

Subject: FDA FOIA 2020-2836
Date: Thursday, May 13, 2021 at 12:04:32 PM Eastern Daylight Time
From: Schlaifer, Meredith
To: FOIA
Attachments: image001.png, image002.jpg, image003.jpg, image004.jpg, image005.jpg

EXTERNAL SENDER

Dear Requester,

A number of documents are now posted in the FDA Electronic Reading Room. Documents that may be responsive to your request, 2020-2836, can be found at the following links:

<https://www.fda.gov/media/148492/download>

<https://www.fda.gov/media/148493/download>

The full eReading Room may be found at <https://www.fda.gov/regulatory-information/freedom-information/electronic-reading-room>.

Please notify us at Meredith.schlaifer@fda.hhs.gov by June 11, 2021, if you would like to continue to keep your request for records open.

Thank you,

Meredith J. Schlaifer, M.S., J.D.

FOIA Officer, Office of the Commissioner

Division of Freedom of Information

U.S. Food and Drug Administration

Tel: 301-796-0583

meredith.schlaifer@fda.hhs.gov



From: [Caliguiri, Laura](#)
To: [Kimberly, Brad](#); [Lynch, Sarah](#); [Capobianco, Abigail](#)
Subject: FW: What You Need To Know | President Trump's Coronavirus Response Efforts
Date: Tuesday, March 31, 2020 8:53:05 PM

From: Mitchell, Austin A. EOP/WHO (b) (6)@who.eop.gov>
Sent: Tuesday, March 31, 2020 8:51 PM
Subject: What You Need To Know | President Trump's Coronavirus Response Efforts

What You Need To Know | President Trump's Coronavirus Response Efforts

President Trump and his Administration are working every day to protect the health and wellbeing of Americans and respond to the coronavirus.

WHOLE-OF-GOVERNMENT APPROACH

- The President signed the CARES Act, providing unprecedented and immediate relief to American families, workers, and businesses.
- President Trump declared a national emergency, inviting States, territories, and tribes to access over \$42 billion in existing funding.
- President Trump signed initial legislation securing \$8.3 billion for coronavirus response.
- President Trump signed the Families First Coronavirus Response Act, ensuring that American families and businesses impacted by the virus receive the strong support they need.
- To leverage the resources of the entire government, the President created a White House Coronavirus Task Force to coordinate response.
- The Vice President named Dr. Deborah Birx to serve as the White House Coronavirus Response Coordinator.
- At the request of President Trump, FEMA is leading federal operations on behalf of the White House Coronavirus Task Force.
- FEMA's National Response Coordination Center has been activated to its highest level in support of coronavirus response.
- The President held a teleconference with other G20 leaders to coordinate

coronavirus response.

- President Trump signed an executive order giving the DoD and DHS the authority to activate the ready reserve components of the armed forces to assist with coronavirus response.

SUPPORTING STATE AND LOCAL EFFORTS

- President Trump issued a letter informing our nation's governors that the Administration is developing new guidelines for state and local policy makers.
- Through the CARES Act, we more than doubled the funds available through the President's Emergency and Disaster Declarations to help State, local, and tribal leaders effectively respond.
- The President has approved major disaster declarations for heavily impacted states.
- The Administration is covering costs of deploying National Guard units to assist with response efforts in hard hit states, while ensuring governors remain in command.
- The President has held multiple teleconferences with our nation's governors to coordinate response efforts and offer his full support.

TRAVEL RESTRICTIONS

- In January, President Trump reacted quickly to implement travel restrictions on travel from China, buying us valuable time to respond to the virus.
- The President has announced further travel restrictions on global hotspots, including Europe, the United Kingdom and Ireland, and Iran.
- American citizens returning from travel-restricted countries are being routed to specific airports, where they can be screened and isolated as needed.
- The United States reached mutual agreements with Mexico and Canada to restrict non-essential travel across our northern and southern borders.
- The Administration announced it will expeditiously return aliens who cross between ports of entry or are otherwise not allowed to enter the country, as the facilities in which these aliens would be held cannot support quarantine for the time needed to assess potential cases.
- The Administration raised travel warnings to their highest level for other hot spot locations, like Japan and South Korea.
- The President has expanded airport screenings to identify travelers showing symptoms and instituted mandatory quarantines.
- The State Department issued a global level 4 travel advisory, urging Americans to avoid all international travel due to the coronavirus outbreak worldwide.

- The State Department has worked to safely repatriate thousands of Americans from around the world.

EXPANDING TESTING ACCESS

- The FDA has issued emergency approval for multiple new commercial coronavirus tests, including some that deliver results to healthcare providers within minutes.
- The President secured legislation that will ensure Americans are able to be tested for free.
- The Administration is working with state and local partners and the private sector to open up drive-through testing sites.
- The Administration worked with Apple to launch an app and website to help Americans determine if they should seek care for coronavirus, and provide them guidance on next steps.
- HHS is providing funding to help accelerate the development of rapid diagnostic tests for the coronavirus.
- The FDA cut red tape to expand testing availability.
- Admiral Brett Giroir – the Assistant Secretary for Health and head of the Public Health Service – has been appointed to coordinate coronavirus testing efforts.
- The FDA is empowering states to authorize tests developed and used by laboratories in their states.
- The Department of Defense has set up 15 coronavirus testing sites worldwide.
- The President signed legislation requiring more reporting from state and private labs to ensure our public health officials have the data they need to respond to this outbreak.
- DoD and HHS worked to airlift hundreds of thousands of swabs and sample test kits from Italy to the United States.

HELPING FAMILIES AND WORKING AMERICANS

- President Trump signed historic legislation to provide direct payments to Americans, significantly expand unemployment benefits, and more.
- The Administration negotiated legislation which will provide tax credits for eligible businesses that give paid leave to Americans affected by the virus.
- The Department of Labor issued guidance to help inform Americans about the paid family and medical leave available to them.
- The Administration took action to provide more flexibility in unemployment insurance programs for workers impacted by the coronavirus.

- The Treasury Department moved tax day from April 15 to July 15.
- President Trump signed legislation providing funding and flexibility for emergency nutritional aid for senior citizens, women, children, and low-income families.
- USDA announced new flexibilities to allow meal service during school closures.
- USDA announced a new collaboration with the private sector to deliver nearly 1,000,000 meals a week to students in rural schools closed due to the coronavirus.
- USDA launched a partnership with Panera Bread and the Children's Hunger Alliance to provide meals to children across Ohio, with more states to come.
- HHS has announced \$250 million in grants to help communities provide meals for seniors.
- The Administration is halting foreclosures and evictions for families with FHA-insured mortgages.
- The Department of Labor announced up to \$100 million in dislocated worker grants in response to the coronavirus national health emergency.
- The White House worked with the private sector to launch a central website where families, students, and educators can access online education technologies.
- President Trump signed legislation to provide continuity in educational benefits for veterans and their families who attend schools that have had to switch to online learning.
- The Department of Education has given broad approval to colleges and universities to allow them to more easily move their classes online.
- The Department of Education set interest rates on all federally-held student loans to 0% for at least 60 days.
- The Department of Education announced borrowers will have the option to suspend their payments on federally-held student loans for at least two months.
- The Department of Education is providing waivers for federal testing requirements to states that have had to close schools.

SUPPORTING IMPACTED BUSINESSES

- President Trump signed legislation providing almost \$350 billion in loans for small businesses and much needed payroll tax relief.
- The President secured legislation giving the Treasury and Federal Reserve \$500

billion to provide liquidity and purchase business, municipal, and State debt.

- Thanks to legislation signed by President Trump, the Federal Reserve can leverage more than \$4 trillion in funds if needed during this crisis.
- The Small Business Administration has announced disaster loans which provide impacted businesses with up to \$2 million.
- SBA relaxed criteria for disaster assistance loans – expanding small businesses' access to economic assistance.
- The President directed the Energy Department to purchase large quantities of crude oil for the strategic reserve.
- President Trump has held calls and meetings with business leaders from the pharmaceutical industry, airlines, health insurers, grocery stores, retail stores, banks, and more.
- The Treasury Department approved the establishment of the Money Market Mutual Fund Liquidity Facility to provide liquidity to the financial system.
- The Export-Import Bank announced four new temporary relief programs to provide maximum financing flexibility and inject liquidity into the market.

INFORMING THE PUBLIC

- The Administration launched a website – coronavirus.gov – to keep the public informed about the outbreak.
- The President announced he is extending CDC guidelines for 30 days to slow the spread of the virus.
- The President launched a partnership with the Ad Council, media networks, and digital platforms to communicate public services announcements about the coronavirus.
- The President announced guidelines for Americans to follow and do their part to stem the spread of the virus.
- The Task Force is holding nearly daily press conferences to provide the American people with the latest information.
- The Task Force recommended mitigation strategies to heavily impacted communities, like those in New York, Washington, and California.
- CMS announced guidance to protect vulnerable elderly Americans and limit medically unnecessary visits to nursing homes.
- President Trump's PREVENTS initiative started a new public awareness campaign to promote emotional wellbeing for veterans during the coronavirus pandemic.

SUPPORTING PATIENTS AND HEALTHCARE PROVIDERS

- The President worked with Congress to secure \$100 billion for out healthcare providers.
- In January, the Administration declared the coronavirus to be a public health emergency.
- The President donated his fourth-quarter 2019 salary to the Department of Health and Human Services for coronavirus response efforts.
- The Army Corps of Engineers and FEMA are helping to build temporary hospitals and medical facilities in hard hit areas.
- The Vice President penned a letter to hospital administrators asking hospitals to report testing data to HHS to help inform policies.
- The President took action to give HHS authority to waive rules and regulations so that healthcare providers have maximum flexibility to respond to this outbreak.
- CMS issued sweeping regulatory changes to increase hospital capacity, rapidly expand the healthcare workforce, and cut paperwork so doctors can put patients first.
- HHS is providing funding to help healthcare systems across the country quickly prepare for a surge in coronavirus patients.
- CMS is giving flexibility to Medicare Advantage and Part D plans to waive cost-sharing for coronavirus tests and treatment.
- The President announced that Humana and Cigna will waive co-pays, coinsurance, and deductibles for coronavirus treatments.
- CMS created new billing codes for coronavirus tests to promote better tracking of the public health response.
- The White House Office of Science and Technology Policy coordinated with the NIH, the tech industry, and non-profits to release a machine readable collection of 29,000 coronavirus-related research articles, which will help scientists discover insights to virus' genetics, incubation, treatment, symptoms, and prevention.
- The White House launched a new public-private consortium to help provide coronavirus research projects access to powerful supercomputer resources.
- The Administration announced that health plans with health savings accounts will be able to cover coronavirus testing and treatment without co-payments.
- CMS dramatically expanded telehealth for Medicare beneficiaries, ensuring more patients can access their doctors remotely while avoiding exposure.

- HHS lifted HIPAA penalties to enable healthcare providers to expand telehealth access for patients.
- The FDA took action to allow expanded use of devices to monitor patients' vital signs remotely, reducing hospital visits and minimizing risks of exposure.
- The VA established 19 emergency operations centers across the country and put in place visitation restrictions to limit patients' exposure.
- Thanks to a waiver from the Office of Personnel Management, the VA is working to rehire retired medical personnel during the coronavirus outbreak.
- CMS and the VA are working to limit nonessential, elective medical procedures to free up healthcare resources.
- The Department of Defense issued guidance to delay elective medical procedures at military facilities in order to preserve healthcare resources.
- The Navy deployed two medical ships to help support impacted areas.
- The President announced Carnival Cruise Lines will be making ships available for hospitals to use for non-coronavirus patients.

STRENGTHENING ESSENTIAL MEDICAL SUPPLIES

- The Administration mobilized a Supply Chain Stabilization Task Force led by Rear Admiral John Polowczyk.
- FEMA is working to distribute ventilators and other critical supplies to hard hit states.
- FEMA launched Project Airbridge to help quickly airlift critical supplies across the country.
- The President invoked the Defense Production Act, providing a number of authorities that can be used as needed.
- The President took action under the Defense Production Act to compel General Motors to accept, perform, and prioritize Federal contracts for ventilators.
- President Trump signed an executive order providing HHS and DHS with the full authorities available under the Defense Production Act to respond to this outbreak.
- The President urged the private sector to bolster response efforts, leading companies across the country to produce more critical supplies like masks, ventilators, and hand sanitizer.
- The President signed a memorandum directing his Administration to make general-use face masks available to healthcare workers.
- HHS announced it will be purchasing 500 million N95 respirators for the

Strategic National Stockpile.

- The Department of Defense announced it will be providing 5 million respirator masks and 2,000 specialized ventilators to assist.
- The Department of Defense is procuring 8,000 ventilators worth an estimated \$84.4 million
- The President signed legislation removing restrictions that prevented manufacturers from selling industrial masks – which can readily protect healthcare workers – directly to hospitals.
- The FDA gave emergency approval to a new system to sterilize N95 masks, helping hospitals get the most use out of their masks.
- The President signed an executive order to prevent hoarding and price-gouging of critical medical supplies.
- The Department of Justice has taken action to combat coronavirus related fraud.

DEVELOPING VACCINES AND THERAPEUTICS

- The Administration is working to help accelerate the development of therapeutics and a vaccine to combat the coronavirus.
- The FDA is evaluating existing drugs that could serve as potential therapeutics for coronavirus patients.
- The FDA approved emergency use of convalescent plasma treatments for seriously ill coronavirus patients.
- HHS accepted 30 million doses of hydroxychloroquine sulfate donated by pharmaceutical companies.
- The Trump Administration is actively working with drug manufacturers to monitor any potential drug supply chain issues.
- The Administration is expanding research and consulting with experts to better understand the transmission of coronavirus.
- The National Institutes of Health has announced the beginning of a clinical trial for a coronavirus vaccine candidate.

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From: [Caliguiri, Laura](#)
To: [Lynch, Sarah](#); [Capobianco, Abigail](#); [Kimberly, Brad](#)
Subject: FW: What You Need To Know | President Trump's Coronavirus Response Efforts
Date: Tuesday, March 24, 2020 8:36:17 PM

From: Mitchell, Austin A. EOP/WHO (b) (6)@who.eop.gov>
Sent: Tuesday, March 24, 2020 8:35 PM
Subject: What You Need To Know | President Trump's Coronavirus Response Efforts

What You Need To Know | President Trump's Coronavirus Response Efforts

President Trump and his Administration are working every day to protect the health and wellbeing of Americans and respond to the coronavirus.

WHOLE-OF-GOVERNMENT APPROACH

- President Trump declared a national emergency, inviting States, territories, and tribes to access over \$42 billion in existing funding.
- President Trump signed legislation securing \$8.3 billion for coronavirus response.
- President Trump signed the Families First Coronavirus Response Act, ensuring that American families and businesses impacted by the virus receive the strong support they need.
- To leverage the resources of the entire government, the President created a White House Coronavirus Task Force to coordinate response.
- The Vice President named Dr. Deborah Birx to serve as the White House Coronavirus Response Coordinator.
- At the request of President Trump, FEMA is leading federal operations on behalf of the White House Coronavirus Task Force.
- FEMA's National Response Coordination Center has been activated to its highest level in support of coronavirus response.

SUPPORTING STATE AND LOCAL EFFORTS

- The President has approved major disaster declarations for impacted states like New York, Washington, and California.

- The Administration is covering costs of deploying National Guard units to assist with response efforts in hard hit states, while ensuring governors remain in command.
- The President has held multiple teleconferences with our nation's governors to coordinate response efforts and offer his full support.

TRAVEL RESTRICTIONS

- In January, President Trump reacted quickly to implement travel restrictions on travel from China, buying us valuable time to respond to the virus.
- The President has announced further travel restrictions on global hotspots, including Europe, the United Kingdom and Ireland, and Iran.
- American citizens returning from travel-restricted countries are being routed to specific airports, where they can be screened and isolated as needed.
- The United States reached mutual agreements with Mexico and Canada to restrict non-essential travel across our northern and southern borders.
- The Administration announced it will expeditiously return aliens who cross between ports of entry or are otherwise not allowed to enter the country, as the facilities in which these aliens would be held cannot support quarantine for the time needed to assess potential cases.
- The Administration raised travel warnings to their highest level for other hot spot locations, like Japan and South Korea.
- The President has expanded airport screenings to identify travelers showing symptoms and instituted mandatory quarantines.
- The State Department issued a global level 4 travel advisory, urging Americans to avoid all international travel due to the coronavirus outbreak worldwide.
- The State Department has worked to safely repatriate 9,000 Americans from 28 countries around the world.

EXPANDING TESTING ACCESS

- The FDA has issued emergency approval for multiple new commercial coronavirus tests to significantly expand testing across the country.
- The President secured legislation that will ensure Americans are able to be tested for free.
- The Administration is working with state and local partners and the private sector to open up drive-through testing sites.
- The Administration is working with the private sector to develop a website that Americans can utilize to determine whether they need a test and, if so, where to

get it.

- HHS is providing funding to help accelerate the development of rapid diagnostic tests for the coronavirus.
- The FDA cut red tape to expand testing availability.
- Admiral Brett Giroir – the Assistant Secretary for Health and head of the Public Health Service – has been appointed to coordinate coronavirus testing efforts.
- The FDA is empowering states to authorize tests developed and used by laboratories in their states.
- The Department of Defense has set up 15 coronavirus testing sites worldwide.
- The President signed legislation requiring more reporting from state and private labs to ensure our public health officials have the data they need to respond to this outbreak.
- DoD and HHS worked to airlift hundreds of thousands of swabs and sample test kits from Italy to the United States.

SUPPORTING IMPACTED BUSINESSES

- The Small Business Administration has announced disaster loans which provide impacted businesses with up to \$2 million.
- SBA relaxed criteria for disaster assistance loans – expanding small businesses' access to economic assistance.
- The President directed the Energy Department to purchase large quantities of crude oil for the strategic reserve.
- President Trump has held calls and meetings with business leaders from the pharmaceutical industry, airlines, health insurers, grocery stores, retail stores, banks, and more.
- The Treasury Department approved the establishment of the Money Market Mutual Fund Liquidity Facility to provide liquidity to the financial system.

HELPING FAMILIES AND WORKING AMERICANS

- The Administration negotiated legislation which will provide tax credits for eligible businesses that give paid leave to Americans affected by the virus.
- The Administration took action to provide more flexibility in unemployment insurance programs for workers impacted by the coronavirus.
- The Treasury Department moved tax day from April 15 to July 15.
- President Trump signed legislation providing funding and flexibility for emergency nutritional aid for senior citizens, women, children, and low-income families.

- USDA announced new flexibilities to allow meal service during school closures.
- USDA announced a new collaboration with the private sector to deliver nearly 1,000,000 meals a week to students in rural schools closed due to the coronavirus.
- HHS has announced \$250 million in grants to help communities provide meals for seniors.
- The Administration is halting foreclosures and evictions for families with FHA-insured mortgages.
- The Department of Labor announced up to \$100 million in dislocated worker grants in response to the coronavirus national health emergency.
- The White House worked with the private sector to launch a central website where families, students, and educators can access online education technologies.
- President Trump signed legislation to provide continuity in educational benefits for veterans and their families who attend schools that have had to switch to online learning.
- The Department of Education has given broad approval to colleges and universities to allow them to more easily move their classes online.
- The Department of Education set interest rates on all federally-held student loans to 0% for at least 60 days.
- The Department of Education announced borrowers will have the option to suspend their payments on federally-held student loans for at least two months.
- The Department of Education is providing waivers for federal testing requirements to states that have had to close schools.

INFORMING THE PUBLIC

- The Administration launched a website – coronavirus.gov – to keep the public informed about the outbreak.
- The President launched a partnership with the Ad Council, media networks, and digital platforms to communicate public services announcements about the coronavirus.
- The President announced guidelines for Americans to follow and do their part to stem the spread of the virus.
- The Task Force is holding nearly daily press conferences to provide the American people with the latest information.

- The Task Force has recommended mitigation strategies to heavily impacted communities, like those in New York, Washington, and California.
- CMS announced guidance to protect vulnerable elderly Americans and limit medically unnecessary visits to nursing homes.

SUPPORTING PATIENTS AND HEALTHCARE PROVIDERS

- In January, the Administration declared the coronavirus to be a public health emergency.
- The President donated his fourth-quarter 2019 salary to the Department of Health and Human Services for coronavirus response efforts.
- The President took action to give HHS authority to waive rules and regulations so that healthcare providers have maximum flexibility to respond to this outbreak.
- HHS is providing funding to help healthcare systems across the country quickly prepare for a surge in coronavirus patients.
- CMS is giving flexibility to Medicare Advantage and Part D plans to waive cost-sharing for coronavirus tests and treatment.
- CMS created new billing codes for coronavirus tests to promote better tracking of the public health response.
- The White House Office of Science and Technology Policy coordinated with the NIH, the tech industry, and non-profits to release a machine readable collection of 29,000 coronavirus-related research articles, which will help scientists discover insights to virus' genetics, incubation, treatment, symptoms, and prevention.
- The White House launched a new public-private consortium to help provide coronavirus research projects access to powerful supercomputer resources.
- The Administration announced that health plans with health savings accounts will be able to cover coronavirus testing and treatment without co-payments.
- CMS dramatically expanded telehealth for Medicare beneficiaries, ensuring more patients can access their doctors remotely while avoiding exposure.
- HHS lifted HIPAA penalties to enable healthcare providers to expand telehealth access for patients.
- The FDA took action to allow expanded use of devices to monitor patients' vital signs remotely, reducing hospital visits and minimizing risks of exposure.
- The VA established 19 emergency operations centers across the country and put in place visitation restrictions to limit patients' exposure.

Thanks to a waiver from the Office of Personnel Management, the VA is working to rehire retired medical personnel during the coronavirus outbreak.

