and even in Louisiana and elsewhere will become a trend. But it only becomes a trend if every one of us continues to take ownership and continues to do our part for this “30 Days to Slow the Spread.”

With that, I'll recognize Dr. Birx for the latest data. And then we'll take questions.

DR. BIRX: Thank you, Mr. Vice President. I think you heard very clearly our concern in the New York-New Jersey metro areas; this also includes Connecticut and Long Island. As we talked about, we did see a significant increase in Sussex County over the weekend.

The weekend numbers are always difficult — I want to be clear on that — because sometimes case reporting is not as accurate over the weekend. So we'll be watching very closely today's numbers and Tuesday's numbers. We're also very, of course, focused on the New Orleans metro area, and that includes the three parishes of Jefferson, St. John the Baptist, and New Orleans proper, and, of course, the Detroit area, which is Oakland and Wayne.

As we mentioned before, we're continuing to track very closely out of concerns of it potentially reaching logarithmic phase in the Chicago metro area, the Boston metro area, the D.C. and

Baltimore metro area, Indianapolis, the Denver area, and two regions of Pennsylvania, Philadelphia and the Pittsburgh area, as well as Dallas and Houston in the Texas area.

I had a very encouraging call because we also don't want to miss anything. Remember, I showed you a lot of states were very much under 25 and 50 cases for 100,000. There were some — a few standouts that we were concerned about, which was Vermont, New Hampshire, Idaho, and Montana.

We had excellent calls today with their health commissioners and their — really were able. They're on top of the situation. These were micro outbreaks that occurred due to ski events and weddings and nursing homes, and they were able to describe in critical detail the incidents and how they're tracking and tracing. So they are still doing full contact tracing through those areas. And I just want to applaud these. This is both a rural and metro problem, and I really want to applaud how many of the states, that may have smaller populations, are approaching this.

That gives us encouragement of how we can talk about beginning surveillance activities. At the same time, we're following these very clear outbreaks and ensuring that there's full supplies based on the very granular data that we're utilizing. And I just want to thank the mayors and governors who get us that granular data and allow us to make these deeper interpretation across all of the United States.

We know each governor is concerned about their areas, but these metro areas cover different areas. So the Philadelphia area also includes southern New Jersey and Delaware, and so we have to really look at things very much as both the metro and the communities that surround those metros. And so all of those people, we ask you again, throughout the United States, to follow these very clear guidance.

I want to just recognize both HHS — and you heard about the work that Admiral Giroir is doing, the work that Dr. Hahn, and Administrator Seema Varma — Verma are doing, and also Administrator Engels in the work of HRSA to really ensure that our federally funded clinics are actively engaged in all of these aspects.

But I also want to recognize the military: the Medical Corps, the Nursing Corps, and the Medical Subspecialty Corps. These were my brothers and sisters for 29 years. It is highly unusual for the active force to be called into a domestic situation. I think that shows you how seriously we're

taking this at the federal government level. In my 29 years in the military, I was never deployed domestically. So this is showing you how serious of an event we take this. If the military is deploying domestically, it is another reason for every American to be following these guidelines.

Finally, CDC quietly launched a new website. It's — if you go to CDC.gov and you go to "COVID-19," you can find their surveillance data. This surveillance data is bringing together our influenza-like illnesses with their syndromic management databases so that you can track the respiratory disease across the United States. The states are used to using this system. It's in emergency rooms. It's in hospitals. It's in doctors' offices. And it gives you insight, and you can see very clearly influenza A peak, you can see the influenza B peak, and now you can start to see the respiratory disease from this current outbreak.

These are the systems that exist within the United States that will be strengthened in order for us to do comprehensive surveillance. So I just want to assure the American people: While we're working on these outbreaks, we're also working on bringing new systems together that have a comprehensive look across the country, building on the strong work of CDC as a public health institution so that we can work county by county, community by community, state by state to really understand where this virus is and where it will be, but also as an early alert for us in the future.