- CMS and the VA are working to limit nonessential, elective medical procedures to free up healthcare resources.
- The Department of Defense issued guidance to delay elective medical procedures at military facilities in order to preserve healthcare resources.
- The Navy will be deploying two medical ships to help support impacted areas.
- The President announced Carnival Cruise Lines will be making ships available for hospitals to use for non-coronavirus patients.

STRENGTHENING ESSENTIAL MEDICAL SUPPLIES

- The President announced he is invoking the Defense Production Act.
- The President has urged companies to bolster response efforts, leading companies across the country to step up and produce more critical supplies like face masks and hand sanitizer.
- The President signed a memorandum directing his Administration to make general-use face masks available to healthcare workers.
- HHS announced it will be purchasing 500 million N95 respirators for the Strategic National Stockpile.
- The Department of Defense announced it will be providing 5 million respirator masks and 2,000 specialized ventilators to assist.
- The President signed legislation removing restrictions that prevented manufacturers from selling industrial masks – which can readily protect healthcare workers – directly to hospitals.
- The President signed an executive order to prevent hoarding and price-gouging of critical medical supplies.
- The Department of Justice has taken action to combat coronavirus related fraud.

DEVELOPING VACCINES AND THERAPEUTICS

- The Administration is working to help accelerate the development of therapeutics and a vaccine to combat the coronavirus.
- The FDA is evaluating existing drugs that could serve as potential therapeutics for coronavirus patients.
- The Trump Administration is actively working with drug manufacturers to monitor any potential drug supply chain issues.
- The Administration is expanding research and consulting with experts to better understand the transmission of coronavirus.

- The National Institutes of Health has announced the beginning of a clinical trial for a coronavirus vaccine candidate.

###

From: [Caliguiri, Laura](#)
To: [Lynch, Sarah](#); [Kimberly, Brad](#); [Capobianco, Abigail](#)
Subject: FW: What You Need To Know | President Trump's Coronavirus Response Efforts
Date: Thursday, March 26, 2020 8:08:24 PM

From: Mitchell, Austin A. EOP/WHO (b) (6)@who.eop.gov>
Sent: Thursday, March 26, 2020 7:56 PM
Subject: What You Need To Know | President Trump's Coronavirus Response Efforts

What You Need To Know | President Trump's Coronavirus Response Efforts

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- To leverage the resources of the entire government, the President created a White House Coronavirus Task Force to coordinate response.
- The Vice President named Dr. Deborah Birx to serve as the White House Coronavirus Response Coordinator.
- At the request of President Trump, FEMA is leading federal operations on behalf of the White House Coronavirus Task Force.
- FEMA's National Response Coordination Center has been activated to its highest level in support of coronavirus response.
- The President held a teleconference with other G20 leaders to coordinate coronavirus response.

SUPPORTING STATE AND LOCAL EFFORTS

- President Trump issued a letter informing our nation's governors that the Administration is developing new guidelines for state and local policy makers.
- The President has approved major disaster declarations for heavily impacted states.
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- HHS lifted HIPAA penalties to enable healthcare providers to expand telehealth access for patients.
- The FDA took action to allow expanded use of devices to monitor patients' vital signs remotely, reducing hospital visits and minimizing risks of exposure.
- The VA established 19 emergency operations centers across the country and put in place visitation restrictions to limit patients' exposure.
- Thanks to a waiver from the Office of Personnel Management, the VA is working to rehire retired medical personnel during the coronavirus outbreak.
- CMS and the VA are working to limit nonessential, elective medical procedures to free up healthcare resources.
- The Department of Defense issued guidance to delay elective medical procedures at military facilities in order to preserve healthcare resources.
- The Navy will be deploying two medical ships to help support impacted areas.
- The President announced Carnival Cruise Lines will be making ships available for hospitals to use for non-coronavirus patients.
- The Army Corps of Engineers is helping to build temporary hospitals and medical facilities in states like New York and Washington.

STRENGTHENING ESSENTIAL MEDICAL SUPPLIES

- The Administration mobilized a Supply Chain Stabilization Task Force led by Rear Admiral John Polowczyk.
- FEMA is working to distribute ventilators and other critical supplies to hard hit states like New York.
- The President invoked the Defense Production Act, providing a number of authorities that can be used if needed.
- The President urged the private sector to bolster response efforts, leading companies across the country to produce more critical supplies like masks, ventilators, and hand sanitizer.
- The President signed a memorandum directing his Administration to make general-use face masks available to healthcare workers.
- HHS announced it will be purchasing 500 million N95 respirators for the Strategic National Stockpile.
- The Department of Defense announced it will be providing 5 million respirator masks and 2,000 specialized ventilators to assist.

- The President signed legislation removing restrictions that prevented manufacturers from selling industrial masks – which can readily protect healthcare workers – directly to hospitals.
- The President signed an executive order to prevent hoarding and price-gouging of critical medical supplies.
- The Department of Justice has taken action to combat coronavirus related fraud.

DEVELOPING VACCINES AND THERAPEUTICS

- The Administration is working to help accelerate the development of therapeutics and a vaccine to combat the coronavirus.
- The FDA is evaluating existing drugs that could serve as potential therapeutics for coronavirus patients.
- The Trump Administration is actively working with drug manufacturers to monitor any potential drug supply chain issues.
- The Administration is expanding research and consulting with experts to better understand the transmission of coronavirus.
- The National Institutes of Health has announced the beginning of a clinical trial for a coronavirus vaccine candidate.

###

From: Droegemeier, Kelvin K. EOP/OSTP [(b) (6)]@ostp.eop.gov]
Sent: 4/3/2020 11:05:14 AM
To: Holt, Brandon T. EOP/NSC [(b) (6)]@nsc.eop.gov]; Clancy, Carolyn [Carolyn.Clancy@va.gov]; Klote, Mary M. [Mary.Klote@va.gov]; Justice, Amy [Amy.Justice2@va.gov]; Bates, Jack (BISL) [Jack.Bates@va.gov]; Francis, Joe [Joe.Francis@va.gov]; Quinn, John F. (NDS) [John.Quinn@va.gov]; Box, Tami [Tamara.Box@va.gov]; Ramoni, Rachel [Rachel.Ramoni@va.gov]; Muralidhar, Sumitra [Sumitra.Muralidhar@va.gov]; Brouillette, Dan [dan.brouillette@hq.doe.gov]; Dabbar, Paul [paul.dabbar@hq.doe.gov]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Watson, Ian D. EOP/OSTP [(b) (6)]@ostp.eop.gov]; Waterman, Paige E. EOP/OSTP [(b) (6)]@ostp.eop.gov]; Pottinger, Matthew F. EOP/WHC [(b) (6)]@who.eop.gov]; Fabina, Lauren C. EOP/NSC [(b) (6)]@nsc.eop.gov]; Ruggiero, Anthony J. EOP/NSC [(b) (6)]@nsc.eop.gov]; Tully, Ryan M. EOP/NSC [(b) (6)]@nsc.eop.gov]; Kratsios, Michael J. EOP/OSTP [(b) (6)]@ostp.eop.gov]; Parker, Lynne E. EOP/OSTP [(b) (6)]@ostp.eop.gov]
CC: Hennessey, Millicent S. EOP/NSC [(b) (6)]@nsc.eop.gov]; Ferro, Phil J. EOP/NSC [(b) (6)]@nsc.eop.gov]
Subject: RE: [(b) (5)] Coordination Call between EOP, VA, DoE and FDA

Hi all,

I'm adding Michael Kratsios and Lynne Parker re [(b) (5)]

Kelvin

From: Holt, Brandon T. EOP/NSC <[(b) (6)]@nsc.eop.gov>
Sent: Friday, April 3, 2020 10:36 AM
To: Clancy, Carolyn <Carolyn.Clancy@va.gov>; Klote, Mary M. <Mary.Klote@va.gov>; Justice, Amy <Amy.Justice2@va.gov>; Bates, Jack (BISL) <Jack.Bates@va.gov>; Francis, Joe <Joe.Francis@va.gov>; Quinn, John F. (NDS) <John.Quinn@va.gov>; Box, Tami <Tamara.Box@va.gov>; Ramoni, Rachel <Rachel.Ramoni@va.gov>; Muralidhar, Sumitra <Sumitra.Muralidhar@va.gov>; Brouillette, Dan <dan.brouillette@hq.doe.gov>; Dabbar, Paul <paul.dabbar@hq.doe.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>; Watson, Ian D. EOP/OSTP [(b) (6)]@ostp.eop.gov]; Waterman, Paige E. EOP/OSTP [(b) (6)]@ostp.eop.gov]; Droegemeier, Kelvin K. EOP/OSTP <[(b) (6)]@ostp.eop.gov>; Pottinger, Matthew F. EOP/WHO [(b) (6)]@who.eop.gov]; Fabina, Lauren C. EOP/NSC [(b) (6)]@nsc.eop.gov]; Ruggiero, Anthony J. EOP/NSC [(b) (6)]@nsc.eop.gov]; Tully, Ryan M. EOP/NSC [(b) (6)]@nsc.eop.gov]
Cc: Hennessey, Millicent S. EOP/NSC [(b) (6)]@nsc.eop.gov]; Ferro, Phil J. EOP/NSC [(b) (6)]@nsc.eop.gov]
Subject: RE: Big [(b) (5)] Coordination Call between EOP, VA, DoE and FDA

Good morning all,

Could we please lock in this call for 12:30pm? Please see call-in information below. Thank you!

Participant Dial-In: (202) 395-6392

Participant Code [(b) (6)]

Best,
Brandon

Brandon T. Holt
Office of the National Security Advisor
D[(b) (6)]

From: Ferro, Phil J. EOP/NSC (b) (6) @nsc.eop.gov>

Sent: Friday, April 3, 2020 10:30 AM

To: Clancy, Carolyn <Carolyn.Clancy@va.gov>; Klote, Mary M. <Mary.Klote@va.gov>; Justice, Amy <Amy.Justice2@va.gov>; Bates, Jack (BISL) <Jack.Bates@va.gov>; Francis, Joe <Joe.Francis@va.gov>; Quinn, John F. (NDS) <John.Quinn@va.gov>; Box, Tami <Tamara.Box@va.gov>; Ramoni, Rachel <Rachel.Ramoni@va.gov>; Muralidhar, Sumitra <Sumitra.Muralidhar@va.gov>; Brouillette, Dan <dan.brouillette@hq.doe.gov>; Dabbar, Paul <paul.dabbar@hq.doe.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>; Watson, Ian D. EOP/OSTP (b) (6) @ostp.eop.gov>; Waterman, Paige E. EOP/OSTP (b) (6) @ostp.eop.gov>; Droegemeier, Kelvin K. EOP/OSTP <(b) (6) @ostp.eop.gov>; Pottinger, Matthew F. EOP/WHO (b) (6) @who.eop.gov>; Fabina, Lauren C. EOP/NSC (b) (6) @nsc.eop.gov>; Ruggiero, Anthony J. EOP/NSC (b) (6) @nsc.eop.gov>; Tully, Ryan M. EOP/NSC (b) (6) @nsc.eop.gov>
Cc: Holt, Brandon T. EOP/NSC <(b) (6) @nsc.eop.gov>; Hennessey, Millicent S. EOP/NSC (b) (6) @nsc.eop.gov>
Subject: (b) (5) Coordination Call between EOP, VA, DoE and FDA

Good Morning Colleagues,

First off, thank you for your robust support to get this initiative off the ground as quickly as possible. (b) (5)

We would like to convene a call this afternoon to coordinate efforts. Brandon Holt who works for APDNSA Pottinger will work with you and your staff to schedule this call. To this end, please feel free to have your staff respond to Brandon. We will send out an agenda shortly.

Please let me know if you have any questions or if I may be of assistance.

All the best,

Phil

Philip J. Ferro, PhD, MS
Director for Countering Biological Threats
National Security Council
202.456.1222 (O) (b) (6) (cell)
Philip.J.Ferro@nsc.eop.gov

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 11:47:21 AM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 12:00:00 PM
End: 3/21/2020 12:30:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

Please note **updated start time of 12:00 PM**. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 10:04:25 AM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 11:30:00 AM
End: 3/21/2020 12:00:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter (b) (6) who.eop.gov

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 11:44:54 AM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
(b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 12:30:00 PM
End: 3/21/2020 1:00:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

Please note **updated start time of 12:00 PM**. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 11:20:47 AM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
(b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 11:45:00 AM
End: 3/21/2020 12:15:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter, (b) (6) who.eop.gov

Please note updated start time of 11:45 AM. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 12:00:00 PM
End: 3/21/2020 12:30:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter (b) (6) who.eop.gov

Please note **updated start time of 12:00 PM**. Thank you.

From: Abernethy, Amy [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=C84171967C724EE799BB2658197086BC-AMY.ABERNET]
Sent: 3/23/2020 9:01:29 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Liddell, Christopher P. EOP/WHO [(b) (6) who.eop.gov]
CC: Grogan, Joseph J. EOP/WHO [(b) (6) who.eop.gov]; CMS SV1 [(b) (6) cms.hhs.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbddd983419fcd-HHS-olx1-cd]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Verma, Seema (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2096b0c1e7f04e91897765d7ee0ac336-HHS-Seema.V]; Lane, Henry C (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d904337536cf41719032a9359a1ec2ab-HHS-CLANE-n]; Collins, Francis S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5257472fae794b85b15c27eb54598d70-HHS-collins]; Franklin, Joseph [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ace8af0979a847c59ea26c37c4904883-Joseph.Fran]
Subject: Re: Oracle Platform

Hi Chris - Working

From: Hahn, Stephen <(b) (6)@fda.hhs.gov>
Sent: Monday, March 23, 2020 8:59 AM
To: Liddell, Christopher P. EOP/WHO <(b) (6) who.eop.gov>
Cc: Grogan, Joseph J. EOP/WHO <(b) (6) who.eop.gov>; CMS SV1 <(b) (6) cms.hhs.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>; Brookes, Brady (CMS) <Brady.Brookes@cms.hhs.gov>; Amin, Stacy <Stacy.Amin@fda.hhs.gov>; Verma, Seema (CMS) <Seema.Verma@cms.hhs.gov>; Lane, Henry C (NIH) <(b) (6)@niaid.nih.gov>; Collins, Francis S (NIH) <(b) (6)@od.nih.gov>; Franklin, Joseph <Joseph.Franklin@fda.hhs.gov>
Subject: Re: Oracle Platform

Chris,
Amy is working on this in real time. We'll get this to you.
Steve

From: Liddell, Christopher P. EOP/WHO <(b) (6) who.eop.gov>
Date: March 22, 2020 at 5:31:29 PM EDT
To: Hahn, Stephen <(b) (6)@fda.hhs.gov>
Cc: Grogan, Joseph J. EOP/WHO <(b) (6) who.eop.gov>; CMS SV1 <(b) (6)@cms.hhs.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>; Brookes, Brady (CMS) <Brady.Brookes@cms.hhs.gov>; Amin, Stacy <Stacy.Amin@fda.hhs.gov>; Verma, Seema (CMS) <Seema.Verma@cms.hhs.gov>; Lane, Henry C (NIH) <(b) (6)@niaid.nih.gov>; Collins, Francis S (NIH)

<(b) (6)@od.nih.gov>, Franklin, Joseph <Joseph.Franklin@fda.hhs.gov>

Subject: Re: Oracle Platform

Steve

Do you have a presentation from (b) (5)

Thanks

Chris

On Mar 22, 2020, at 4:00 PM, Hahn, Stephen <(b) (6)@fda.hhs.gov> wrote:

Thanks, Chris. Please let me know if you have any questions.

Steve

From: Grogan, Joseph J. EOP/WHO <(b) (6)@who.eop.gov>

Date: March 21, 2020 at 7:29:35 PM EDT

To: CMS SV1 <SV1@cms.hhs.gov>

Cc: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>, Hahn, Stephen <SH1@fda.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>, Brookes, Brady (CMS) <Brady.Brookes@cms.hhs.gov>, Amin, Stacy <Stacy.Amin@fda.hhs.gov>, Verma, Seema (CMS) <Seema.Verma@cms.hhs.gov>, Lane, Henry C (NIH) <(b) (6)@niaid.nih.gov>, Collins, Francis S (NIH) <(b) (6)@od.nih.gov>, Franklin, Joseph <Joseph.Franklin@fda.hhs.gov>, Liddell, Christopher P. EOP/WHO <(b) (6)@who.eop.gov>

Subject: Re: Oracle Platform

Cc'ing deputy cos Chris Liddell who can help with any technical issues and can enlist US digital services if necessary.

Sent from my iPhone

On Mar 21, 2020, at 7:02 PM, CMS SV1 <SV1@cms.hhs.gov> wrote:

Amy, please work through Brady Brookes for CMS issues.

From: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>

Sent: Saturday, March 21, 2020 6:59 PM

To: Lenihan, Keagan (FDA/OC) <Keagan.Lenihan@fda.hhs.gov>; Fauci, Anthony (NIH/NIAID) [E] <(b) (6)@niaid.nih.gov>; Hahn, Stephen <(b) (6)@fda.hhs.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; CMS SV1 <(b) (6)@cms.hhs.gov>

Cc: Amin, Stacy (FDA/OC) <Stacy.Amin@fda.hhs.gov>; Joe Grogan <(b) (6)@who.eop.gov>; Verma, Seema (CMS/OA) <Seema.Verma@cms.hhs.gov>; Lane, Cliff (NIH/NIAID) [E] <(b) (6)@niaid.nih.gov>; Collins, Francis (NIH/OD) [E] <(b) (6)@od.nih.gov>; Franklin, Joseph (FDA/OC) <Joseph.Franklin@fda.hhs.gov>

Subject: Re: Oracle Platform

Thanks, All.

I am in touch with John Brooks and will connect with Cliff Lane as well.

(b) (5) will be ready for the 5pm deadline.

Take care,

Amy

Amy P. Abernethy, MD PhD
Principal Deputy Commissioner
Acting Chief Information Officer
US Food & Drug Administration

Mobile: 240-429-7034

Email: amy.abernethy@fda.hhs.gov

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>

Sent: Saturday, March 21, 2020 6:53 PM

To: Fauci, Anthony S (NIH) <(b) (6) niaid.nih.gov>; Hahn, Stephen <(b) (6) fda.hhs.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>; (b) (6) cms.hhs.gov <(b) (6) cms.hhs.gov>

Cc: Amin, Stacy <Stacy.Amin@fda.hhs.gov>; Joe Grogan <Joseph.J.Grogan@who.eop.gov>; Verma, Seema (CMS) <Seema.Verma@cms.hhs.gov>; Lane, Henry C (NIH) <(b) (6) niaid.nih.gov>; Collins, Francis S (NIH) <(b) (6) od.nih.gov>

Subject: RE: Oracle Platform

+ Seema

From: Fauci, Anthony (NIH/NIAID) [E] <(b) (6) niaid.nih.gov>

Sent: Saturday, March 21, 2020 6:50 PM

To: Hahn, Stephen <(b) (6) fda.hhs.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>; Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>

Cc: Amin, Stacy <Stacy.Amin@fda.hhs.gov>; Joe Grogan <(b) (6) who.eop.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Verma, Seema (CMS) <Seema.Verma@cms.hhs.gov>; Lane, Henry C (NIH) <clane@niaid.nih.gov>; Collins, Francis S (NIH) <collinsf@od.nih.gov>

Subject: RE: Oracle Platform

Steve:

Thanks for the note. Cliff Lane will be my designated person to work with Amy, and if there are other areas of expertise where NIH can contribute such as a person from National Library of Medicine (NLM) and/or the National Center for Advancing Translational Science (NCATS), Cliff will work with me and Dr. Francis Collins (NIH Director) to provide a name and contact information for such a person. I am also copying Dr. Collins on this e-mail.

Best regards,

Tony

From: Hahn, Stephen <(b) (6)@fda.hhs.gov>

Sent: Saturday, March 21, 2020 4:31 PM

To: Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Fauci, Anthony (NIH/NIAID) [E] <(b) (6)@niaid.nih.gov>; Abernethy, Amy (FDA/OC) <Amy.Abernethy@fda.hhs.gov>

Cc: Amin, Stacy (FDA/OC) <Stacy.Amin@fda.hhs.gov>; Joe Grogan (b) (6)@who.eop.gov>; Lenihan, Keagan (FDA/OC) <Keagan.Lenihan@fda.hhs.gov>; Verma, Seema (CMS/OA) <Seema.Verma@cms.hhs.gov>

Subject: Oracle Platform

Tony and Bob,

This email is in follow up to our conversation an hour ago regarding the Oracle Platform. I am adding Dr. Amy Abernathy who is the Principle Deputy Commissioner of FDA. CMS Administrator Verma, Joe Grogan, Stacy Amin, Chief Legal Counsel for FDA, and Keagan Lenihan, my Chief of Staff are copied.

We have a 5 pm deadline tomorrow to deliver a plan for (b) (5). Amy will lead this effort and coordinate with your agencies. I know that you will be designating participants to work with Amy. I've downloaded with Amy and she has heard about the details of our conversation earlier today. (b) (5)

The questions are:

1. What are the disclosure, consent, and HIPAA considerations for the platform. We'll need to run the legal traps around this. Stacy, Keagan and I have a call into to you so that we can read you into the details.
2. What are the issues around engagement and communication with the physician community?
3. Do we have the appropriate data fields and who should review them to ensure that we are collecting what we need, balanced with burden on physicians/providers?

The White House had made it clear that they will help us remove any barriers. If you encounter any obstacles, please funnel them to me (cel (b) (6)) and I'll pass them along to the WH. Administrator Verma has agreed to look into any coverage issues that might arise.

Thanks.

Steve

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 12:30:00 PM
End: 3/21/2020 1:00:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

Please note **updated start time of 12:00 PM**. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [Keagan.Lenihan@fda.hhs.gov]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [Anand.Shah@fda.hhs.gov]; Cavazzoni, Patrizia [Patrizia.Cavazzoni@fda.hhs.gov]; Woodcock, Janet [Janet.Woodcock@fda.hhs.gov]; Marks, Peter [Peter.Marks@fda.hhs.gov]; (b) (6) who.eop.gov
CC: Rom, Colin [Colin.Rom@fda.hhs.gov]

Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)

Start: 3/21/2020 11:45:00 AM
End: 3/21/2020 12:15:00 PM
Show Time As: Busy

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

Please note updated start time of 11:45 AM. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 11:30:00 AM
End: 3/21/2020 12:00:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Cavazzoni, Patrizia [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c42abd33834044ecbaa03d075cc0a5d2-Patrizia.Ca]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; (b) (6) who.eop.gov
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Telecon: Coronavirus Treatment Acceleration Program
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Start: 3/21/2020 11:45:00 AM
End: 3/21/2020 12:15:00 PM
Show Time As: Busy

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

Please note updated start time of 11:45 AM. Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 8:01:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Lenihan, Keagan [Keagan.Lenihan@fda.hhs.gov]; Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [Anand.Shah@fda.hhs.gov]; Cavazzoni, Patrizia [Patrizia.Cavazzoni@fda.hhs.gov]; Woodcock, Janet [Janet.Woodcock@fda.hhs.gov]; Marks, Peter [Peter.Marks@fda.hhs.gov]; (b) (6) who.eop.gov
CC: Rom, Colin [Colin.Rom@fda.hhs.gov]
Subject: Telecon: Coronavirus Treatment Acceleration Program
Location: 1-877-465-7975,,, (b) (6)
Start: 3/21/2020 11:30:00 AM
End: 3/21/2020 12:00:00 PM
Show Time As: Tentative

Required Attendees: Keagan Lenihan (Keagan.Lenihan@fda.hhs.gov); Amy Abernethy (Amy.Abernethy@fda.hhs.gov); Shah, Anand; Cavazzoni, Patrizia; Woodcock, Janet; Marks, Peter; (b) (6) who.eop.gov

From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 4/2/2020 4:38:49 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: First coronavirus blood test gets FDA emergency authorization

From: POLITICO Pro <politicoemail@politicopro.com>
Date: April 2, 2020 at 1:23:31 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: First coronavirus blood test gets FDA emergency authorization

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/31/2020 1:35:01 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]; Debi Birx [Deborah.L.Birx@nsc.eop.gov]
Subject: Fwd: Confidential Draft Press Release
Attachments: Confidential Draft Release.docx

FYI

From: Daniel O'Day <daniel.oday@gilead.com>
Date: March 31, 2020 at 1:34:12 PM EDT
To: Woodcock, Janet <Janet.Woodcock@fda.hhs.gov>, Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Brett Pletcher <Brett.Pletcher@gilead.com>
Subject: Confidential Draft Press Release

Dear Janet and Steve,

Janet, as mentioned briefly yesterday, I am writing to share with you a draft announcement we would like to issue later this week, which at a high level commits to donating (b) (4) of remdesivir at no cost. As public and government interest increases daily, and concerns about cost during the peak of this pandemic are top of mind, I feel a responsibility to communicate this commitment even ahead of clinical data or a regulatory authorization of any kind. At the same time, because existing supply is limited, we also want to communicate our expansive efforts to increase supply as rapidly as possible, through our own efforts and partnerships with external pharmaceutical and chemical manufacturing companies. This is critical to assuring a coordinated effort across the globe that can maximize the production of remdesivir if needed, and is time sensitive.

The point of this communication is to assure the public of our view – that this is an extraordinary time and we will take extraordinary measures to ensure access to remdesivir, through current expanded access programs, and through other mechanisms when and if data supports broader access. This is also a follow-on to my open letter this past weekend on the Gilead website about our Compassionate use and Expanded access efforts, and consistent with our commitment to transparency.

We are sharing this draft press release in parallel with the review team at FDA, following the process my regulatory team follows for standard submissions and discussion. I appreciate you helping us to keep this information confidential, and also appreciate you letting me know your thoughts by the end of the day if possible.

We would also intend to share this with members of the Coronavirus task force, and the white house as a second step tomorrow prior to release.

Please call or email at any time. Cell (b) (6)

Best,
Dan

CONTACTS: Douglas Maffei, PhD, Investors
(650) 522-2739

Sonia Choi, Media
(650) 425-5483

Confidential Draft – Not for Distribution

(b) (4)

(b) (4)

###

For more information about Gilead, please visit the company's website at [HYPERLINK "http://www.gilead.com"], follow Gilead on Twitter (@Gilead Sciences) or call Gilead Public Affairs at 1-800-GILEAD-5 or 1-650-574-3000.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/30/2020 12:01:51 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Updated CTAP Graphic
Attachments: CTAP_print_combined_v4_3.30.20.pdf

We're putting it in landscape version but wanted you to see most recent version.
Steve

From: Guram, Jeet <Jeet.Guram@fda.hhs.gov>
Date: March 30, 2020 at 11:55:11 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Woodcock, Janet <Janet.Woodcock@fda.hhs.gov>, Cavazzoni, Patrizia <Patrizia.Cavazzoni@fda.hhs.gov>, Marks, Peter <Peter.Marks@fda.hhs.gov>
Subject: Updated CTAP Graphic

Dr. Hahn, please see an updated graphic attached. The following changes have been made:

- Data points have been added for the projected number of doses available for convalescent plasma and hyperimmune globulin.
- (b) (5)
- IL-6 Inhibitors are shown to have "Trials Ongoing" in April (since trials for one therapy are starting this month).
- The status of clinical trials/production of hyperimmune globulin now reads, "Working with manufacturers and on donor identification to ramp up production."

We'll have a formatted one-pager describing CTAP to you shortly.

--

Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

(b) (5)

(b) (5), (b) (4)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/24/2020 6:30:58 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Summary of clinician feedback
Attachments: Rapid Clinician impressions from Oracle COVID 032320docx.docx

Clinician feedback on the Oracle system

From: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>
Date: March 24, 2020 at 9:30:07 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Amin, Stacy <Stacy.Amin@fda.hhs.gov>
Subject: Summary of clinician feedback

Hi - As per our discussion this morning, here is a quick summary of the feedback from 30 clinicians who used the Oracle COVID-19 system yesterday.

Take care,

Amy

Amy P. Abernethy, MD PhD
Principal Deputy Commissioner
Acting Chief Information Officer
US Food & Drug Administration

Mobile: 240-429-7034
Email: amy.abernethy@fda.hhs.gov

(b) (4), (b) (5)

(b) (4), (b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/31/2020 12:35:17 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Please send to me
Attachments: UPDATED_CTAP_print_combined_V8_3.30.20.pdf; CTAP-handout-1col-draft3.pdf

From: Guram, Jeet <Jeet.Guram@fda.hhs.gov>
Date: March 31, 2020 at 12:06:13 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

If it's not too late (b) (5)

I've re-attached the bullets page as well.

--

Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

From: Guram, Jeet
Sent: Tuesday, March 31, 2020 11:14 AM
To: 'Hahn, Stephen' <SH1@fda.hhs.gov>; Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

Here is the latest version of the graphic, and I've re-attached the bullets page as well.

--

Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

From: Hahn, Stephen <SH1@fda.hhs.gov>
Sent: Tuesday, March 31, 2020 11:05 AM
To: Guram, Jeet <Jeet.Guram@fda.hhs.gov>; Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

Ok thx

From: Guram, Jeet <Jeet.Guram@fda.hhs.gov>
Date: March 31, 2020 at 10:29:25 AM EDT

To: Hahn, Stephen <SH1@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

Got it, (b) (5)

I'll send the version of the graphic with the larger font size as soon as it comes in, which should be later this morning.

--

Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

From: Hahn, Stephen <SH1@fda.hhs.gov>
Sent: Tuesday, March 31, 2020 10:25 AM
To: Guram, Jeet <Jeet.Guram@fda.hhs.gov>; Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

(b) (5)

From: Guram, Jeet <Jeet.Guram@fda.hhs.gov>
Date: March 31, 2020 at 9:50:15 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

(b) (5)

--

Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

From: Guram, Jeet
Sent: Tuesday, March 31, 2020 9:17 AM
To: 'Hahn, Stephen' <SH1@fda.hhs.gov>; Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: RE: Please send to me

Here are the documents – the team is working on making the font larger for the graphics document, I'll check on the status of that.

(b) (5)
AMERICAN
OVERSIGHT

MULTI-HHS-FDA-20-0771-A-000051

(b) (5)

--
Jeet Guram, M.D.
Senior Advisor, Office of the Commissioner
Food and Drug Administration
+1 (202) 230-0451 | jeet.guram@fda.hhs.gov

From: Hahn, Stephen <SH1@fda.hhs.gov>
Sent: Tuesday, March 31, 2020 9:03 AM
To: Guram, Jeet <Jeet.Guram@fda.hhs.gov>; Shah, Anand <Anand.Shah@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: Please send to me

The 3 pager CTAP document
Page 1 the bullet points about the program
Pages 2-3 graphics of pipeline

The Secretary wants this (b) (5) . When can you
get this to me?
Thanks
Steve

(b) (5)

(b) (5), (b) (4)

(b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/27/2020 7:06:45 AM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: For our 7:45 am call: Draft March 27 2020 Commissioner CTAP TP.docx
Attachments: Draft March 27 2020 Commissioner CTAP TP.docx

DRAFT

(b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/27/2020 2:00:02 PM
To: Abernethy, Amy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c84171967c724ee799bb2658197086bc-Amy.Abernet]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Joe Grogan [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]
Subject: Fwd: Chinese convalescent plasma pre-print in BMJ
Attachments: The feasibility of convalescent plasma therapy in severe COVID19 patients --a pilot study.2020.03.16.20036145v1.full.pdf

From: Tierney, Julia <Julia.Tierney@fda.hhs.gov>
Date: March 26, 2020 at 4:37:31 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>, Marks, Peter <Peter.Marks@fda.hhs.gov>
Subject: Chinese convalescent plasma pre-print in BMJ

Dear Dr. Hahn,
Colin had asked if I could forward the BMJ preprint on convalescent plasma from the early Chinese experience – it is attached.
Please let us know if you have any questions or need anything else on this.
Thanks,
Julie

Julia C. Tierney, JD
Chief of Staff

Center for Biologics Evaluation and Research
U.S. Food and Drug Administration
(301) 796-8602 (direct)
Julia.Tierney@fda.hhs.gov



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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/24/2020 5:23:15 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: FDA encourages use of experimental coronavirus treatment made from survivors' blood

This is really good work.

From: POLITICO Pro Health Care <politicoemail@politicopro.com>
Date: March 24, 2020 at 5:09:53 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FDA encourages use of experimental coronavirus treatment made from survivors' blood

FDA encourages use of experimental coronavirus treatment made from survivors' blood

By Arthur Allen

03/24/2020 05:08 PM EDT

FDA today encouraged researchers to study the experimental treatment of desperately ill Covid-19 patients with convalescent serum, a 130-year-old therapy that medicine periodically retrieves from its black bag with mixed success during pandemics.

The agency also said it would approve emergency use of the treatment — plasma rich with coronavirus antibodies, taken from the blood of people who have recovered from the disease — on severely ill patients. FDA said it would require donors' blood be carefully screened to make sure there was no residual coronavirus or other contaminants.

Convalescent serum was used to treat a variety of infections from the 1890s until around World War II. The 1925 dogsled trek that brought diphtheria "antitoxin" to save children in Nome, Alaska, is memorialized in the Balto movies and the annual Iditarod dog race.

More recently, Chinese doctors gave convalescent plasma to 21 patients during the 2009 swine flu pandemic; a fifth died, compared to 55 percent in a control group. The serum had almost no impact in Guinea when used in a group of Ebola patients in 2014. Chinese doctors have also employed human serum against coronavirus in the current pandemic.

Antibody therapy is most effective when used to prevent disease rather than in treatment, according to an article published last week by experts Arturo Casadevall of Johns Hopkins University and Liise-anne Pirofski of the Albert Einstein College of Medicine, who are organizing a trial to test the serum.

In contrast to the FDA, which said it would only give permission for emergency use in the sickest patients, Casadevall and Pirofski write that the serum might be most appropriate to temporarily boost protection in infected health care workers who would otherwise need to go into quarantine.

FDA provided emergency numbers for doctors to reach officials at the agency who can approve use of the therapy at short notice in the most desperate cases.

To view online:

<https://subscriber.politicopro.com/health-care/whiteboard/2020/03/fda-encourages-use-of-experimental-coronavirus-treatment-made-from-survivors-blood-3978431>

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Sent: 3/24/2020 5:03:19 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: FW: Gilead FDA material
Attachments: protocol GS-US-540-5821_Aproved.pdf; CU Update for FDA_final.pptx

From: Daniel O'Day <daniel.oday@gilead.com>
Date: March 23, 2020 at 3:48:06 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@nsc.eop.gov>
Subject: FW: Gilead FDA material

Dear Deborah and Steve,

Steve, I thought I would share the attached with Deborah as well, as we have not had a chance to connect yet today, and I know how busy you both are! (and should we connect I wanted Deborah to have the material in front of her) I know Steve's team at FDA and our Clinical team discussed the protocol (first attachment) and are well on the way to implementation.

The bigger issue is the CU update deck attached (second attachment). Please refer to slide 10. We believe this is of public health importance, and would like to discuss at your earliest convenience. We intend to discuss with European authorities and others tomorrow.

Best,
Dan

From: Daniel O'Day <daniel.oday@gilead.com>
Date: Sunday, March 22, 2020 at 10:37 PM
To: "sh1@fda.hhs.gov" <sh1@fda.hhs.gov>
Subject: Gilead FDA material

Hi Steve,

Please see attached the interim analysis for 53 CU patients and the draft expanded access treatment protocol.

These materials were sent to your team in preparation for a 9am call tomorrow morning between our teams to discuss.

Due to the nature of the interim analysis, I believe it would be helpful to have a discussion with you and Dr. Birx tomorrow when possible in addition to the team discussion. Can you let me know if you agree, and if you support me sharing the interim analysis with Dr. Birx?

If possible, I would prefer that we speak prior to this data being shared beyond FDA and Dr. Birx.

Please let me have your thoughts. I look forward to seeking your advice on next steps.

Best,
Dan

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/8/2020 9:15:07 AM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Serology Question Follow Up - BD

For the top of your inbox.
This request for help with respect to challenges faced in China.
Thanks, Joe

From: Dave Hickey <Dave_Hickey@bd.com>
Date: April 6, 2020 at 9:31:04 PM EDT
To: Whitaker, Scott <SWhitaker@AdvaMed.org>, Hahn, Stephen <SH1@fda.hhs.gov>
Subject: RE: Serology Question Follow Up - BD

Scott,

Thanks for forwarding

Dr Hahn – thank you again for taking time on the call today and for listening to our questions / asks and for the guidance from you and your team. Very much appreciated.

Dave.



Dave Hickey
President, Integrated Diagnostic Solutions

Dave.Hickey@bd.com

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t: 4103164121
c: (b) (6)

bd.com

From: Whitaker, Scott <SWhitaker@AdvaMed.org>
Sent: Monday, April 6, 2020 9:26 PM
To: Stephen Hahn <SH1@fda.hhs.gov>
Cc: Dave Hickey <Dave_Hickey@bd.com>
Subject: Fwd: Serology Question Follow Up - BD

Do you recognize this sender? This email came from an external source. Use caution when opening attachments or clicking links.

Dr. Hahn,

Per our earlier discussion, see below an email from Dave Hickey, President BD Integrated Diagnostic Solutions, outlining (b) (4). Thanks for your consideration.

MULTI-HHS-FDA-20-0771-A-000062

Scott

Sent from my iPad

Scott, please find below an email to Commissioner Hahn to follow-up on the issue that I raised during today's AdvaMedDx Board discussion. As he requested, if you could feed this into him it would be really appreciated.

Commissioner Hahn,

Last week, we announced a partnership with BioMedomics and Henry Schein to bring a high quality serology test to the U.S. market (see release below). This will meet a critical need for new point-of-care test that can detect antibodies in blood to confirm current or past exposure to COVID-19 in as little as 15 minutes. (b) (4)

(b) (4)

We look forward to working with you to ensure appropriate access to these critical tests.

Dave

BD, BioMedomics Announce Launch of Rapid Serology Test to Detect Exposure to COVID-19

Point-of-care blood test detects evidence of present or past exposure in 15 minutes

FRANKLIN LAKES, N.J. and MORRISVILLE, N.C., March 31, 2020 /PRNewswire [prnewswire.com]/ -- BD (Becton, Dickinson and Company) (NYSE: BDX), a leading global medical technology company, and BioMedomics, a privately held, North Carolina-based clinical diagnostics company, today announced the release of a new point-of-care test that can detect antibodies in blood to confirm current or past exposure to COVID-19 in as little as 15 minutes.

The new test, developed and manufactured by BioMedomics, will be available through BD and distributed exclusively by Henry Schein, Inc. to health care providers throughout the United States.

The test does not require special equipment and may be used in a laboratory or at the point of care. The test detects antibodies in the blood that are produced by the body in response to coronavirus infection. These antibodies are

MULTI-HHS-FDA-20-0771-A-000063

typically present in the middle to later stages of COVID-19 infection, but may remain present after exposure, which helps clinicians determine who has been exposed to the coronavirus, even if a person didn't exhibit any symptoms of the COVID-19 disease. Data on past exposure is important for researchers to more accurately understand the likely true occurrence of SARS-CoV-2 infection across a population. This information will be helpful in informing future strategies for combatting COVID-19.

"Serology tests are important because they provide an additional piece of information to aid in characterizing possible prior exposure to SARS-CoV-2, especially since many infections are mild or asymptomatic in severity," said Dave Hickey, president of Integrated Diagnostic Solutions for BD. "Initial evidence suggests that nearly all patients infected with SARS-CoV-2 will have developed a detectable antibody response within days of symptom onset, at which time a negative serologic test, along with molecular diagnostics, could be helpful in ruling out COVID-19. Our agreement with BioMedomics adds a rapid serology test that can augment current tests already on the market, and we are pleased to collaborate in this effort with Henry Schein, which has extensive knowledge of the point-of-care test field."

The test is completed in four, simple steps. First, blood is collected through normal blood collection devices such as the BD Microtainer® Contact-Activated Lancet. A few drops of blood are then transferred to the test cartridge, followed by two to three drops of a buffer. The results can be read in 15 minutes, similar to how over-the-counter pregnancy tests show multiple lines for positive results and a single line for negative results.

"BioMedomics designed the test to be easy to use and provide results in minutes, with no special equipment necessary or the need to transport the sample to a laboratory for analysis," said Frank Wang, CEO of BioMedomics. "Our test has been clinically validated at several hospitals and clinical laboratories in both the U.S. and China, and our published clinical data in the *Journal of Medical Virology* was one of the world's first for a COVID-19 serology test. It has been used widely in China during the COVID-19 outbreak and is now ready to help combat coronavirus in the U.S. through our collaboration with BD. We are committed to doing our part to battle this disease and are excited to have BD as a partner to help deliver our high-quality rapid test to those who need it most."

The test analyzes blood, serum or plasma samples for the presence of immunoglobulin M (IgM) and Immunoglobulin G (IgG) antibodies associated with the coronavirus (SARS-CoV-2). IgM provides the first line of defense during viral infections, followed by the generation of adaptive, high-affinity IgG responses for long-term immunity and immunological memory. The detection of COVID-19 IgM antibodies tends to indicate a recent exposure to COVID-19, and detection of COVID-19 IgG antibodies indicates a later stage of infection, so this combined antibody test could also provide information on the stage of the disease in patients. Current guidance from the U.S. Food and Drug Administration (FDA) recommends that results from antibody testing should not be used as the sole basis to diagnose or exclude coronavirus infection. Depending on the clinical scenario, additional testing, such as those used on the BD MAX™ System may be considered to further evaluate the possibility of SARS-CoV-2 infection.

"We look forward to working with such an outstanding company as BD to help make the antibody test part of the standard of care," said Stanley M. Bergman, Henry Schein's chairman of the board and chief executive officer. "The test will help to identify people who have developed antibodies to the virus, which may inform future strategies regarding COVID-19."

The test has not been reviewed by the FDA but is permitted for distribution and use under the public health emergency guidance issued by FDA on March 16, 2020, and BD expects to begin shipping tests in April. BD will have capacity to supply more than one million tests over the coming months, with the ability to scale up based on market demand and is working with medical products distribution company Henry Schein to make these tests available to medical care facilities throughout the United States. Health care providers can order the test and all collection devices needed to perform the test by contacting their BD or Henry Schein representatives.

About BD

BD is one of the largest global medical technology companies in the world and is advancing the world of health by improving medical discovery, diagnostics and the delivery of care. The company supports the heroes on the frontlines of health care by developing innovative technology, services and solutions that help advance both clinical therapy for patients and clinical process for health care providers. BD and its 65,000 employees have a passion and commitment to help enhance the safety and efficiency of clinicians' care delivery process, enable laboratory scientists to accurately detect disease and advance researchers' capabilities to develop the next generation of diagnostics and therapeutics. BD has a presence in virtually every country and partners with organizations around the world to address some of the most challenging global health issues. By working in close collaboration with customers, BD can help enhance outcomes, lower costs, increase efficiencies, improve safety and expand access to health care. For more information on BD, please visit [bd.com \[c212.net\]](https://bd.com/c212.net).