So I just want to assure the American people that as we're working on the crisis of today, we're looking to the future to ensure we have the systems in place to bring those early alert systems together while we work on the antibody testing and while we work on continuing, spreading, and increasing the diagnostic capabilities that you see presented here.

Thank you.

THE VICE PRESIDENT: Thank you, Deb. And Admiral Giroir spoke several times when the President was with us, so he'll be here for questions as Deborah Birx will.

But Doctor — Dr. Fauci, your thoughts. And then we'll — we'll take some questions.

Go ahead.

DR. FAUCI: No — no, actually. We're —

THE VICE PRESIDENT: Please.

DR. FAUCI: I just wanted to — okay, I will. (Laughs.) It related to something I said yesterday about that somewhat paradox of everything going up at the same time that the feeding into this engine of this virus is starting to show some signs.

So Governor Cuomo today reported an interesting data from New York, namely that the number of hospitalizations, the number of admissions to intensive care, and the number of requirements for intubations over the last three days have actually started to level off.

So, again, everybody who knows me knows I'm very conservative about making projections, but those are the kind of good signs that you look for. You never even begin to think about claiming victory prematurely. But that's the first thing you see when you start to see the turnaround.

That doesn't mean we don't have a lot of work to do. That tells me — instead of saying, "Hm, that's pretty good," it's, "We got there through mitigation. We cut off the stream of people who ultimately required hospitalization, required intubation, required all of the kinds of extreme methods."

So we just got to realize that this is an indication — despite all the suffering and the death that has occurred — that what we have been doing has been working.

So the call that I say every time I get to this podium is, "Just keep it up," because this is going to get us out of it. This is our best and only great public health tool.

Q And aren't we starting to see that across many states? We're seeing the level of hospitalizations and deaths is lower than what we anticipated.

DR. FAUCI: Well, you're going to see it most dramatically, Jon, in a place like New York where you see it goes up at peak, and then it will hopefully — and I think it will — come down.

When you have places like Seattle, which did a — and Washington State — who did a really good job from the beginning, it never really did that. So they were able to keep it down. And on the charts that Dr. Birx showed, when you saw California and Washington State, they were fortunate they did a good job that it never really got out of hand.

So, again, this is a big country and you have a number of different metropolitan areas. I think, if we do it right, you're going to see those who have not peaked will not peak, and those who have peaked — the New Orleans, the New York, New Jersey, Chicago, Detroit, and others — you're going to see the same thing if we keep our foot on the accelerator.

Q Dr. Fauci, a quick follow-up.

THE VICE PRESIDENT: Further questions for the team?

Q I'm following up Dr. Fauci's comment earlier about what it's like going to be coming back to normal and until there's a vaccine that — there'll be gradual steps towards restoring normalcy.

Under that — you know, short of a vaccine — does putting 80,000 people, fans, spectators in a sports stadium or 25,000 politicians in an arena for a political convention this summer make a lot of sense? Do those sorts of things require a vaccine to fully protect the American populace?

DR. FAUCI: No, I don't think that you're going to have to say that the country cannot get back to a real degree of normalcy until you absolutely have a safe and effective vaccine. It will be really evaluating the kinds of things.

And that's the reason why — it was discussed up here — why it's so important to have an antibody test so you know what the penetrance is in society. And then we have a situation where we don't ever want to get to have to mitigate. We want to be able to contain. And by the time we have to face what's going to happen with this going back to normality, we will have in place the capability of identifying, isolating, contact tracing so that it never gets out of hand.

Ultimately, the showstopper will be obviously a vaccine where you can vaccinate people and you won't have it. There's going to be another issue that's going to be important and it has to do with somewhat of a comparison, for example, with influenza.

We go through multiple cycles of influenza. There's always a degree of background immunity in the population. I mean, that will ultimately happen if we get a situation where we get back to normal.

Now, I hope we don't have so many people infected that we actually have that herd immunity, but I think it would have to be different than it is right now.

So, again, remember, when you say “normalcy” — I mean, we could get back normally, economically and otherwise, without necessarily saying we’re going to forget about the virus. We have to pay attention to this because we’ve had a very bad experience with this virus.