About BioMedomics

BioMedomics is a point-of-care diagnostics company that aims to provide novel, rapid point-of-care tests to aid in the diagnosis of critical diseases. The company uses cutting-edge technology to create life-saving diagnostic solutions and address global health care needs. Its diagnostic tests produce rapid and accurate clinical results at the point-of-care without requiring complex and expensive lab equipment — placing immediate health care knowledge in the hands of providers. With that knowledge comes the power to make treatment decisions and save lives. Please visit biomedomics.com [c212.net] for more information.



Dave Hickey

President, Integrated Diagnostic Solutions

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/6/2020 1:35:46 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fw: Journal publisher raises red flags about French malaria drug study

FYI

From: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>
Date: April 6, 2020 at 1:33:04 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: Fw: Journal publisher raises red flags about French malaria drug study

FYI. I think that the issue of patient selection is one that is going to come up over and over again, as per our conversation this morning.

From: POLITICO Pro Health Care <politicoemail@politicopro.com>
Sent: Monday, April 6, 2020 1:31 PM
To: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>
Subject: Journal publisher raises red flags about French malaria drug study

Journal publisher raises red flags about French malaria drug study

By Sarah Oweremohle

04/06/2020 01:30 PM EDT

The society that recently published a French study that suggested malaria drug hydroxychloroquine could help coronavirus patients has raised formal concerns about the research.

In a statement, the International Society of Antimicrobial Chemotherapy says it "shares the concerns" raised by critics of the study, which was published on March 20 in a society-run journal. Such statements of concern are often the first step towards retracting a scientific paper.

The small study, led by controversial French researcher Didier Raoult, helped fuel growing interest in the drugs in the United States. President Donald Trump has cited Raoult's work while championing hydroxychloroquine as having "very, very encouraging" early results against the coronavirus.

But the society, which runs the International Journal of Antimicrobial Agents, has now said that the French study does not meet their standards — citing its "lack of better explanations" for how study participants were chosen. Experts have pointed out that Raoult's team chose who would get the drug versus who would not, even though the gold standard for clinical trials is to assign patients to treatment groups randomly.

Raoult has not yet responded to a request for comment on the society's statement.

The results from other studies of hydroxychloroquine have been mixed, and the studies themselves have been small.

The president's focus on hydroxychloroquine has sparked divides within his administration, where several health officials feel there has been outsized attention on the drug even as other medicines are in trials.

The Food and Drug Administration last week authorized emergency use of the drug for severely ill patients but acknowledged there was still limited data about whether the treatment is effective.

To view online:

<https://subscriber.politicopro.com/health-care/whiteboard/2020/04/journal-publisher-raises-red-flags-about-french-malaria-drug-study-3978980>

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Sent: 4/2/2020 4:40:30 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: First coronavirus blood test gets FDA emergency authorization

From: POLITICO Pro <politicoemail@politicopro.com>
Date: April 2, 2020 at 1:23:31 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: First coronavirus blood test gets FDA emergency authorization

First coronavirus blood test gets FDA emergency authorization

By David Lim

04/02/2020 01:20 PM EDT

The FDA has granted its first emergency use authorization for a coronavirus test that analyzes antibodies in a person's blood to determine if they have been exposed to the virus.

Antibody tests, also known as serology tests, are powerful weapons to curb outbreaks because they can detect people who have recovered from infection, not just those who are currently ill.

The serology test that received FDA authorization Wednesday is manufactured by Cellex. The agency says that "it is reasonable to believe" that Cellex's antibody test "may be effective in diagnosing" the virus and that there is no "adequate, approved, and available alternative." By contrast, devices seeking approval under a premarket approval application must show evidence that "provides reasonable assurance" they are "safe and effective."

Under guidance updated in March, FDA is allowing firms that validate coronavirus serological tests to use them in certain circumstances before being reviewed by the agency. More than 50 serological tests are being offered under that policy, according to an FDA document. Such tests must disclose they have not been reviewed by the agency, cannot be used for home testing and results from them "should not be used as the sole basis to diagnose or exclude" coronavirus exposure.

Earlier this week, the California company Bodysphere falsely claimed in a press release that it already received authorization for a coronavirus antibody test. An agency spokesperson told POLITICO today that the Cellex test is the only one to receive such authorization from FDA to date.

To view online:

<https://subscriber.politicopro.com/health-care/whiteboard/2020/04/first-coronavirus-blood-test-gets-fda-emergency-authorization-3978844>

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Sent: 4/7/2020 8:24:49 AM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Serology Question Follow Up - BD

As per our discussion, this issue regarding the Chinese export ban was flagged by the President of BD.

FDA will address the waiver issue and will work closely with industry to make sure the tests are validated appropriately.

We do need help on the international issues.

Thanks

Steve

From: Whitaker, Scott <SWhitaker@AdvaMed.org>
Date: April 6, 2020 at 9:25:55 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Hickey, David <Dave.Hickey@bd.com>
Subject: Fwd: Serology Question Follow Up - BD

Dr. Hahn,

Per our earlier discussion, see below an email from Dave Hickey, President BD Integrated Diagnostic Solutions, outlining (b) (4). Thanks for your consideration.

Scott

Sent from my iPad

Scott, please find below an email to Commissioner Hahn to follow-up on the issue that I raised during today's AdvaMedDx Board discussion. As he requested, if you could feed this into him it would be really appreciated.

Commissioner Hahn,

Last week, we announced a partnership with BioMedomics and Henry Schein to bring a high quality serology test to the U.S. market (see release below). This will meet a critical need for new point-of-care test that can detect antibodies in blood to confirm current or past exposure to COVID-19 in as little as 15 minutes. (b) (4)

(b) (4)

(b) (4)

We look forward to working with you to ensure appropriate access to these critical tests.

Dave

BD, BioMedomics Announce Launch of Rapid Serology Test to Detect Exposure to COVID-19

Point-of-care blood test detects evidence of present or past exposure in 15 minutes

FRANKLIN LAKES, N.J. and MORRISVILLE, N.C., March 31, 2020 /PRNewswire [prnewswire.com]/ -- BD (Becton, Dickinson and Company) (NYSE: BDX), a leading global medical technology company, and BioMedomics, a privately held, North Carolina-based clinical diagnostics company, today announced the release of a new point-of-care test that can detect antibodies in blood to confirm current or past exposure to COVID-19 in as little as 15 minutes.

The new test, developed and manufactured by BioMedomics, will be available through BD and distributed exclusively by Henry Schein, Inc. to health care providers throughout the United States.

The test does not require special equipment and may be used in a laboratory or at the point of care. The test detects antibodies in the blood that are produced by the body in response to coronavirus infection. These antibodies are typically present in the middle to later stages of COVID-19 infection, but may remain present after exposure, which helps clinicians determine who has been exposed to the coronavirus, even if a person didn't exhibit any symptoms of the COVID-19 disease. Data on past exposure is important for researchers to more accurately understand the likely true occurrence of SARS-CoV-2 infection across a population. This information will be helpful in informing future strategies for combatting COVID-19.

"Serology tests are important because they provide an additional piece of information to aid in characterizing possible prior exposure to SARS-CoV-2, especially since many infections are mild or asymptomatic in severity," said Dave Hickey, president of Integrated Diagnostic Solutions for BD. "Initial evidence suggests that nearly all patients infected with SARS-CoV-2 will have developed a detectable antibody response within days of symptom onset, at which time a negative serologic test, along with molecular diagnostics, could be helpful in ruling out COVID-19. Our agreement with BioMedomics adds a rapid serology test that can augment current tests already on the market, and we are pleased to collaborate in this effort with Henry Schein, which has extensive knowledge of the point-of-care test field."

The test is completed in four, simple steps. First, blood is collected through normal blood collection devices such as the BD Microtainer® Contact-Activated Lancet. A few drops of blood are then transferred to the test cartridge, followed by two to three drops of a buffer. The results can be read in 15 minutes, similar to how over-the-counter pregnancy tests show multiple lines for positive results and a single line for negative results.

"BioMedomics designed the test to be easy to use and provide results in minutes, with no special equipment necessary or the need to transport the sample to a laboratory for analysis," said Frank Wang, CEO of BioMedomics. "Our test has been clinically validated at several hospitals and clinical laboratories in both the U.S. and China, and our published clinical data in the *Journal of Medical Virology* was one of the world's first for a COVID-19 serology test. It has been used widely in China during the COVID-19 outbreak and is now ready to help combat coronavirus in the U.S. through our collaboration with BD. We are committed to doing our part to battle this disease and are excited to have BD as a partner to help deliver our high-quality rapid test to those who need it most."

The test analyzes blood, serum or plasma samples for the presence of immunoglobulin M (IgM) and Immunoglobulin G (IgG) antibodies associated with the coronavirus (SARS-CoV-2). IgM provides the first line of

defense during viral infections, followed by the generation of adaptive, high-affinity IgG responses for long-term immunity and immunological memory. The detection of COVID-19 IgM antibodies tends to indicate a recent exposure to COVID-19, and detection of COVID-19 IgG antibodies indicates a later stage of infection, so this combined antibody test could also provide information on the stage of the disease in patients. Current guidance from the U.S. Food and Drug Administration (FDA) recommends that results from antibody testing should not be used as the sole basis to diagnose or exclude coronavirus infection. Depending on the clinical scenario, additional testing, such as those used on the BD MAX™ System may be considered to further evaluate the possibility of SARS-CoV-2 infection.

"We look forward to working with such an outstanding company as BD to help make the antibody test part of the standard of care," said Stanley M. Bergman, Henry Schein's chairman of the board and chief executive officer. "The test will help to identify people who have developed antibodies to the virus, which may inform future strategies regarding COVID-19."

The test has not been reviewed by the FDA but is permitted for distribution and use under the public health emergency guidance issued by FDA on March 16, 2020, and BD expects to begin shipping tests in April. BD will have capacity to supply more than one million tests over the coming months, with the ability to scale up based on market demand and is working with medical products distribution company Henry Schein to make these tests available to medical care facilities throughout the United States. Health care providers can order the test and all collection devices needed to perform the test by contacting their BD or Henry Schein representatives.

About BD

BD is one of the largest global medical technology companies in the world and is advancing the world of health by improving medical discovery, diagnostics and the delivery of care. The company supports the heroes on the frontlines of health care by developing innovative technology, services and solutions that help advance both clinical therapy for patients and clinical process for health care providers. BD and its 65,000 employees have a passion and commitment to help enhance the safety and efficiency of clinicians' care delivery process, enable laboratory scientists to accurately detect disease and advance researchers' capabilities to develop the next generation of diagnostics and therapeutics. BD has a presence in virtually every country and partners with organizations around the world to address some of the most challenging global health issues. By working in close collaboration with customers, BD can help enhance outcomes, lower costs, increase efficiencies, improve safety and expand access to health care. For more information on BD, please visit bd.com [c212.net].

About BioMedomics

BioMedomics is a point-of-care diagnostics company that aims to provide novel, rapid point-of-care tests to aid in the diagnosis of critical diseases. The company uses cutting-edge technology to create life-saving diagnostic solutions and address global health care needs. Its diagnostic tests produce rapid and accurate clinical results at the point-of-care without requiring complex and expensive lab equipment — placing immediate health care knowledge in the hands of providers. With that knowledge comes the power to make treatment decisions and save lives. Please visit biomedomics.com [c212.net] for more information.



Dave Hickey

President, Integrated Diagnostic Solutions

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Corporate Headquarters Mailing Address: BD (Becton, Dickinson and Company) 1 Becton Drive Franklin Lakes, NJ 07417 U.S.A.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/7/2020 7:44:46 AM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Question

FYSA

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Date: April 6, 2020 at 7:52:46 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Question

Does this work?

(b) (5)

(b) (5)

(b) (5)

(b) (5)

On Apr 6, 2020, at 6:43 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

For task force

Does CDRH have a list of major approved diagnostic COVID tests and what platform is used for each?

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/3/2020 11:59:15 AM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: A victory! New sanitizer supplies coming nationwide. Thank you. Question on donation?

From: Hayden, Lou <lou.hayden@lowes.com>
Date: April 3, 2020 at 11:33:19 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>, Kadlec, Robert P (OS) <Robert.Kadlec@hhs.gov>
Cc: Russo, Joseph H. EOP/WHO (b) (6) @who.eop.gov, Tim Pataki (b) (6) @who.eop.gov
Subject: A victory! New sanitizer supplies coming nationwide. Thank you. Question on donation?

Drs. Hahn, Shah, and Kadlec, and Joe and Tim –

Thank you for your attention to help prioritize the expedited and thorough review for FDA approval for new Moxie-brand hand sanitizer to serve our 18 million customers a week nationwide, including first responders nationwide.

By the time the product flows into our distribution / store network, (b) (4)

Question: Since the government may have ongoing demand for essential materials, could we make a direct donation of 10,000 of the first units of hand sanitizer when they arrive (b) (4)?

(Lowe's has already made \$175 million in COVID-related contributions, including \$10 million in products to responders, \$ to the Red Cross, donating all N-95 masks, and direct cash bonuses to our working hourly employees.)

With warm regards,

Lou

Lou Hayden
Head of Washington, DC Office
Lowe's Companies
300 New Jersey Avenue NW, Ste. 900
Washington, DC 20001
202-464-2780

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/3/2020 11:59:04 AM
To: Hayden, Lou [lou.hayden@lowes.com]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Kadlec, Robert P (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=70539a2f88924cc8913781ea74278b12-HHS-Robert.]
CC: Russo, Joseph H. EOP/WHO [Joseph.H.Russo@who.eop.gov]; Tim Pataki [Timothy.A.Pataki@who.eop.gov]
Subject: Re: A victory! New sanitizer supplies coming nationwide. Thank you. Question on donation?

Lou

How very kind of you. I'll leave this to Bob to respond. Congratulations on your terrific work
Steve

From: Hayden, Lou <lou.hayden@lowes.com>
Date: April 3, 2020 at 11:33:19 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>, Kadlec, Robert P (OS) <Robert.Kadlec@hhs.gov>
Cc: Russo, Joseph H. EOP/WHO (b) (6) @who.eop.gov, Tim Pataki (b) (6) @who.eop.gov
Subject: A victory! New sanitizer supplies coming nationwide. Thank you. Question on donation?

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Lou Hayden
Head of Washington, DC Office
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Washington, DC 20001
202-464-2780

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From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 3/24/2020 5:23:24 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: FDA encourages use of experimental coronavirus treatment made from survivors' blood

This is really good work.

From: POLITICO Pro Health Care <politicoemail@politicopro.com>
Date: March 24, 2020 at 5:09:53 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FDA encourages use of experimental coronavirus treatment made from survivors' blood

From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 3/16/2020 2:26:09 PM
To: Debi Birx [Deborah.L.Birx@nsc.eop.gov]; kac@who.eop.gov
Subject: Fwd: Blood Donation

Kellyanne and Deb,

(b) (5)

Please let me know how we can help.

Steve

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Date: March 16, 2020 at 2:09:01 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Blood Donation

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/1/2020 8:47:11 AM
To: Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Debi Birx [Deborah.L.Birx@nsc.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: Testing Centers
Attachments: POCT COVID Testing_4.24.pptx

Thought this might be of interest to you. Anand Shah from my office is following up with Dr. Brennan. Steve

From: Merlo, Larry J. <Larry.Merlo@CVSHealth.com>
Date: April 30, 2020 at 9:53:26 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>, Brennan, Troyen A. <Troyen.Brennan@CVSHealth.com>
Subject: Testing Centers

Dr. Hahn,

It was great spending a few minutes with you on Monday.

Attached is a summary of our Point of Care Testing at our large-scale sites. This data is approximately one week old, and we would now be at approximately (b) (4) individuals tested.

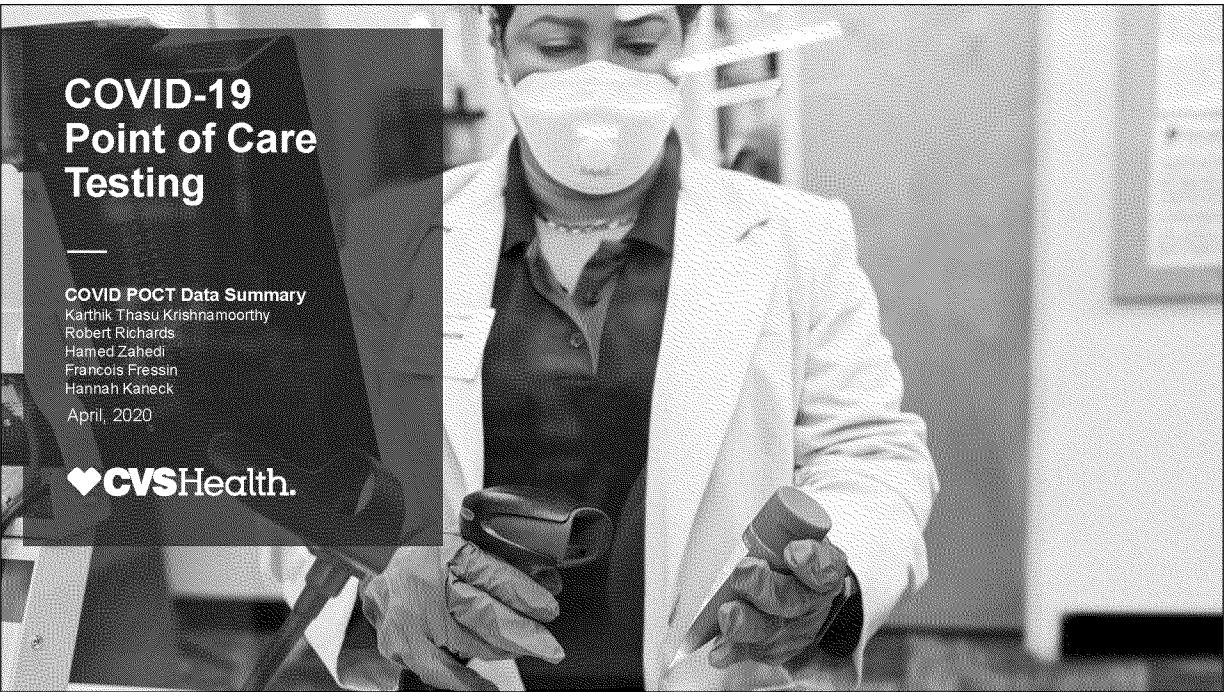
I am copying Dr. Troyen (Troy) Brennan, our Chief Medical Officer, to connect the two of you for additional discussion.

Best regards,

Larry Merlo | President & CEO, CVS Health
p 401-770-2340
1 CVS Drive, Mail Code 1000, Woonsocket, RI 02895



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Executive Summary

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(b) (4)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/21/2020 2:29:26 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: POTUS comment for today

From: Hahn, Stephen <SH1@fda.hhs.gov>
Date: April 21, 2020 at 2:29:14 PM EDT
To: Rom, Colin <Colin.Rom@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: POTUS comment for today

Some edits. Will forward to Joe.
S

From: Rom, Colin <Colin.Rom@fda.hhs.gov>
Date: April 21, 2020 at 2:25:33 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: FW: POTUS comment for today
Importance: High

Suggested edits

(b) (5)

(b) (5)

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>

Sent: Tuesday, April 21, 2020 1:32 PM

To: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>; Hahn, Stephen <SH1@fda.hhs.gov>

Subject: POTUS comment for today

Importance: High

Guy, in the next 45 minutes, can you get me more than what I have below? For POTUS to say.

(b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/21/2020 3:27:39 PM
To: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Debi Birx [Deborah.L.Birx@nsc.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Serology testing in Germany

FYI -- Our FDA Europe Office is still working on trying to obtain the information on serology testing in Germany from BfArM and others. No reply from BfArM yet. They did come across the following, translated from an article in German, that may be of interest:

The RKI [Robert Koch Institute] will soon start investigations on blood donors and humans in some COVID-19 outbreak areas. In the longer term, a nationwide representative study is planned. For laboratory analysis, the RKI works closely with the Institute for Virology at Charité - Universitätsmedizin Berlin, headed by Prof. Christian Drosten. The studies at a glance: Serological testing on blood donors in Germany: In cooperation with the blood donation services, blood samples from adults from all over Germany are regularly tested for antibodies. This allows conclusions to be drawn about the spread of SARS-CoV-2 in the population. Starting next week, approximately 5,000 blood samples will be tested every 14 days. First results are expected in early May 2020. Seroepidemiological studies at several particularly affected locations ("hotspots") in Germany: The aim of the localized studies is to estimate the immunity in the local population by determining antibodies against SARS-CoV-2 in representative samples of the inhabitants. The aim is also to better estimate the proportion of asymptomatic infections and risk factors for a severe course in the population. In each location, about 2,000 test persons aged 18 years and older will be examined several times. In addition, the test persons will be questioned about clinical symptoms, previous illnesses, health behaviour, living conditions and mental health. The study is scheduled to start in mid-April 2020, with initial results expected in May 2020. In planning and conducting these so-called "hotspot" studies, the RKI is cooperating with researchers around Prof. Gérard Krause from the Helmholtz Centre for Infection Research in Braunschweig. Nationwide population-representative seroepidemiological study: By determining antibodies against SARS-CoV-2 in a nationwide representative sample, the actual spread, immunity, the proportion of asymptomatic infections, the actual mortality rate and risk factors for a severe course in the German population will be better estimated. The study will involve 15,000 people aged 18 years and older at 150 study sites. The subjects will also be asked about clinical symptoms, previous illnesses, health behaviour, living conditions and mental health. The study is expected to start in mid-May 2020, and the first results are expected in June 2020.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/26/2020 7:40:24 AM
To: John Fleming (b) (6) @who.eop.gov]
Subject: Zhu Chinese Ad5 Lancet 2020.pdf
Attachments: Zhu Chinese Ad5 Lancet 2020.pdf

Sorry for all of the messages. Here is the report of a Phase I study of the Chinese Ad5 vaccine.
Steve



Safety, tolerability, and immunogenicity of a recombinant adenovirus type-5 vectored COVID-19 vaccine: a dose-escalation, open-label, non-randomised, first-in-human trial

Feng-Cai Zhu*, Yu-Hua Li*, Xu-Hua Guan, Li-Hua Hou, Wen-Juan Wang, Jing-Xin Li, Shi-Po Wu, Bu-Sen Wang, Zhao Wang, Lei Wang, Si-Yue Jia, Hu-Dachuan Jiang, Ling Wang, Tao Jiang, Yi Hu, Jin-Bo Gou, Sha-Bei Xu, Jun-Jie Xu, Xue-Wen Wang, Wei Wang, Wei Chen

Summary

Background A vaccine to protect against COVID-19 is urgently needed. We aimed to assess the safety, tolerability, and immunogenicity of a recombinant adenovirus type-5 (Ad5) vectored COVID-19 vaccine expressing the spike glycoprotein of a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) strain.