Q Dr. Fauci, can I follow up on that, please?

Q I have a quick follow-up.

THE VICE PRESIDENT: Go ahead, please.

Q Thank you. And this is for the Vice President, for Dr. Birx, and Dr. Fauci. But —

THE VICE President: Go ahead.

Q — can you give us a sense of — and I know you don’t want to make any projections — but where we are with the numbers? Because we saw that horrible number today. More than 10,000 deaths now in the U.S. Are we on track for those best-case scenario numbers that you had laid out, the hundred thousand? Or are we potentially coming in lower than that at this point, given some of what you’re seeing?

DR. BIRX: You know, it just gives me an opportunity to thank and respect the modelers who have really worked on this, because there’s — a large number of them have worked very hard on — and done a lot of predictions.

And what we did is did — we did predictions of predictions. We like to integrate data. And so that’s where you come up with these numbers. I think Dr. Fauci and I both strongly believe that if we work as hard as we can over the next several weeks, that we will see potential to go under the numbers that were predicted by the models.

And I think that is really two things: It is the extraordinary compliance of the American people and the diligence that they have mitigated with. Because remember, we are doing this strictly by behavior change. It’s very hard to change trajectory of viruses on just behavior change. We have had difficulty in our past doing that. So that’s what we’re doing and that’s what the American people are doing.

But the other side of that is the incredible insights that Washington State and others are providing on how to better care for the patients in the hospital. So those two pieces are coming together that could have a dramatic impact on the predictions of the mortality from this disease.

DR. FAUCI: So, I'm glad you asked that question because I've said it a couple of times here. I want to say it again. Repetition is good. Is that models are good; they — they help us to make projections. But as you get data in, you modify your model. And I've always said data always trumps models. Always.

So what I feel, and I believe that Dr. Birx also feels, that I don't think anyone has ever mitigated the way I'm seeing people mitigate right now. This has never happened in this country before. So I am optimistic — always cautiously optimistic that if we do what I've been talking about over the past few minutes, we can make that number go down.

I don't accept every day that we're going to have to have 100- to 200,000 deaths. I think we can really bring that down, no matter what a model says, because when the data comes in, they'll start to say, "You know, maybe you are essentially overshooting the model." And I think that's where we can go. That's the reason why I like to always get up and tell the American people: It's the virus doing what the virus wants to do, and it's we, as a society, doing what we can do.

THE VICE PRESIDENT: And let me just amplify that from a layperson's perspective: The American people are doing it. I mean, the initial data, what we've seen in California and Washington, support the fact that the American people are doing these things, which is nothing short of loving your neighbor.

I mean, the truth is, the threat of serious illness for most Americans is relatively low. But the threat of serious illness for seniors with underlying health conditions or anyone with an immunodeficiency is very high.

And when we see Americans putting these principles into practice the way you all have been, it really means you're considering others more important than yourself. And I have to tell you, for the President, for me, and for all of us, it's deeply inspiring. We just need to continue to do it for all of these 30 days, and we'll bring that number down.

How about a couple more? Please.

Q So, Mr. Vice President, when will you know — when do you think that you will know whether or not you will have to extend those 30-day guidelines, or if 30 days will be enough?

THE VICE PRESIDENT: Well, the experts told us that somewhere around the middle of this month would be the peak.

And as we begin to see a couple of days that might be the beginning of leveling, we're going to — we're going to watch that carefully and we're going to bring that information to the President. But for now, the decision is, and the request of every American, is to continue to put into practice all of the President's coronavirus guidelines, "30 Days to Slow the Spread."

And for all of you in areas that have been impacted broadly by the coronavirus: Listen to what your state and local authorities are asking you to do. It will protect your health, your family's health, and it will save lives.

Let's do a couple more, and for our panel, if you'd like. Jeff.

Q This is more of a personal question. But, Dr. Birx, can you tell us if your granddaughter is okay? And —

THE VICE PRESIDENT: Yeah. I'd like to hear it too.

DR. BIRX: Well, thank you. Due to her — the great care of my 91-year-old nurse mother and my daughter, she's down to like 100 to 99 now. But it was three days of 104 and 105, which is — you know, babies can do that, but it's very scary, especially when I couldn't assure myself that she was fine.

So it was just some sleepless nights for me, and I think them, as they kept her fever down. So thank you for asking.

Q Did she have this — the virus? Or —

DR. BIRX: Oh, no. I'm sure it's roseola or something. They have not been out of the house. They are not allowed out of the house. (Laughter.) They've got two granddaughters under — one, two and a half almost; and one only 10 months. And my 91-year-old and 96-year-old. So no one is

allowed in that house or out of that house because there's too much precious cargo inside the house. (Laughter.)

THE VICE PRESIDENT: How about — how about one more — one more question, and we'll let you all —

Q Thank you, Mr. Vice President. For whoever wants to answer this, it's technical question. So FEMA says that it is in the process of distributing 90 percent of each state's allocated supplies for the National Strategic Stockpile. And that allocation is determined based on population by the last census in each state. And the other 10 percent, it says, is going to frontline healthcare workers serving in the federal response efforts.

So where — where are those healthcare workers in the federal response? And do you envision a scenario in which you could start giving states more supplies from the National Strategic Stockpile?

THE VICE PRESIDENT: You know, it's a really good question. And let me say, the Strategic National Stockpile — and I'm going to have Admiral Giroir speak about his piece of that — is — has been largely deployed. We are continuing to replenish it in part with a small portion of what's coming in from around the world. You've heard about our air bridge — now more than 50 flights that have been scheduled that are bringing millions of supplies into the United States.

What we're doing is taking less than 10 percent of that, put it into the Strategic National Stockpile so we have that to basically provide for states on an as-needed basis. But the other 90 percent that — that system that I just described earlier when the President was here — is working with the six major medical distributors in the country to deploy those resources to New York, New Jersey, Connecticut, Louisiana, Michigan, Illinois, the exact priority that you just heard Dr. Birx describe and that the data informs. And those decisions are being made every single day.

And so while — while — if a hurricane hits Florida, or tornadoes or flooding tear through the state of Indiana, we're very accustomed to FEMA coming in, drawing from the National Stockpile, and providing specific resources.

In this case, with a nationwide effort, what President Trump directed us to do was literally marshal the resources of the full economy to be able to make sure that we can meet the needs for personal protective equipment, ventilators, and all manner of supplies. And we're doing that, in a small way, through the Strategic National Stockpile, but in the largest way, through that control tower system

that Admiral John Polowczyk is running for us that is deploying those resources and making sure they're going straight to where they need to go.

And as I said earlier, those decisions are being informed by the data, and they're literally being made by our team at FEMA on a daily and sometimes hourly basis. And we'll continue to keep you informed, as we did today, about where some of those are going.

But let me let Admiral Giroir finish that answer.

ADMIRAL GIROIR: I don't really have much more to add to that. The Vice President is certainly well informed about that. And I want to assure you that all the sourcing around the world, if it's there, we're putting it in our supply chains. We're buying more. Manufacturers are stepping up to the plate. And this is going not just by percent allocation, but it's going to the exact places that need it, in the quantities that they need to take care of patients.

And we want to make sure — this is a two-way street. We get the — get the data in from individual hospitals to know exactly what their burn rate is, exactly what they need. And we want to make sure that they feel comfortable that they're going to have supplies, because they will. Because part of this is about potential shortages in other place — some places. Most of it's about a fear of a shortage.

If I'm a physician in an ICU, and I'm not sure that it's going to be there, that's going to scare me. It's going to scare my nurses. So we want everyone to have that assurance that we will provide you what you need over weeks, periods of time, exactly to your need.

And Admiral Polowczyk and his team — and, again, it's all military in there. I mean, he is the logistics guy for the Joint Chiefs of Staff, right? This is what he does. He is a wizard. He has a — there are more stars around me in the DOD part of the military than I've generally seen outside of the Pentagon. This is really being run as a military operation.