Methods We did a dose-escalation, single-centre, open-label, non-randomised, phase 1 trial of an Ad5 vectored COVID-19 vaccine in Wuhan, China. Healthy adults aged between 18 and 60 years were sequentially enrolled and allocated to one of three dose groups (5×10^{10} , 1×10^{11} , and 1.5×10^{11} viral particles) to receive an intramuscular injection of vaccine. The primary outcome was adverse events in the 7 days post-vaccination. Safety was assessed over 28 days post-vaccination. Specific antibodies were measured with ELISA, and the neutralising antibody responses induced by vaccination were detected with SARS-CoV-2 virus neutralisation and pseudovirus neutralisation tests. T-cell responses were assessed by enzyme-linked immunosorbent assay and flow-cytometry assays. This study is registered with ClinicalTrials.gov, NCT04313127.

Findings Between March 16 and March 27, 2020, we screened 195 individuals for eligibility. Of them, 108 participants (51% male, 49% female; mean age 36.3 years) were recruited and received the low dose ($n=36$), middle dose ($n=36$), or high dose ($n=36$) of the vaccine. All enrolled participants were included in the analysis. At least one adverse reaction within the first 7 days after the vaccination was reported in 30 (83%) participants in the low dose group, 30 (83%) participants in the middle dose group, and 27 (75%) participants in the high dose group. The most common injection site adverse reaction was pain, which was reported in 58 (54%) vaccine recipients, and the most commonly reported systematic adverse reactions were fever (50 [46%]), fatigue (47 [44%]), headache (42 [39%]), and muscle pain (18 [17%]). Most adverse reactions that were reported in all dose groups were mild or moderate in severity. No serious adverse event was noted within 28 days post-vaccination. ELISA antibodies and neutralising antibodies increased significantly at day 14, and peaked 28 days post-vaccination. Specific T-cell response peaked at day 14 post-vaccination.

Interpretation The Ad5 vectored COVID-19 vaccine is tolerable and immunogenic at 28 days post-vaccination. Humoral responses against SARS-CoV-2 peaked at day 28 post-vaccination in healthy adults, and rapid specific T-cell responses were noted from day 14 post-vaccination. Our findings suggest that the Ad5 vectored COVID-19 vaccine warrants further investigation.

Funding National Key R&D Program of China, National Science and Technology Major Project, and CanSino Biologics.

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Introduction

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) was first reported in January, 2020. The virus is highly transmissible between humans and has spread rapidly, causing the COVID-19 pandemic.^{1,2} Patients infected with SARS-CoV-2, especially older patients and those with pre-existing respiratory or cardiovascular conditions are at greater risk for severe complications, including severe pneumonia, acute respiratory distress syndrome, multiple organ failure, and in some cases, death.^{3,4} By May 20, 2020, SARS-CoV-2

had infected more than 4.7 million people across 215 countries or territories and killed more than 316 000 worldwide.⁵

In the absence of effective prevention measures, current management to control the epidemic is the enforcement of quarantine, isolation, and physical distancing.^{6,7} Effective vaccines against COVID-19 are urgently needed to reduce the enormous burden of mortality and morbidity associated with SARS-CoV-2 infection.⁸ There are more than 100 candidate vaccines in development worldwide,⁹ among them at least eight have started or will soon

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*Contributed equally

Beijing Institute of Biotechnology, Beijing, China (Prof F-C Zhu PhD, Prof J-Xu PhD, Prof L-H Hou PhD, S-P Wu PhD, B-S Wang PhD); NHC Key Laboratory of Enteric Pathogenic Microbiology, Jiangsu Provincial Center for Disease Control and Prevention, Nanjing, China (Prof F-C Zhu MSc, W-J Wang MSc, Prof J-Xu PhD, S-Y Jia MPH, H-D Jiang BSc); China National Institute for Food and Drug Control, Beijing, China (Prof Y-H Li PhD, Li Wang PhD); Hubei Provincial Center for Disease Control and Prevention, Wuhan, China (Prof X-H Guan PhD, Z Wang MPH, Le Wang MPH); Beijing Institute of Microbiology and Epidemiology, State Key Laboratory of Pathogen and Biosecurity, Beijing, China (Prof T Jiang PhD, Y Hu PhD); CanSino Biologics, Tianjin, China (J-B Gou PhD); Clinical Research Center, Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China (Prof W Wang PhD, Prof S-B Xu PhD); and Shanghai Canning Medical Technology, Shanghai, China (X-W Wang MD)

Correspondence to: Prof Wei Chen, Beijing Institute of Biotechnology, Beijing 100071, China cw0226@foxmail.com

or Prof Wei Wang, Clinical Research Center, Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan 430032, China wwang@vip.126.com

or
Prof Feng-Cai Zhu, NHC Key
Laboratory of Enteric Pathogenic
Microbiology, Jiangsu Provincial
Center for Disease Control and
Prevention, Nanjing 210009,
China
jszfc@vip.sina.com

Research in context

Evidence before this study

We searched PubMed on May 8, 2020, for clinical trial reports with the terms "COVID-19" or "SARS-CoV-2", "vaccine", and "clinical trial" and no date or language restrictions; no other data from a human clinical trial of COVID-19 vaccine have been reported thus far, to our knowledge. We also searched the ClinicalTrials.gov registry for unpublished trials of COVID-19 vaccines, up to May 6, 2020. In addition to the adenovirus type-5 (Ad5) vectored COVID-19 vaccine reported here, seven candidate COVID-19 vaccines are in ongoing clinical trials, including Moderna's mRNA COVID-19 vaccine, Inovio Pharmaceuticals' DNA vaccine, Sinovac, Wuhan and Beijing Institute of Biological Products' inactivated COVID-19 vaccines, University of Oxford's chimpanzee adenovirus-vectored vaccine, and BioNTech's mRNA COVID-19 vaccine.

Added value of this study

This first-in-human trial showed that the Ad5 vectored COVID-19 vaccine was tolerable and immunogenic in healthy adults. One dose of the vaccine at all dose concentrations (5×10^{10} , 1×10^{11} , and 1.5×10^{11} viral particles) tested induced

both specific antibody and T-cell responses in most participants. Rapid specific T-cell responses were noted at day 14 and specific humoral responses against severe acute respiratory syndrome coronavirus 2 peaked at day 28 post-vaccination. Although we found that the high dose vaccine tended to be more immunogenic than the middle dose and low dose vaccines, it was also associated with a higher reactogenicity. Severe fever, fatigue, dyspnoea, muscle pain, and joint pain were reported in some of the recipients in the high dose group.

Implications of all the available evidence

Many vaccine candidates are in rapid development, including recombinant-protein based vaccines, replicating or non-replicating viral vector-based vaccines, DNA vaccines, and mRNA vaccines (which mostly have focused on the spike glycoprotein or receptor binding domain), live attenuated vaccines, and inactivated virus vaccines. All of these vaccine platforms have advantages and disadvantages, and it is too soon to predict which will be more successful. Our study suggests that there is potential for further investigation of the Ad5 vectored COVID-19 vaccine for prevention of COVID-19.

start clinical trials. These include Moderna's mRNA COVID-19 vaccine and CanSino's non-replicating adenovirus type-5 (Ad5) vectored COVID-19 vaccine, which both entered phase 1 clinical trials on March 16, 2020; Inovio Pharmaceuticals' DNA vaccine for COVID-19, which entered trials on April 3, 2020; three inactivated COVID-19 vaccines manufactured by Sinovac, Wuhan Institute of Biological Products, and Beijing Institute of Biological Products entered clinical trials in April, 2020, successively; University of Oxford's non-replicating chimpanzee adenovirus vectored vaccine ChAdOx1 nCoV-19, and BioNTech's mRNA COVID-19 vaccine also started trials in recent months.

Here, we report the preliminary assessment at 28 days post-vaccination of the safety, tolerability, and immunogenicity of CanSino's non-replicating Ad5 vectored COVID-19 vaccine in healthy adults in China.

Method

Study design and participants

We did a single-centre, open-label, non-randomised, dose-escalation phase 1 trial of an Ad5 vectored COVID-19 vaccine candidate in a rehabilitation centre in Wuhan, Hubei province, China. Eligible participants were healthy adults aged between 18 and 60 years, who did not have SARS-CoV-2 infection, confirmed by negative results of serum specific IgM and IgG antibodies with a commercial SARS-CoV-2 rapid test kit (Jinwofu, Beijing, China), negative nucleic acid for SARS-CoV-2 in pharyngeal swabs or sputum and anal swabs detected with a nucleic acid diagnostic kit (PCR-fluorescence probing, Sansure Biotech, Changsha, China), and a clear chest CT image with no evidence of lesions in the lungs at the time of

screening. Exclusion criteria were a history of seizures or mental illness; allergy to any ingredient included in the vaccine; acute febrile disease on the day of enrolment; receipt of any blood products in the past 4 months; receipt of any research medicines or vaccine in the past month; and being unable to comply with the study schedule. Further details are outlined in the protocol.¹⁰ Participants were sequentially enrolled to receive a single intramuscular injection in a dose-escalating manner: the first group of participants were allocated to receive the low dose, followed up for a minimum of 3 days before proceeding to recruit further participants to receive the middle dose, and then after safety observation for 3 days, the last group of participants were recruited and allocated to receive the high dose. The administration of higher dose injections and new enrolment were paused if any criteria for pausing dose escalation were met.

The protocol and informed consent were approved by the institutional review board of the Jiangsu Provincial Center of Disease Control and Prevention. Written informed consent from all participants was obtained before screening. This study was undertaken by Jiangsu Provincial Center for Disease Control and Prevention, Hubei Provincial Center for Disease Control and Prevention, and Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology in accordance with the Declaration of Helsinki and Good Clinical Practice.

Procedures

The Ad5 vectored COVID-19 vaccine was developed by Beijing Institute of Biotechnology (Beijing, China) and CanSino Biologics (Tianjin, China). The vaccine is a

replication defective Ad5 vectored vaccine expressing the spike glycoprotein of SARS-CoV-2. We cloned an optimised full-length spike gene based on Wuhan-Hu-1 (GenBank accession number YP_009724390) with the tissue plasminogen activator signal peptide gene into an E1 and E3 deleted Ad5 vector, and constructed the Ad5 vectored COVID-19 vaccine using the Admax system from Microbix Biosystem (Toronto, ON, Canada). The Ad5 vectored COVID-19 vaccine was manufactured as a liquid formulation containing 5×10^{10} viral particles per 0.5 mL in a vial.

A single shot was allocated intramuscularly in the arm of the participants in the low dose group, with one vial of the Ad5 vectored COVID-19 vaccine (5×10^{10} viral particles per 0.5 mL). The participants in the middle dose group received one shot intramuscularly in the arm with two vials of the Ad5 vectored COVID-19 vaccine (1×10^{11} viral particles per mL). Participants in the high dose group received a double-shot regimen with one vial of the Ad5 vectored COVID-19 vaccine in one arm and two vials of the Ad5 vectored COVID-19 vaccine in the other arm (1×10^{11} viral particles per 1.5 mL).

Adverse events were self-reported by the participants, but verified by investigators daily during the first 14 days after vaccination. Subsequently, adverse events were recorded by the participants on diary cards in the following weeks. Laboratory safety tests including white blood cell count, lymphocyte count, neutrophils, platelets, haemoglobin, alanine aminotransferase, aspartate aminotransferase, total bilirubin, fasting blood glucose, and creatinine were measured on day 7 to assess any toxic effects post-vaccination. We graded adverse events and abnormal changes in laboratory tests according to the scale issued by the China State Food and Drug Administration (version 2019).¹¹

Blood samples were taken from participants for serology tests at the scheduled site visits before the vaccination, and on days 14 and 28 after the vaccination. We assessed binding antibody responses against the receptor binding domain (RBD) and spike glycoprotein with ELISA kits manufactured by Beijing Wantai BioPharm (Beijing, China). A dilution of 1:40 was the positivity cutoff value for ELISA. We also measured the neutralising antibody responses induced by vaccination using both live SARS-CoV-2 virus neutralisation (virus strain SARS-CoV-2/human/CHN/Wuhan/IME-BJ01/2020, GenBank number MT291831.1) and pseudovirus neutralisation tests (a vesicular stomatitis virus pseudovirus system expressing the spike glycoprotein).¹² Peripheral blood mononuclear cells were isolated from whole blood before the vaccination and at days 14 and 28 post-vaccination. Specific T-cell responses were quantified with an interferon (IFN) γ enzyme-linked immunospot (ELISpot) assay using fresh peripheral blood mononuclear cells stimulated with overlapping spike glycoprotein peptide pools for about 12–24 h before detection, and expressed as the number of spot-forming cells per 100 000 cells. All measurements

were subtracted from the unstimulated control values, and minus values were corrected to zero. The results were considered positive if there was at least a two-times increase in the number of IFN γ secreting T cells post-vaccination. We also assessed the CD4⁺ and CD8⁺ T-cell responses to vaccination according to the secretion of IFN γ , interleukin-2 (IL-2), and tumour necrosis factor α (TNF α), which were measured by intracellular cytokine staining assays in peripheral blood mononuclear cells after the stimulation with overlapping spike glycoprotein peptide pools for about 6 h and detected by flow cytometry. Similar methods to measure T-cell responses by intracellular cytokine staining assays have been reported previously.^{13,14} The pre-vaccination and post-vaccination anti-Ad5 neutralising antibody titres were detected with a serum neutralisation assay.¹⁵

Outcomes

We analysed all outcomes in the intention-to-treat cohort. The primary endpoint for safety was the occurrence of adverse reactions within 7 days after the vaccination. Any abnormal changes in laboratory measures at 7 days post-vaccination, and adverse events within 28 days across the treatment groups were also analysed as secondary safety endpoints. The specific ELISA antibody titres to RBD and the spike glycoprotein, and the neutralising antibody amounts against live SARS-CoV-2 and a pseudovirus were measured as humoral immunogenicity endpoints. We defined a positive antibody response (seroconversion) as at least a four-fold increase in post-vaccination titre from baseline. ELISpot IFN γ and positive T-cell responses measured by intracellular cytokine staining assays were compared across the groups as endpoints for cell-mediated responses. Stratified analyses of the immune responses were done based on the pre-existing Ad5 neutralising antibody titres among the participants as low or negative ($\leq 1:200$) or high ($> 1:200$).

Statistical analysis

The sample size was not determined on the basis of statistical power calculations; however, a minimum sample size of 20–30 participants for a pilot vaccine trial has been recommended by the National Medical Products Administration, China. We assessed the number and proportion of participants with adverse reactions post-vaccination and compared safety profiles across the dose groups. The antibodies against SARS-CoV-2 were presented as geometric mean titres with 95% CIs and the cellular responses were shown as a proportion of positive responders. We used the χ^2 test or Fisher's exact test to analyse categorical data, ANOVA to analyse the log transformed antibody titres, and Wilcoxon rank-sum test for data that were not normally distributed. When the overall difference across the three groups was significant, pairwise comparisons were made and the differences between groups were estimated with 95% CIs. Multi-variable analysis was used to establish the possible effects

on the immunogenicity and safety profile of the vaccine candidates. Hypothesis testing was two-sided with an α value of 0.05. Statistical analyses were done by a statistician using SAS (version 9.4) or GraphPad Prism 8.0.1. SPICE (version 6.0) was used for the analysis of data from multicolour flow cytometry experiments.

An independent data and safety monitoring committee, with one independent statistician, one clinician, and one epidemiologist, was established before the start of the trial. Safety data for the first 3 days post-vaccination were assessed and reviewed by the committee to ensure that there was sufficient holding time between dose escalation. This study is registered with ClinicalTrials.gov, NCT04313127.

Role of the funding source

The sponsors of the study participated in study design, but had no role in data collection, data analysis, data interpretation, or writing of the report. All authors had full access to all the data in the study and had final responsibility for the decision to submit for publication.

Results

Between March 16 and March 27, 2020, we screened 195 individuals for eligibility. Of them, 108 were sequentially enrolled and assigned to receive the low dose (n=36 [33%]), middle dose (n=36 [33%]), or high dose (n=36 [33%]) of the Ad5 vectored COVID-19 vaccine (appendix p 2). All participants completed the vaccination and the scheduled visits within 28 days. Baseline

characteristics of the participants were similar across the treatment groups (table 1).

87 (81%) of 108 participants reported at least one adverse reaction within the first 7 days after the vaccination: 30 (83%) in the low dose group, 30 (83%) in the middle dose group, and 27 (75%) in the high dose group (table 2). No significant difference in the overall number of adverse reactions across the treatment groups was observed. The most common injection site adverse reaction was pain, which was reported in 58 (54%) vaccine recipients. Pain was reported in 17 (47%) participants in the low dose group, 20 (56%) participants in the middle dose group, and 21 (58%) participants in the high dose group. The most commonly reported systematic adverse reactions overall were fever (50 [46%]), fatigue (47 [44%]), headache (42 [39%]), and muscle pain (18 [17%]). Fever was reported in 15 (42%) participants in the low dose group, 15 (42%) participants in the middle dose group, and 20 (56%) participants in the high dose group. Headache was reported in 14 (39%) participants in the low dose group, 11 (31%) participants in the middle dose group, and 17 (47%) participants in the high dose group. Muscle pain was reported in seven (19%) participants in the low dose group, three (8%) participants in the middle dose group, and eight (22%) participants in the high dose group. Most adverse reactions were mild or moderate in severity. Nine participants (two [6%] in the low dose group, two [6%] in the middle dose group, and five [14%] in the high dose group) had an episode of severe fever (grade 3) with axillary temperature greater than 38.5°C. Of them, one (3%) from the high dose group reported severe fever along with severe symptoms of fatigue, dyspnoea, and muscle pain. One participant in the high dose group reported severe fatigue and joint pain (appendix p 3). These reactions occurred within 24 h post-vaccination, and persisted for no more than 48 h. We found no significant difference in the incidences of adverse reactions or overall adverse events among the dose groups. High pre-existing Ad5 immunity (titre of >1:200 vs ≤1:200) was associated with significantly fewer occurrences of fever post-vaccination (odds ratio 0.3, 95% CI 0.1–0.6; appendix p 4). No serious adverse event was reported within 28 days. At day 7 after vaccination, nine (8%) participants had mild to moderate total bilirubin increase, ten (9%) had alanine aminotransferase increase, and four (4%) had fasting hyperglycaemia (appendix p 5), but no instances were considered as clinically significant.

Rapid binding antibody responses to RBD were observed in all three dose groups from day 14 (table 3). At day 28, the recipients in the high dose group tended to have a higher binding antibody geometric mean titre of 1445.8 (95% CI 935.5–2234.5), followed by 806.0 (528.2–1229.9) in the middle dose group, and 615.8 (405.4–935.5) in the low dose group (high dose vs low dose 1611.5, 531.5–2691.5). At least a four-fold increase of anti-RBD antibodies was noted in 35 (97%) of 36 participants in the low dose group, 34 (94%) of 36 in the middle dose group, and 36 (100%) of

	Low dose group (n=36)	Middle dose group (n=36)	High dose group (n=36)
Age, years			
18–29	9 (25%)	12 (33%)	10 (28%)
30–39	13 (36%)	14 (39%)	15 (42%)
40–49	8 (22%)	3 (8%)	7 (19%)
50–60	6 (17%)	7 (19%)	4 (11%)
Mean age, years	37.2 (10.7)	36.3 (11.5)	35.5 (10.1)
Sex			
Male	18 (50%)	19 (53%)	18 (50%)
Female	18 (50%)	17 (47%)	18 (50%)
Mean body-mass index, kg/m ²	23.3 (2.7)	23.9 (2.7)	24.1 (3.1)
Underlying diseases*			
Yes	1 (3%)	2 (6%)	4 (11%)
No	35 (97%)	34 (94%)	32 (89%)
Pre-existing adenovirus type-5 neutralising antibody			
Mean GMT	168.9 (13.9)	149.5 (10.5)	115.0 (13.4)
≤200, titre	16 (44%)	17 (47%)	20 (56%)
>200, titre	20 (56%)	19 (53%)	16 (44%)

Data are n (%) or mean (SD). GMT=geometric mean titre. *Seven participants had hypertension, chronic bronchitis, gout, or were a carrier of hepatitis B virus.