I'm in the U.S. Public Health Service. So we're part of HHS. The Surgeon General and I have the honor of running that service. We are shoulder-to-shoulder in the field, in the military hospitals with everyone else. There are only 6,100 of us; 3,000 are doing direct patient care on a daily basis. We take care of the Indian Health Service, the Bureau of Prisons, those in detention at the border, et cetera. That's what we do.

The other 3,000 — over 2,000 of those are in the field already, taking care of patients directly, and we have more going out the door every day.

Q And if I could just to follow up on that very quickly then. Is it even worth then governors writing into FEMA if they've already received their 90 percent allocation and you're getting data directly from the hospitals to ask for more at this point?

ADMIRAL GIROIR: This has been a very cooperative interaction. I bet I talk to five governors a day, and we talk out — we talk out the issues and understand what they — what they perceive in their state. They often help us — help point us to particular areas that may — that they feel need more attention or that needs more communication. So it's been very productive. I — you know, I have to look up what governor goes to what state because I'm not — that's not my world. But it's been a very productive interaction. So I think all of this is necessary.

I'm on almost every governors call with the Vice President. They're very meaningful. They're impactful. They're informative. They're communicative. We talk to each other. But then we do get down to the individual hospital level, because when the rubber meets the road, you got to know what the docs, nurses, respiratory therapists — the people who clean the rooms, who are an important part of the team; I want them to come to every work saying, "You know, it's not that I clean the room, I'm saving lives today." And they are saving lives by keeping the viruses off the surfaces and reducing transmission.

So you've really got to get that granular. And we're to a point with Admiral P's — you have two admirals with the worst pronounced names in the world — so, Admiral P, Admiral G. But Admiral P's team really has this covered down to the individual hospital.

Q Thank you, sir.

THE VICE PRESIDENT: And let me say, just by way of closing, because I thought — I thought that last question was helpful.

We're interacting with governors every day, seven days a week, and we welcome that. And while there are some resources in the Strategic National Reserve — we spoke about ventilators; we have some 9,000 ventilators on standby — we also have this vast array through the commercial system

that when we hear from governors, we're identifying the needs. They're working every day to identify their hospital capacity.

We went over governors today saying, "We need to know — we need to know what your capacity is, what your normal capacity is, what your surge capacity is. We need to understand what your equipment complement is across the state." And governors have been doing this. They've been assembling that information.

But I want to tell you the governors across this country in both political parties have been doing a remarkable job. And the President is grateful and I'm grateful.

And I just want to know that those healthcare workers that they're serving, and the families that those healthcare workers are serving, can be confident that we are going to do whatever it takes to get them what they need, when they need it.

And every governor is working in that regard, every hospital administrator is working in that regard, and the opportunity that we have — because the American people are stepping up so strongly and putting others ahead of themselves — in most cases, they're acting in a way that that puts the health of others first. We're — we're more confident today than ever before that we're going to be able to provide our healthcare providers and the states that are impacted by the coronavirus with the resources and the support they need to meet this moment. And we're just going to continue to work our hearts out and make that a reality.

You know, I — but I have to end with just a reference to the healthcare workers. You've heard these doctors talk about them. They're all healthcare people. You've heard about the President talk about them. You all have seen them. And to think what these healthcare workers, doctors, and nurses, and medical assistants are doing every day — it inspires us to get up early, to stay up late, to keep working to make sure they have what they need to be able to continue to do their job courageously.

And I know I speak on behalf of every American when I say how grateful we are for each and every one of you. And in this very special Holy Week, I know millions of Americans are praying for our healthcare workers.

I saw a picture that I sent out last night on Twitter. It was an article about a series of cities where doctors and nurses had paused to pray for the patients and the families that they were ministering to. And I just want to say to all those healthcare workers: I know there is a chorus of prayer going up every day for all of you. And with your continued courageous service, and with God's help, we'll get through this and we'll get through it together.

Thank you all.

END

7:51 P.M. EDT