Table 1: Baseline characteristics

See Online for appendix

36 in the high dose group. Neutralising antibodies against live SARS-CoV-2 were all negative at day 0, and increased moderately at day 14, peaking at 28 days post-vaccination. Neutralising antibody titre with a geometric mean titre of 34.0 (95% CI 22.6–50.1) was noted in the high dose group, which was significantly higher compared with 16.2 (10.4–25.2) in the middle dose group and 14.5 (9.6–21.8) in the low dose group, with an estimated difference of 27.7 (1.0–54.4) between the high dose group and the middle dose group and 33.2 (6.5–59.9) between the high dose group and the low dose group at day 28. Meanwhile, 18 (50%) participants in the low dose group, 18 (50%) in the middle dose group, and 27 (75%) in the high dose group had at least a four-fold increase in neutralising antibody titres by day 28. Similar patterns of the binding antibody to spike glycoprotein and neutralising antibody titre to pseudovirus post-vaccination across the dose groups were also noted (appendix p 6). The association between the ELISA antibodies to RBD and neutralising antibody titres against live virus showed a moderate positive correlation of 0.749, and that between the ELISA antibodies to spike glycoprotein and neutralising antibody titres against live virus was 0.753, at the peak antibody response ($p < 0.0001$). The neutralising antibody titres measured using a pseudovirus were also correlated well with those measured by live SARS-CoV-2 (appendix p 7).

Before vaccination, 20 (56%) participants in the low dose group, 19 (53%) participants in the middle dose group, and 16 (44%) participants in the high dose group had a high pre-existing Ad5 neutralising antibody titre ($>1:200$). Only five (25%) participants of 20 in the low dose group, seven (37%) participants of 19 in the middle dose group, and ten (63%) participants of 16 in the high dose group, who had high pre-existing Ad5 immunity, had at least a four-fold increase in neutralising antibody titre at day 28 post-vaccination (appendix pp 8–10). Multivariable analysis showed that high pre-existing Ad5 neutralising antibody titres compromised the seroconversion of neutralising antibody post-vaccination, regardless of the vaccine doses, and recipients aged 45–60 years seemed to have lower seroconversion of neutralising antibody compared with the younger recipients (appendix p 11). The Ad5 neutralising antibodies were significantly boosted post-vaccination (appendix p 12).

ELISpot responses at baseline were undetectable with spot-forming cells below the level of detection of the assay in all participants, but peaked at day 14 post-vaccination. The proportions of positive responders ranged from 83–97% across the dose groups, with a mean number of spot-forming cells per 100 000 cells of 20.8 (95% CI 12.7–34.0) in the low dose group, 40.8 (27.6–60.3) in the middle dose group, and 58.0 (39.1–85.9) in the high dose group (figure 1). T-cell responses in the high dose group were significantly higher than that in the low dose group ($p < 0.0010$), but not significant compared with that

	Low dose group (n=36)	Middle dose group (n=36)	High dose group (n=36)	Total (N=108)
All adverse reactions within 0–7 days				
Any	30 (83%)	30 (83%)	27 (75%)	87 (81%)
Grade 3	2 (6%)	2 (6%)	6 (17%)	10 (9%)
Injection site adverse reactions within 0–7 days				
Pain	17 (47%)	20 (56%)	21 (58%)	58 (54%)
Induration	2 (6%)	1 (3%)	1 (3%)	4 (4%)
Redness	2 (6%)	1 (3%)	1 (3%)	4 (4%)
Swelling	4 (11%)	4 (11%)	0	8 (7%)
Itch	2 (6%)	3 (8%)	0	5 (5%)
Muscular weakness	0	0	1 (3%)	1 (1%)
Systemic adverse reactions within 0–7 days				
Fever	15 (42%)	15 (42%)	20 (56%)	50 (46%)
Grade 3 fever	2 (6%)	2 (6%)	5 (14%)	9 (8%)
Headache	14 (39%)	11 (31%)	17 (47%)	42 (39%)
Fatigue	17 (47%)	14 (39%)	16 (44%)	47 (44%)
Grade 3 fatigue	0	0	2 (6%)	2 (2%)
Vomiting	1 (3%)	0	1 (3%)	2 (2%)
Diarrhoea	3 (8%)	4 (11%)	5 (14%)	12 (11%)
Muscle pain	7 (19%)	3 (8%)	8 (22%)	18 (17%)
Grade 3 muscle pain	0	0	1 (3%)	1 (1%)
Joint pain	2 (6%)	2 (6%)	5 (14%)	9 (8%)
Grade 3 joint pain	0	0	1 (3%)	1 (1%)
Throat pain	1 (3%)	3 (8%)	4 (11%)	8 (7%)
Cough	1 (3%)	2 (6%)	3 (8%)	6 (6%)
Nausea	2 (6%)	1 (3%)	3 (8%)	6 (6%)
Functional GI disorder	1 (3%)	0	0	1 (1%)
Dyspnoea	0	0	2 (6%)	2 (2%)
Grade 3 dyspnoea	0	0	1 (3%)	1 (1%)
Appetite impaired	6 (17%)	5 (14%)	6 (17%)	17 (16%)
Dizziness	1 (3%)	0	1 (3%)	2 (2%)
Mucosal abnormality	0	0	1 (3%)	1 (1%)
Pruritus	1 (3%)	1 (3%)	1 (3%)	3 (3%)
Overall adverse events within 0–28 days				
Any	31 (86%)	30 (83%)	27 (75%)	88 (81%)
Grade 3	2 (6%)	2 (6%)	6 (17%)	10 (9%)

Data are n (%). Any refers to all the participants with any grade adverse reactions or events. Adverse reactions and events were graded according to the scale issued by the China State Food and Drug Administration. Grade 3=severe (ie, prevented activity). GI=gastrointestinal.

Table 2: Adverse reactions within 7 days and overall adverse events within 28 days after vaccination

in the middle dose group. A slight decrease of the T-cell responses across the dose groups was noted at day 28. High levels of baseline Ad5 neutralising antibody titre reduced the peak of post-vaccination T-cell responses in all the dose groups, particularly for the low dose group. Despite the effect of high pre-existing Ad5 immunity, positive responders were identified in 15 (75%) of 20 participants in the low dose group, 18 (95%) of 19 participants in the middle dose group, and 15 (94%) of 16 participants in the high dose group at day 14, and 12 (60%) of 20 participants in the low dose group, 16 (84%) of 19 participants in the middle dose group, and 16 (100%) of 16 participants in the high dose group at day 28.

	Day 14				Day 28			
	Low dose group (n=36)	Middle dose group (n=36)	High dose group (n=36)	p value	Low dose group (n=36)	Middle dose group (n=36)	High dose group (n=36)	p value
ELISA antibodies to the receptor binding domain								
GMT	76.5 (44.3–132.0)	91.2 (55.9–148.7)	132.6 (80.7–218.0)	0.29	615.8 (405.4–935.5)	806.0 (528.2–1229.9)	1445.8 (935.5–2234.5)	0.016
≥4-fold increase	16 (44%)	18 (50%)	22 (61%)	0.35	35 (97%)	34 (94%)	36 (100%)	0.77
Neutralising antibodies to live SARS-CoV-2								
GMT	8.2 (5.8–11.5)	9.6 (6.6–14.1)	12.7 (8.5–19.0)	0.24	14.5 (9.6–21.8)	16.2 (10.4–25.2)	34.0 (22.6–50.1)	0.0082
≥4-fold increase	10 (28%)	11 (31%)	15 (42%)	0.42	18 (50%)	18 (50%)	27 (75%)	0.046

Data are mean (95% CI) or n (%). The p values are the result of comparison across the three dose groups. If the difference was significant across the three groups, the differences between groups were estimated with 95% CIs. SARS-CoV-2=severe acute respiratory syndrome coronavirus 2. GMT=geometric mean titre.

Table 3: Specific antibody responses to the receptor binding domain, and neutralising antibodies to live SARS-CoV-2

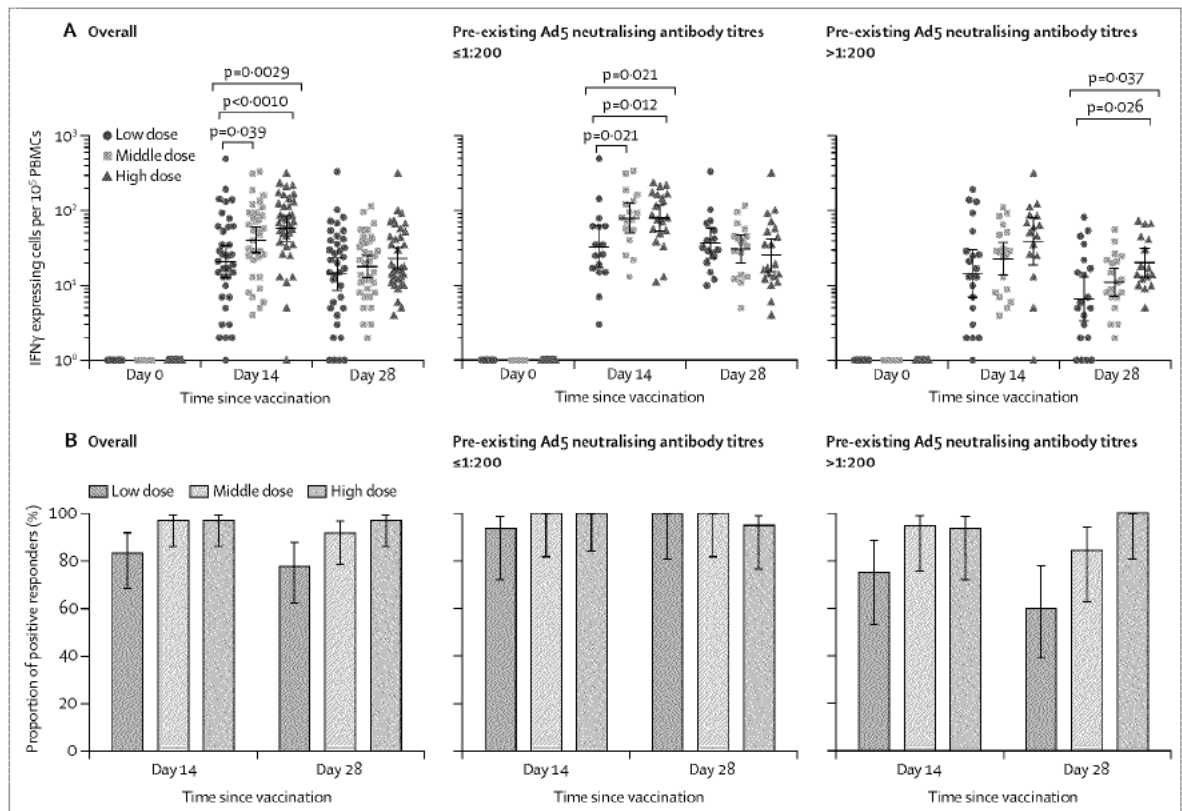


Figure 1: Specific T-cell response measured by ELISpot

(A) The number of specific T cells with secretion of IFN γ at days 0, 14, and 28 in all participants, and stratified by pre-existing Ad5 neutralising antibody titres. (B) The proportion of positive ELISpot responders at days 14 and 28 post-vaccination in all participants, and stratified by pre-existing Ad5 neutralising antibody titres. IFN=interferon. PBMCs=peripheral blood mononuclear cells. Ad5=adenovirus type-5. ELISpot=enzyme-linked immunospot.

IFN γ was detected from CD4⁺ and CD8⁺ T cells after the vaccination at day 14 and 28, in all dose groups (figure 2, appendix p 13). The TNF α expression from CD4⁺ T cells tended to be significantly lower in the low dose group than that in the high dose ($p<0.0001$) and middle dose groups ($p=0.0032$), on day 14. The TNF α expression from CD8⁺ T cells showed an overall p value of less than 0.0001 across the three groups on day 14. And the TNF α expression

from CD8⁺ T cells tended to be higher in the high dose group than that in both the middle dose group ($p=0.016$) and the low dose group ($p<0.0001$). The p values are for the pairwise comparisons between groups. Amounts of IL-2 detected from CD4⁺ T cells were higher than that detected from CD8⁺ cells. The proportions of polyfunctional phenotypes detected from memory CD4⁺ T cells were higher than those from CD8⁺ T cells. Higher

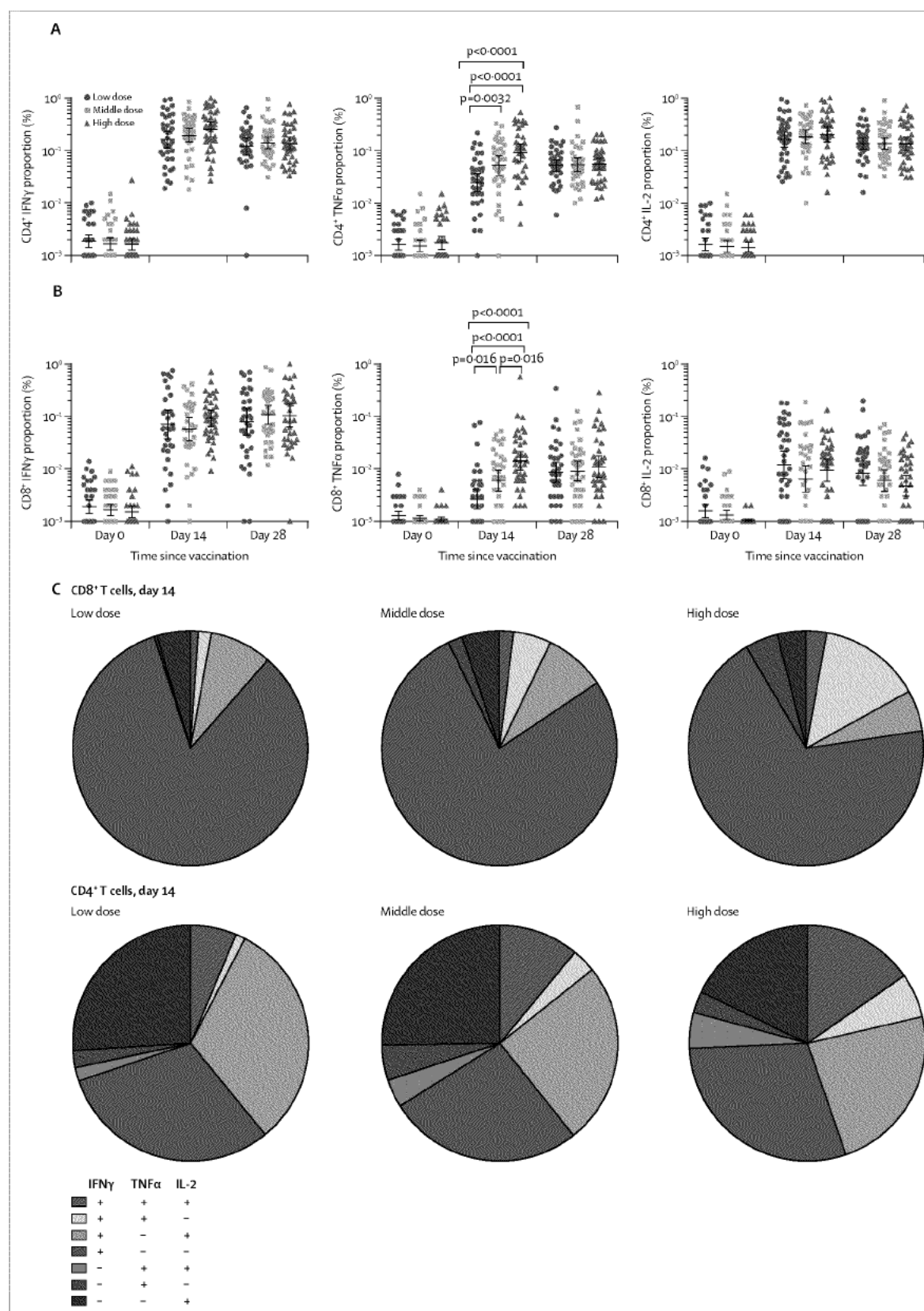


Figure 2: Flow cytometry with intracellular cytokine staining before and after vaccination
 (A) Percentage of cells secreting IFN γ , TNF α , and IL-2 from CD4⁺ T cells. (B) Percentage of cells secreting IFN γ , TNF α , and IL-2 from CD8⁺ T cells. (C) The proportion of CD4⁺ T cells and CD8⁺ T cells producing any combination of IFN γ , TNF α , and IL-2. The analyses are for 108 participants, with 36 in each dose group.
 IFN=interferon. TNF=tumour necrosis factor. IL=interleukin.

proportions of polyfunctional phenotypes were noted with the higher vaccine doses. We also noted that pre-existing Ad5 neutralising antibody had a negative effect on the pattern of T-cell responses (appendix pp 14–16). A post-hoc analysis showed that 28 (78%) participants in the low dose group, 33 (92%) participants in the middle dose group, and 36 (100%) participants in the high dose group showed either positive T-cell responses to spike glycoprotein or seroconversion of neutralising antibody to live SARS-CoV-2, at day 28 post-vaccination (appendix p 17).

To exclude any possible SARS-CoV-2 exposure during the study period, we tested the serum antibodies to nucleocapsid protein of SARS-CoV-2 in participants at day 28 using a special IgG/IgM rapid test kit (Vazyme Biotech, number CD101, Nanjing, China), but none of the participants were positive.

Discussion

To our knowledge, this is the first report on a first-in-human clinical trial of a novel Ad5 vectored COVID-19 vaccine. The Ad5 vectored COVID-19 vaccine was tolerated in healthy adults in all three dose groups. The most common adverse reactions were fever, fatigue, headache, and muscle pain with no significant difference in the incidence of adverse reactions across the groups. Most adverse events reported were mild or moderate in severity. We noticed a higher reactogenicity profile of the high dose at 1.5×10^{11} viral particles, presenting as severe fever, fatigue, muscle pain, or joint pain, which might be associated with viraemia caused by Ad5 vector infection. However, the severe adverse reactions were transient and self-limiting. Additionally, no abnormal changes in laboratory measurements were clinically significant or considered to be related to the vaccine. The profile of adverse events reported in this trial is similar to that of another Ad5 vector-based Ebola vaccine expressing glycoprotein.¹⁶ To accelerate the process of clinical evaluation of the candidate COVID-19 vaccine, we selected doses for the phase 2 study mainly on the basis of the safety profile of the candidate vaccines shown in the participants within 7 days and 14 days post-vaccination. We chose the low dose (5×10^{10} viral particles) and middle dose (1×10^{11} viral particles) to be further assessed in a phase 2 clinical trial.

The Ad5 vectored COVID-19 vaccine was immunogenic, inducing humoral and T-cell responses rapidly in most participants. Onset of detectable immune responses was rapid, with T-cell responses peaking at day 14 after vaccination and antibodies peaking at day 28. The antibody response to the vaccine in the high dose group was slightly greater than that in the middle dose and low dose groups. A single dose of Ad5 vectored COVID-19 vaccine was able to elicit a four-fold increase in binding antibodies to RBD in 94–100% of participants, and a four-fold increase to live virus in 50–75% of participants. Despite differences in magnitudes of the antibodies measured through different methods, there was a strong

positive correlation between binding antibodies and neutralising antibody titres to the live virus. High proportions of participants with positive T-cell responses were noted across the all dose groups post-vaccination. The activation of both CD4⁺ T cells and CD8⁺ T cells was observed in vaccine recipients, particularly for antigen-specific CD4⁺ T cells and CD8⁺ T cells. However, both the specific antibody response and T-cell response induced by vaccination were partly diminished by the presence of high pre-existing anti-Ad5 immunity.

Currently, correlates of protection for a vaccine against COVID-19 are unknown, and the roles of the specific antibodies or T cells in building effective protection are not yet defined. Therefore, we are unable to predict the protection of the Ad5 vectored COVID-19 vaccine on the basis of the vaccine-elicited immune responses in this study. However, previous studies investigating SARS and Middle East respiratory syndrome (MERS) found that the increases in specific antibodies were temporary, and declined quickly in patients after recovery, whereas the specific CD4⁺ and CD8⁺ T-cell responses played an essential role in immunity.^{17,18} A similar rapid decline of the specific antibody amounts in patients with COVID-19 after recovery was also noted,^{19,20} suggesting that both specific cellular and humoral immunity are potentially important for a successful COVID-19 vaccine. Here, we only report the data within 28 days after the vaccination, but we are going to follow up the vaccine recipients for at least 6 months, so more data will be obtained.

This study was done in Wuhan, Hubei province, which was the centre of the COVID-19 epidemic in China.²¹ People living in the city of Wuhan had a much higher risk of SARS-CoV-2 infection compared with those living in other cities outside of Hubei province, even though when we initiated this trial, the city had already begun lockdown and implemented mandatory home isolation for residents. Therefore, we did serological screening, nucleic acid testing, and chest CT to exclude participants who had been previously exposed to SARS-CoV-2 during recruitment. In addition, we arranged for all participants in our study to stay in a designated hotel for 14 days post-vaccination. This arrangement facilitated the observation of adverse events after the immunisation of the participants, and reduced the risk of SARS-CoV-2 exposure during the following 2 weeks. These measures allowed the study to be done successfully without interference by the circulation of SARS-CoV-2, which is especially important in the absence of a placebo control.

Interpretation of the results of this study is limited by the small size of the cohort, the short duration of follow-up, and the absence of a randomised control group. As it was a first-in-human study of the Ad5 vectored COVID-19 vaccine, it was not designed to measure the vaccine efficacy. However, in preclinical studies, seven out of eight ferrets were protected from having detectable virus copies when challenged by SARS-CoV-2 through nasal dripping 21 days after immunisation with the vaccine,

whereas only one out of eight ferrets in the control group was negative for virus copies (Wei C, unpublished). We aimed to evaluate the safety and tolerability of the candidate vaccine in healthy adults, with no interference by underlying diseases or medicines. However, results of our study indicated that older age could have a negative effect on the vaccine-elicited responses to SARS-CoV-2. In this trial, no participants were older than 60 years and only 16% of the participants were older than 50 years, providing limited information on the capability of generating a potent cellular and humoral response in the older population. Since age has also been identified as an independent risk factor for severe disease associated with SARS-CoV-2 infection,^{4,22} and there is a possibility that an even lower immune response might be found in the older population, we are going to include participants who are older than 60 years in the phase 2 study considering this population as an important target population for a COVID-19 vaccine. Additionally, experience with vaccine candidates for SARS and MERS have raised concerns about the antibody-dependent enhancement in participants who are infected with a circulating SARS-CoV-2 post-vaccination.²³ However, this study was not statistically powered to measure any safety outcome, especially for the concerns around immunopathology and antibody-dependent enhancement events associated with the full-length spike glycoprotein vaccine antigen.²⁴ Our study found that the pre-existing Ad5 immunity could slow down the rapid immune responses to SARS-CoV-2 and also lower the peak of the responses, particularly for humoral immunity. The high pre-existing Ad5 immunity might also have a negative effect on the persistence of the vaccine-elicited immune responses. In previous studies, heterologous prime-boost combinations or homologous prime-boost regimens with Ad5 vectored vaccines were shown to be able to induce more strong and durable immunogenic responses in populations with high pre-existing Ad5 immunity.^{25–27} Nevertheless, limited information is available for the effects of multiple doses of the candidate Ad5 vectored COVID-19 vaccine in humans, which warrants further investigation.

Over the past decade, the vaccine industry and clinical research centres have been asked to provide urgent responses to epidemics of emerging infectious diseases, such as H1N1 influenza, Ebola virus, Zika, MERS, and now SARS-CoV-2.²³ The risk of COVID-19 caused by SARS-CoV-2 is ongoing, making the need for effective vaccines even more urgent.²⁸ We started the development of this candidate vaccine in January, 2020, when SARS-CoV-2 was first isolated and sequenced. The full-length spike glycoprotein was selected as the vaccine antigen, mainly on the basis of previous experience with SARS and MERS vaccines. Previous findings suggested that those vaccines expressing full-length spike glycoprotein can induce good immune responses and protective efficacy.²⁹ Although the RBD comprises

the critical neutralising domains for the coronaviruses, the neutralising epitopes located outside the RBD were also identified.^{30,31} The full-length spike was chosen in most of the viral vectored, mRNA, or DNA COVID-19 vaccines in development.⁹ The Ad5 vector vaccine platform is highly efficient and well established as a vaccine antigen delivery system. In addition to our candidate Ad5 vectored COVID-19 vaccine, there are several other Ad5-based vaccines against COVID-19 listed in the WHO draft landscape of COVID-19 candidate vaccines, including Ad5 S (GREVAXTM platform) in the USA, and Oral Ad5 S (Stabilitech Biopharma) in the UK.⁹ However, aside from pre-existing anti-Ad5 immunity, there is a concern about the increased risk of HIV-1 acquisition associated with Ad5 activated CD4⁺ T cells.³² Although the association between HIV-1 acquisition risk and Ad5 vectored vaccine is controversial and its mechanism is unclear, the potential risks should be taken into account in studies with this viral vector delivery platform. We plan to monitor the participants in our upcoming phase 2 and phase 3 studies to assess the indication for any such acquisition.

In conclusion, we found that the Ad5 vectored COVID-19 vaccine is tolerable and immunogenic in healthy adults. Specific humoral responses against SARS-CoV-2 peaked at day 28 post-vaccination, and rapid, specific T-cell responses were noted from day 14 after one shot of the vaccine. There is potential for further investigation of the Ad5 vectored COVID-19 vaccine for the control of the COVID-19 outbreak. An ongoing phase 2 trial in China (NCT04341389) will provide more information on the safety and immunogenicity of the Ad5 vectored COVID-19 vaccine.

Contributors

F-CZ and Y-HL were co-first authors. F-CZ, WW, and WC were joint corresponding authors. F-CZ is the principal investigator of this trial. X-HG and WW worked as co-principal investigators of this trial. F-CZ, WC, X-HG, L-HH, Y-HL, W-JW, J-XL, and S-YJ designed the trial and the study protocol. J-XL drafted the manuscript. WC contributed to critical review and revision of the manuscript. F-CZ, W-JW, J-XL, and S-YJ contributed to the data interpretation and revision of the manuscript. X-WW was responsible for the statistical analysis. J-JX and B-SW contributed to study supervision. WW, W-JW, ZW, LeW, S-YJ, and H-DJ led and participated in the site work, including the recruitment, follow-up, and data collection. Y-HL, TJ, YH, LiW, and S-BX were responsible for laboratory analyses. W-JW, J-XL, and S-YJ contributed to the literature search. J-BG and S-PW monitored the trial.

Declaration of interests

WC reports grants from the National Key R&D Program of China (2020YFC10841400), and grants from the National Science and Technology Major Project (2016ZX10004001, 2018ZX09201005). J-BG is an employee of CanSino Biologics. All other authors declare no competing interests.

Data sharing

We support data sharing of the individual participant data. The individual participant data that underlie the results reported in this Article, after de-identification (text, tables, figures, and appendix) will be shared. Individual participant data will be available beginning 3 months and ending 1 year after publication. Supporting clinical documents including the study protocol, statistical analysis plan, and the informed consent form will be available immediately following publication for at least 1 year. Researchers who provide a scientifically sound proposal will be

For supporting clinical documents see http://www.jsdc.cn/jkfw/kygz/202005/t20200517_68894.html

allowed access to the individual participant data. Proposals should be directed to jszfc@vip.sina.com or cw0226@foxmail.com. These proposals will be reviewed and approved by the sponsor, investigator, and collaborators on the basis of scientific merit. To gain access, data requesters will need to sign a data access agreement.

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Sent: 5/26/2020 7:35:22 AM
To: John Fleming (b) (6) @who.eop.gov]
Subject: Liu Conv Plasma Mt Sinai 2020 preprint.pdf
Attachments: Liu Conv Plasma Mt Sinai 2020 preprint.pdf

Nice early report from Mt. Sinai regarding the efficacy of convalescent plasma. I thought you'd find it of interest, John.

thanks

Steve

1 Convalescent plasma treatment of severe COVID-19: A matched control study

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Abstract

Background

Since December 2019, Coronavirus Disease 2019 (COVID-19) has become a global pandemic, causing mass morbidity and mortality. Prior studies in other respiratory infections suggest that convalescent plasma transfusion may offer benefit to some patients. Here, the outcomes of thirty-nine hospitalized patients with severe to life-threatening COVID-19 who received convalescent plasma transfusion were compared against a cohort of retrospectively matched controls.

Methods

Plasma recipients were selected based on supplemental oxygen needs at the time of enrollment and the time elapsed since the onset of symptoms. Recipients were transfused with convalescent plasma from donors with a SARS-CoV-2 (severe acute respiratory disease coronavirus 2) anti-spike antibody titer of $\geq 1:320$ dilution. Matched control patients were retrospectively identified within the electronic health record database. Supplemental oxygen requirements and survival were compared between plasma recipients and controls.

Results

Convalescent plasma recipients were more likely than control patients to remain the same or have improvements in their supplemental oxygen requirements by post-transfusion day 14, with an odds ratio of 0.86 (95% CI: 0.75~0.98; $p=0.028$). Plasma recipients also demonstrated improved survival, compared to control patients (log-rank test: $p=0.039$). In a covariates-adjusted Cox model, convalescent plasma transfusion improved survival for non-intubated patients (hazard ratio 0.19 (95% CI: 0.05 ~0.72); $p=0.015$), but not for intubated patients (1.24 (0.33~4.67); $p=0.752$).

Conclusions

Convalescent plasma transfusion is a potentially efficacious treatment option for patients hospitalized with COVID-19; however, these data suggest that non-intubated patients may benefit more than those requiring mechanical ventilation.

Introduction

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is a positive-sense, single-stranded RNA virus belonging to the family *Coronaviridae*. Humans infected with SARS-CoV-2 may develop Coronavirus Disease 2019 (COVID-19), which manifests across a wide spectrum of clinical severity ranging from a mild upper respiratory tract illness to a diffuse viral pneumonia causing acute respiratory failure, with sequelae including acute lung injury, multi-organ dysfunction syndrome, and death.¹⁻³ Antibody responses to coronavirus infections typically appear 2-3 weeks after the onset of illness and are rarely observed earlier.⁴⁻⁶

Although the relationship between disease severity and antibody response has yet to be firmly established,⁷ transfusion with convalescent plasma may provide a therapeutic option in the current treatment-limited environment.⁸⁻¹⁰ Historical evidence supports the efficacy of convalescent plasma transfusions to treat a variety of infectious diseases, including influenza, Junin virus, and severe acute respiratory syndrome (SARS).¹¹⁻¹⁴ Initial data supporting convalescent plasma transfusions for COVID-19 include three case series from China of 5, 10, and 6 patients.¹⁵⁻¹⁷ In respiratory infections specifically, the strongest evidence suggests that the benefit of passive antibody transfer is most demonstrable in patients who were treated within days of symptom onset.^{12,13,18,19} Therefore, we hypothesized that treatment of patients with convalescent plasma early in the disease course may reduce morbidity and mortality associated

with COVID-19. Presented here are preliminary outcomes for 39 patients with severe to life-threatening COVID-19 who received convalescent plasma transfusions at a single academic medical center, The Mount Sinai Hospital, in New York City.

Methods

Patients

Forty-five adult patients were identified as eligible for COVID-19 convalescent plasma transfusion under the criteria established for the FDA single patient emergency investigational new drug (eIND) process. FDA authorization was requested and obtained for COVID-19 convalescent plasma transfusion. Four patients improved and 2 patients withdrew consent prior to receipt of plasma, leaving 39 evaluable patients who received COVID-19 convalescent plasma. Patients were hospitalized in a single academic medical center in New York City for COVID-19 between 24 March 2020 and 8 April 2020. Patients were screened by symptom duration and by severity of disease on a case-by-case basis, as assessed by oxygen supplementation requirements and laboratory parameters. Patients or their legally authorized representatives provided informed consent prior to treatment. Both treatment and research were performed with the oversight of the Icahn School of Medicine at Mount Sinai Institutional Review Board (IRB).

Convalescent plasma transfusion

Convalescent plasma donors were screened for SARS-CoV-2 antibody titers by a two-step Spike protein-directed ELISA.^{20,21} Donors with anti-spike antibody titers $\geq 1:320$ were referred for blood collection at the New York Blood Center, which performed the plasmapheresis and then returned convalescent plasma units to The Mount Sinai Hospital. Plasma recipients were transfused with two units of ABO-type matched convalescent plasma. Each unit, approximately 250 milliliters in

volume, was infused over 1 to 2 hours. Recipients were monitored every 15 minutes for signs of transfusion-related reactions and then followed post-transfusion for outcomes.

Statistical analysis

To confirm the independent effect of convalescent plasma transfusion on improvement in oxygenation and survival, we conducted a propensity score-matched analysis using The Mount Sinai Hospital's COVID-19 confirmed patient pool from the same calendar period (24 March 2020 to 8 April 2020). A logistic regression was fit to predict the potential for plasma therapy based on time series data obtained at baseline upon admission, prior to transfusion, and the day of transfusion. Among the predictors, exact matching was enforced on the administration of hydroxychloroquine and azithromycin, intubation status and duration, length of hospital stay, and oxygen requirement on the day of transfusion. Other medications were administered too infrequently to enforce exact matching. Balance was well achieved between the plasma and control groups, as all predictors had a standardized mean difference less than 0.2. Details of the matching method and results are described in the Supplementary Appendix. A medical data team reviewed charts of the control patients to determine outcomes at 1, 7, and 14 days. The data team was not informed of the recipient to whom each control patient was matched. Because control patients were matched to plasma recipients by length of stay prior to transfusion, "day 0" was defined as the day of transfusion for the plasma recipients and as the corresponding day in the hospitalization course of the control patients.

Oxygen supplementation

Patients were then evaluated for their supplemental oxygen requirements and survival at three time points: days 1, 7, and 14 post-transfusion. Four categories of supplemental oxygen use status were collected for both cases and controls. These include, in order of increasing severity:

room air without supplemental oxygen required; low-flow oxygen delivery by standard nasal cannula; high-flow oxygen delivery, including non-rebreather mask; high-flow nasal cannula or bi-level positive airway pressure (BiPAP) non-invasive ventilation; and mechanical ventilation. A patient's oxygenation status at the three time points was considered to have worsened if they changed from a lower- to a higher-severity category compared to Day 0, or if they had died prior to the time point. A generalized estimating equations (GEE) approach with a logit link for binary data was used to model the effect of plasma on the odds of oxygenation improvement on days 1, 7, and 14 following transfusion, controlling for oxygen status on day 0. An independent working correlation structure was assumed for the patients within each cluster; however, the p-values were calculated based on the empirical standard errors. Since some patients were discharged with continued oxygen supplementation, the oxygen status of discharged patients was assumed to be no worse than low-flow oxygen by standard nasal cannula.

Survival

Kaplan-Meier survival curves and the log rank test were used to depict the overall post-transfusion survival. A Cox model was fit to estimate the hazard ratio for in-hospital mortality for the plasma group, with matched clusters treated as random effects and onset of intubation as a time-varying covariate. In addition, interactions between convalescent plasma administration and intubation duration were tested to see if the plasma effects were the same in subgroups.

Both oxygen status and survival models were adjusted for duration of symptoms prior to admission and drugs administered, as these data were only ascertained after the matching was completed. The initial drug list consisted of COVID-19 therapies used during the time of the

study that included azithromycin, broad-spectrum antibiotics, hydroxychloroquine, therapeutic anticoagulants, corticosteroids, directly acting antivirals, stem cells, and interleukin 1 and interleukin 6 inhibitors. Only those that had a p-value < 0.5, however, were included in the final model for adjustment. A liberal p-value was used here to be inclusive of any potential confounders. As a sensitivity analysis, the 1:2 matching without replacement data were also analyzed, where the balance between the matched pairs was enhanced but the study power was reduced. Descriptive data are reported as number (percent), mean ($\pm$ standard deviation) or median [min, max], as appropriate. Analysis was performed using SAS 9.4 (SAS Institute Inc., Cary, NC). All tests were 2-sided and statistical significance was defined as a p value < 0.05, unless otherwise indicated.

Results

Recipient characteristics

The average age of the recipients of convalescent plasma transfusion was 55 ($\pm$ 13) years (Table 1). The cohort was approximately two-thirds male and one-third female, similar to the proportions of men and women with severe disease in prior studies.¹ Recipients generally had few baseline co-morbidities: 54% were obese (body mass index $\geq$ 30) and 18% had a current or former history of tobacco use. One patient had end-stage renal disease requiring peritoneal dialysis. The median duration of symptoms prior to initial presentation was 7 [0, 14] days. Inflammatory markers were elevated with median d-dimer of 1.4 [0.27, >20] μ g/mL fibrinogen equivalent units, median ferritin 1135 [107, 7441] ng/mL, and median C-reactive protein 159 [12, 319] mg/L. The median time between admission and transfusion was 4 [1, 7] days. On the day of transfusion, the majority of the recipients were requiring supplemental oxygen via a non-invasive delivery device (87%). Four plasma recipients (10%) were mechanically ventilated at the time of

transfusion. In addition to receiving convalescent plasma transfusion, many recipients received a variety of inpatient pharmacotherapies throughout their hospitalizations (Table 2). There were no significant differences between plasma recipients and control patients in exposures to measured pharmacotherapies, except for therapeutic anticoagulation.

Respiratory Status

Plasma recipients and control patients were 100% matched on their supplemental oxygen requirement on day 0. Of them, 69.2% were receiving high-flow oxygen and 10.3% were receiving invasive mechanical ventilation. By day 14, clinical condition had worsened in 18.0% of the plasma patients and 24.3% in the control patients ($p=0.167$, Cochran-Mantel-Haenszel test). The covariates-adjusted odds ratio for worsening oxygenation on day 14 was 0.86 (95% CI: 0.75~0.98; $p=0.028$) (Figure 1). The effect of plasma appeared to be confounded by the use of therapeutic anticoagulants (unadjusted vs. adjusted OR: 0.90 vs. 0.84), but not on other types of drugs or duration of symptoms before admission (OR remained in the range of 0.90~0.91). On days 1 and 7, the plasma group also showed a reduction in the proportion of patients with worsened oxygenation status, but the group difference did not reach statistical significance.

Survival

As of 1 May 2020, 12.8% of plasma recipients and 24.4% of the 1:4 matched control patients had died (21.6% in the 1:2 matched dataset), and 71.8% and 66.7% (68.9%) had been discharged alive, respectively. The median follow-up time was 11 [1, 28] days for the plasma group and 9 [0, 31] days for the control group. Overall, we observed improved survival for the plasma group (log-rank test: $p=0.039$) (Figure 2). In a covariates-adjusted Cox model, convalescent plasma transfusion was significantly associated with improved survival in non-intubated patients (hazard ratios: 0.19 (95% CI: 0.05 ~0.72); $p=0.015$), but not in intubated patients (1.24 (0.33~4.67);

p=0.752) (P-value for the plasma and intubation interaction term was 0.050). There is no evidence that the effect of plasma depended on the duration of symptoms (p=0.19 for the plasma by duration interaction). The results remain robust in the model without covariates adjustment and in the 1:2 matched sample (Figure 3).

Discussion

The COVID-19 pandemic poses an unprecedented challenge, as physicians and scientists struggle in real time to identify effective interventions against SARS-CoV-2 and its complications. This initial assessment offers evidence in support of convalescent plasma transfusion as an effective intervention in COVID-19. Preliminary data suggest a potential mortality benefit, but greater numbers are needed to draw definitive conclusions. Interestingly, these data suggest that the survival effect of convalescent plasma may begin to manifest more than 1 week after transfusion. If this observation is borne out in subsequent studies, it could indicate that convalescent plasma prevents longer-term complications, such as acute lung injury or multi-organ dysfunction syndrome; however, this speculation awaits confirmation in a larger patient cohort.

This study has many unique strengths. It describes the largest cohort of COVID-19 patients treated with convalescent plasma thus far worldwide. Furthermore, New York City has a large and very diverse population, and its metropolitan area was among the earliest and hardest hit by the COVID-19 pandemic in the United States. Over this study's 16-day enrollment period (24 March 2020 to 8 April 2020), the Mount Sinai Health System admitted 4,152 confirmed COVID-19-positive patients. This large pool from which to draw control patients permitted an aggressive matching algorithm. Data from three different time frames -- baseline, prior to transfusion, and day of transfusion -- informed the matching of controls to cases to maximize their similarity.

In addition, the efficacy of passive antibody transfer relies heavily on the quality of the donor convalescent plasma. Mount Sinai rapidly developed and clinically deployed an ELISA to titrate SARS-CoV-2-specific antibodies in serum,¹⁸ enabling our center to refer for blood collection only those convalescent donors with the highest peripheral serum antibody titers of $\geq 1:320$.²² Prior smaller studies have reported on a variety of titer cutoffs,^{15,16} and at the time of this publication some centers are bypassing donor antibody titer pre-collection completely.¹⁷ Although the total quantity of anti-SARS-CoV-2 spike antibodies were assessed, it must be noted that we have not yet assessed the functionality of these antibodies in neutralizing the virus. Recent studies with SARS CoV-2 have generally found a high correlation between ELISA S protein binding activity and neutralization of SARS CoV-2.^{21,23}

Although controls were retrospectively identified by propensity matching, the conclusions drawn from these data are not as robust as a prospective, randomized, placebo-controlled study. Furthermore, the convalescent plasma recipient cohort is highly heterogeneous in regards to oxygen needs at the time of transfusion and the duration of symptoms prior to admission. Other than intubated versus non-intubated patients, the small size of this cohort lacks sufficient power to permit additional subgroup analyses. We did not observe significant benefit of convalescent plasma in intubated patients, consistent with past literature demonstrating that passive antibody transfer therapies are most efficacious early in disease.^{12,13,18,19} However, the number of intubated patients in this study is small, limiting our ability to reach any conclusions about this population. Future studies that include more mechanically ventilated patients will be needed to address this uncertainty.

No significant transfusion-related morbidity or mortality were observed in the convalescent plasma recipient cohort; however, potential harms are associated with plasma transfusion. There

is a risk of fluid volume overload, particularly in patients with end-stage renal disease or advanced heart failure. Allergic reactions to plasma are typically mild and self-limited. Plasma naturally contains procoagulants, whose additive effects are unknown in this disease, which is independently associated with hypercoagulability;²⁴ thus, pending more data, additional caution should be exercised in patients with acute thrombotic events. Convalescent plasma transfusions also have theoretical risks, such as hindering the maturation of the patient's own adaptive immune memory response and antibody-dependent enhancement. While keeping these risks in mind, additional studies are needed to confirm these findings and draw more definitive conclusions about the efficacy of convalescent plasma transfusion for the treatment of COVID-19 in different populations.

Acknowledgements

We thank all of the patients who participated in this study and their families. We also acknowledge the generosity of the thousands of anonymous tri-state area residents who recovered from COVID-19 and then volunteered to donate convalescent plasma for the benefit of others. We thank the New York Blood Center, Liise-anne Pirofski, Thomas Schneider, Carina Seah, Sindhu Srinivas, Douglas Tremblay, Freddy Nguyen, Miwa Geiger, Chaim Lebovits, and Jacqueline Lustgarten. We acknowledge the assistance of Icahn School of Medicine at Mount Sinai medical students: Sofia Ahsanuddin, Arence Paasewe, Ranjan Upadhyay, George Mellgard, Tyler Martinson, Bhavana Patil, Cynthia Luo, Saloni Agrawal, Alina Siddiqui, Julia Schwarz, Lydia Piendel, Jacqueline Emerson, Harrison Kaplan, Emma Klein, Mariely Garcia, James Johnson, Luke Maillie, and Elena Baldwin. We also appreciate the clinical expertise of the Mount Sinai Convalescent Plasma Squad: Nicholas Shuman, Daniela Delbeau, Donna

Catamero, Gillian Sanchez, Suzan Aird, Manpreet Mann, Tarashon Broome, Sonia Kleiner-Arje, Louise Wolf, Angela Lee, Lisa Gaynes, and Karyn Goodman. We dedicate this work to the New Yorkers who have lost their lives to COVID-19 with a special dedication to the health care workers who will always be remembered for their selflessness during this pandemic.

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Disclosures

Dr. Krammer reports that patent applications have been filed for the assay used to select plasma donors, and Mount Sinai has licensed its use to several companies. Dr. Aberg reports grants and personal fees from Gilead, grants and personal fees from Merck, grants and personal fees from Janssen, personal fees from Theratech, personal fees from Medicure, grants from Regeneron, grants and personal fees from Viiv, outside the submitted work. All other authors have nothing to disclose.

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 338

339 **Table 1. Demographics and clinical parameters of recipients prior to transfusion**

Characteristic*	Patients (N = 39)
Demographics	
Mean age $\pm$ SD – year	55 $\pm$ 13
Sex –	
Male / Female	25 (64) / 14 (36)
Mean Body-mass index $\pm$ SD †	31.7 $\pm$ 6.0
Coexisting disorder – no. (%)	
Asthma	3 (8)
Cancer¶	2 (5)
Chronic kidney disease	1 (3)
Chronic obstructive pulmonary disease	1 (3)
Current or former smoker	7 (18)
Diabetes mellitus	8 (21)
Hemorrhagic or ischemic stroke	0
Human immunodeficiency virus	0
Obesity	21(54)
Obstructive sleep apnea	2 (5)
Median duration of symptoms before admission – days	7 [0, 14]
Presenting symptoms – no. (%)	
Fever	26 (67)
Shortness of breath	26 (67)
Cough	24 (62)
Diarrhea	8 (21)
Sputum production	3 (8)

Sore throat	2 (5)
Vital signs on admission – no. (%)	
Temperature >100.4°F or 38°C	13 (33)
Heart rate >100 beats per min	22 (56)
Respiratory rate ≥ 20 breaths per min	28 (72)
Imaging – no. (%)	
Chest radiography	38 (97)
Chest computed tomography	3 (8)
Clinical parameters	
Laboratory data prior to transfusion	
White-cell count	
Median [range] – per mm ³	7600 [3900-22600]
Distribution – no (%)	
≥10,000/mm ³	10 (26)
≤4000/mm ³	2 (5)
Aspartate aminotransferase >40 U/liter – no (%)	26 (67)
Alanine aminotransferase >40/liter – no (%)	18 (46)
Lactate ≥1.5 mmol/liter – no (%)	23 (59)
D-dimer, median [range] - µg/ml Fibrinogen Equivalent units	1.4 [0.27, >20]
Fibrinogen, mean (±S.D.) –no./total no. (mg/dl)	684±140
Ferritin, median [range] – ng/ml	1135 [107, 7441]
C-Reactive Protein, median [range] – mg/liter	159 [12, 319]

Interleukin-6, mean ($\pm$ S.D.) – no./total no. (pg/ml)	178 $\pm$ 348
Length of stay prior to transfusion	
Median duration [range] – days	4 [1, 7]
Supplemental oxygen requirement prior to initiation of transfusion	
Standard nasal cannula – no. (%)	7 (18)
2 liters – no. (%)	0
3 liters – no. (%)	2 (5)
4 liters – no. (%)	2 (5)
$\geq$ 5 liters – no. (%)	3 (8)
High-flow oxygen, high-flow nasal cannula or BiPAP – no. (%)	27 (69)
Mechanical ventilation – no. (%)	4 (10)

340 *Plus-minus values are mean $\pm$ SD. Percentages may not total 100 because of rounding.

341 ‡The body-mass index is the weight in kilograms divided by the square of the height in meters.

342 ¶Cancer represents a patient with thyroid cancer status post resection and a patient with Gleason 6 prostate cancer.

343 ¶High-flow oxygen included venti-mask and non-rebreather mask; BiPAP = bi-level positive airway pressure.

344 *Plus-minus values are mean $\pm$ SD. Percentages may not total 100 because of rounding.

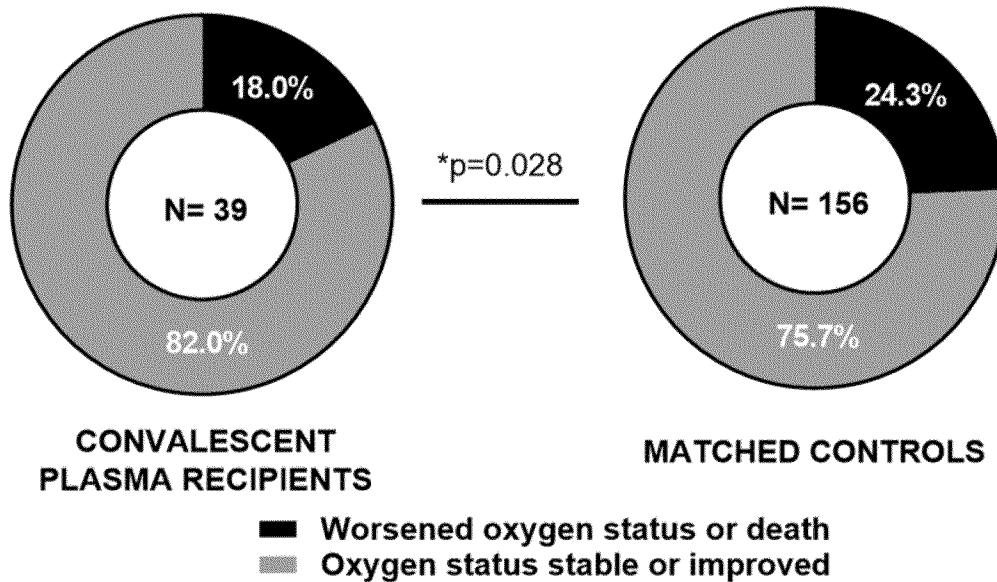
345 **Table 2. Recipient pharmacologic interventions**

		1:4 matching	1:2 matching
	Patients	Controls	Controls
Pharmacologic interventions	(N = 39)	(N=156)	(N=74)
Antimicrobial agents – no. (%)			
Azithromycin	31 (79)	133 (85)	63 (85)
Broad spectrum antibiotics	29 (74)	112 (72)	57 (77)
Hydroxychloroquine	36 (92)	148 (95)	69 (93)
Investigational antivirals	1 (3)	9 (6)	4 (5)
Therapeutic anticoagulation – no. (%)	26 (67)	64 (41)	32 (43)
Anti-inflammatory agents – no. (%)			
Corticosteroids	22(56)	90 (58)	38 (51)
Interleukin-1 inhibitors	0	0	0
Interleukin-6 inhibitors	3 (8)	13 (8)	6 (8)

* No significant differences were found between groups in both matched samples (p-values all >0.44), except for use of therapeutic anticoagulation (p <0.001 1:4 ratio and p=0.02 1:2 ratio).

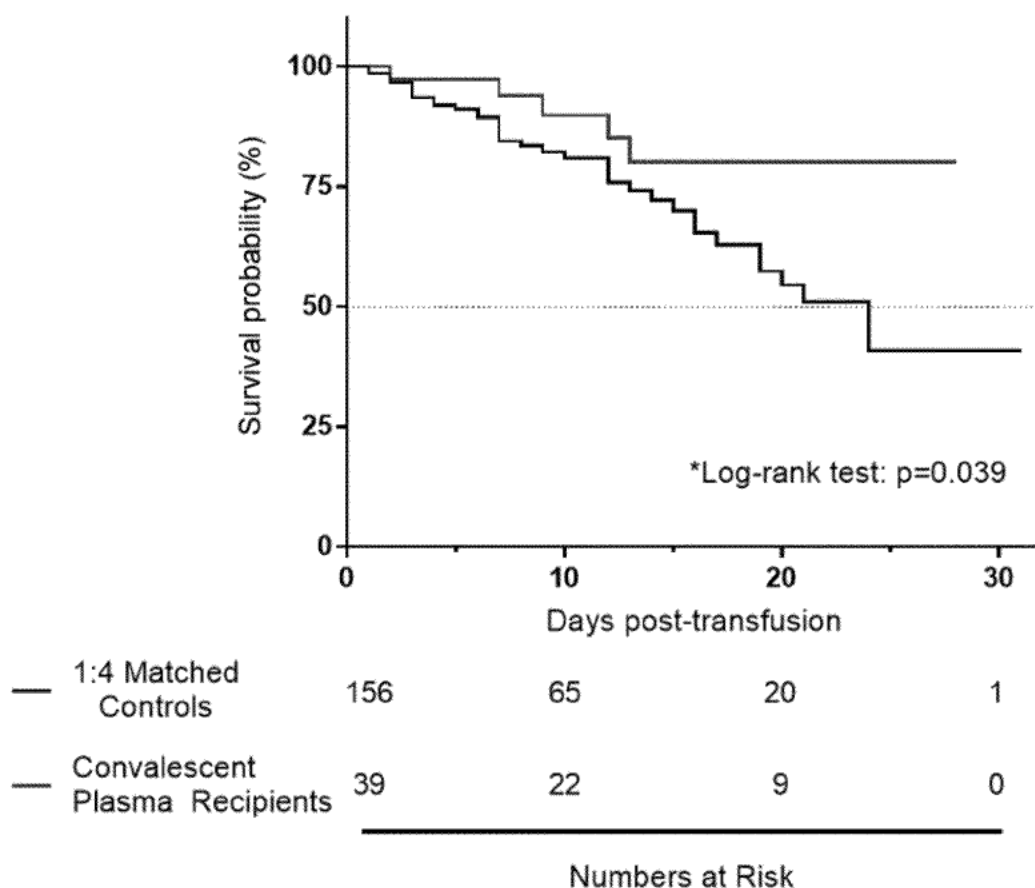
346

Figure 1. Comparison of oxygen requirements between Day 14 versus Day 0.



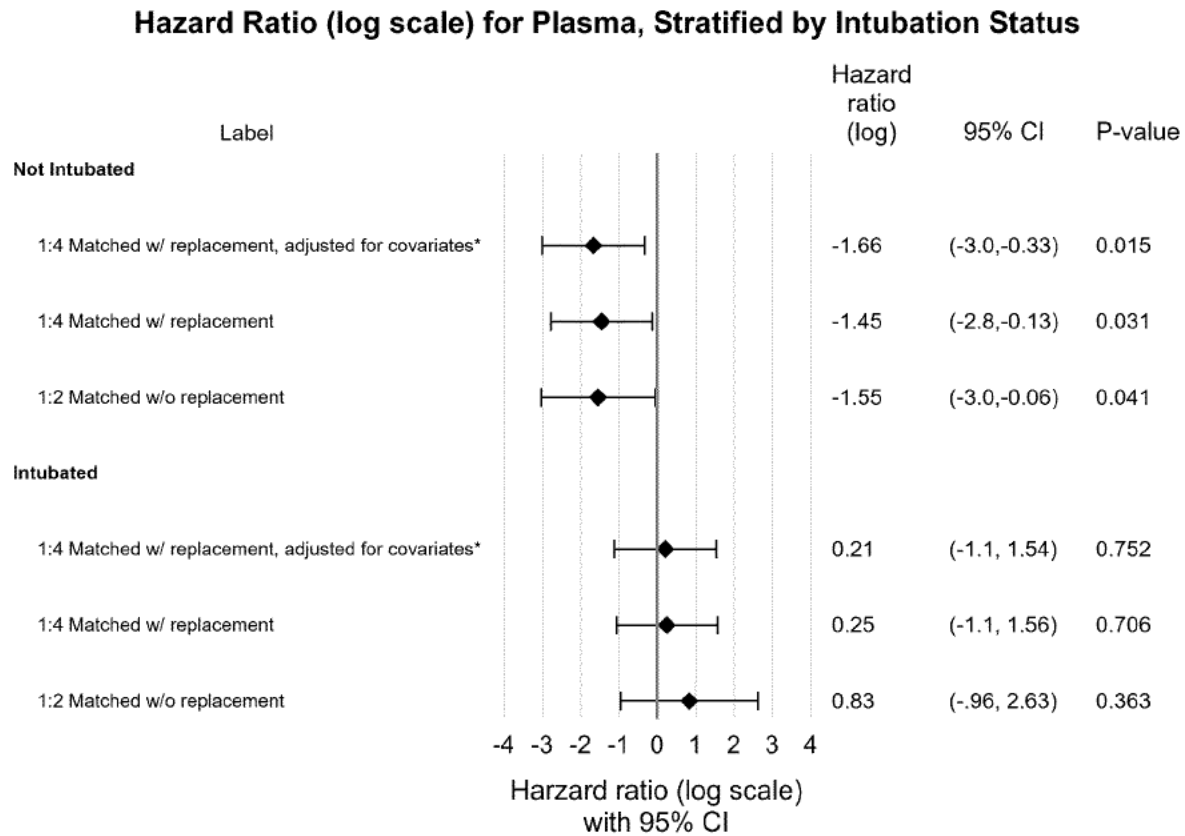
* Covariates adjusted. No significant differences were observed at day 1 (p=0.444) or day 7 (p=0.425).

350 **Figure 2. Survival Probability**



351

352 **Figure 3. Hazard ratios for in-hospital mortality**



* Adjustment: Duration of symptoms prior to admission, therapeutic anticoagulant, broad spectrum antibiotics, and antivirals.

353

From: [O'Malley, Devin M. EOP/OVP](#)
To: [Caliquiri, Laura](#); [Cacomo, Stephanie](#)
Subject: FW: Exclusive: U.S. coronavirus testing threatened by shortage of critical lab materials
Date: Tuesday, March 10, 2020 9:29:20 PM

Hi team FDA-

Sorry for the late email. From my conversations with FDA officials, it seems like (b) (5)



Thanks for all your hard work!!

Devin

Exclusive: U.S. coronavirus testing threatened by shortage of critical lab materials

By David Lim, Brianna Ehley

03/10/2020 06:46 PM EDT

A looming shortage in lab materials is threatening to delay coronavirus test results and cause officials to undercount the number of Americans with the virus.

The slow pace of coronavirus testing has created a major gap in the U.S. public health response. The latest problem involves an inability to prepare samples for testing, creating uncertainties in how long it will take to get results.

CDC Director Robert Redfield told POLITICO on Tuesday that he is not confident that U.S. labs have an adequate stock of the supplies used to extract genetic material from any virus in a patient's sample — a critical step in coronavirus testing.

"The availability of those reagents is obviously being looked at," he said, referring to the chemicals used for preparing samples. "I'm confident of the actual test that we have, but as people begin to operationalize the test, they realize there's other things they need to do the test."

The coronavirus task force convened by the White House is also aware of the shortages, and one official said members are working on it.

The growing scarcity of these "RNA extraction" kits is the latest trouble for U.S. labs, which have struggled to implement widespread coronavirus testing in the seven weeks since the country diagnosed its first case. Epidemiologists and public health officials say that the delayed rollout, caused in part by a botched CDC test, has masked the scope of the U.S. outbreak and hobbled efforts to limit it.

If enough processing kits aren't available, the risk that testing will be disrupted is "huge," said Michael Mina, associate medical director of molecular diagnostics at

Brigham and Women's Hospital in Boston.

“RNA extraction is the first step in being able to perform” a coronavirus test, he said. “If we cannot perform this step, the [coronavirus] test cannot be performed.”

Qiagen, a major supplier of the kits, confirmed that its product is backordered due to “the extraordinary pace” at which the world has increased coronavirus testing over the last few weeks.

Public health labs across the U.S. have tested more than 5,000 people, according to the Trump administration. HHS Secretary Alex Azar told lawmakers on Tuesday that U.S. labs’ capacity could grow to 10,000-20,000 people per day by the end of the week.

“Increased demand for testing has the potential to exhaust supplies needed to perform the test itself,” said Robin Patel, president of the American Society for Microbiology. That would limit the testing capacity of public health, hospital and commercial labs alike, she added.

Complicating the situation, most labs have been running at least two tests per patient — although that could soon change. The [CDC issued interim guidelines on Monday](#) that minimize the number of tests required for a diagnosis. The agency says labs can combine a patient’s nose and throat samples into one test, a move experts say will cut in half the amount of supplies used to test each person.

But Redfield said he doesn’t know how the agency would deal with any scarcity of RNA extraction kits and reagents that arise. “I don’t know the answer to that question,” he said when asked how the CDC would handle such a situation — adding that he is hopeful “there will be mechanisms between multiple manufacturers to correct” it.

Mandy Cohen, North Carolina’s secretary of health, said that a shortage of extraction kits and other chemicals had hampered testing in her state. “Folks were saying, ‘We are sending you the [test] kits,’ and I don’t think they understood at first what exact part of the supply chain we needed,” she said. “We needed extraction kits.”

An FDA spokesperson said that the agency is contacting labs that are testing for the coronavirus “to understand their supply issues and assist where we can.”

The FDA has also approved a change to the CDC diagnostic test that allows labs to switch from Qiagen’s RNA extraction method to another manufactured by Roche, says Denny Russell, who leads the coronavirus response at Washington state’s public health lab. But getting his lab ready to use the Roche method could take a week in part because technicians will need training to use it.

Commercial labs, which have recently started running coronavirus tests, have not experienced any supply shortages, according to a spokesperson for the American Clinical Laboratory Association.

In the meantime, Qiagen has told customers that it may not be able to fill large

standing orders, because it is trying to provide smaller numbers of kits to as many labs as possible, said spokesperson Robert Reitze. The company is ramping up production of RNA extraction kits at manufacturing sites in Hilden, Germany; Barcelona, Spain; and Germantown, Md.

Nancy Cook and Dan Goldberg contributed to this report.

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From: [O'Malley, Devin M. EOP/OVP](#)
To: [O'Malley, Devin M. EOP/OVP](#)
Cc: [Miller, Katie R. EOP/OVP](#); [Fetalvo, Ninio J. EOP/OVP](#); [Love, Kelly A. EOP/OVP](#)
Subject: Items for Clearance
Date: Saturday, March 14, 2020 5:03:52 PM

Hi everyone-

It's been a busy week, especially the last couple of days. We appreciate everyone's patience, especially [REDACTED] I also want to thank everyone for (b)(5) [REDACTED]

On a related note, starting on Monday, the schedule for Task Force related meetings is shifting a bit. This means that Katie and I, and other members of the team, will be harder to get ahold of from the hours of 9:00 am – 11:30 am (instead of 4:00 pm – 6:30 pm). Please consider this when thinking about reviews/clearances. We will also adjust the morning call to a time TBD.

As always, please feel free to call me whenever you have an issue, think something can be done better, or have an idea. We appreciate hearing from you.

Thank you for all you are doing!

Devin

Devin M. O'Malley
202-881-8964

From: [Finnen, April](#)
To: [2019-nCoV FDA IMG JIC Press](#)
Cc: [Lynch, Sarah](#); [2019-nCoV FDA IMG JIC Leadership](#)
Subject: OMA - heads up on VP clearance - FW: NICCL Meeting Call-Out 3.27.2020
Date: Friday, March 27, 2020 2:45:02 PM
Attachments: [image001.png](#)
[image002.png](#)
[ESF15_NICCL_Summary_v2_FINAL_20200327.pdf](#)
[image004.png](#)

From today's NICCL call (full notes attached):

(b)(5)

From: Brubach, April <April.Brubach@fda.hhs.gov>
Sent: Friday, March 27, 2020 1:22 PM
To: 2019-nCoV FDA IMG JIC Leadership <2019-nCoV-FDA-IMG-JIC-Leadership@fda.hhs.gov>
Subject: NICCL Meeting Call-Out 3.27.2020

(b)(5)

April Brubach, 301-512-0780

From: FEMA-ESF15-Coordination <FEMA-ESF15-Coordination@fema.dhs.gov>
Sent: Friday, March 27, 2020 1:07 PM
To: 2019-nCoV FDA IMG JIC Leadership <2019-nCoV-FDA-IMG-JIC-Leadership@fda.hhs.gov>; Clark, Alaina <alaina.clark@cisa.dhs.gov>; Glenn, Amanda <Amanda.Glenn@cisa.dhs.gov>; Palczewski, Andrew (OS) <Andrew.Palczewski@hhs.gov>; ALFONSO-ROYALS, ANGELICA <ANGELICA.ALFONSO-ROYALS@hq.dhs.gov>; Trevino, Anna <anna.trevino@fema.dhs.gov>; Tatem, Anne (OS) <Anne.Tatem@hhs.gov>; CERAOLO, ANTHONY <ANTHONY.CERAOLO@hq.dhs.gov>; Hall, Bill (OS) <bill.hall@hhs.gov>; BOZA-HOLMAN, SOFIA <SOFIA.BOZA-HOLMAN@hq.dhs.gov>; McPherson, Brendan <Brendan.McPherson@hq.dhs.gov>; Glauser, Brittany (OS) <Brittany.Glauser@hhs.gov>; Brown, Lynn <lynn.brown@fema.dhs.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>; Daniels,

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Kristina Baum <[\(b\) \(6\)@ostp.eop.gov](mailto:(b) (6)@ostp.eop.gov)>; Kuhns, Daniel (OS) <Daniel.Kuhns@hhs.gov>; Lange, John <John.Lange@hq.dhs.gov>; lashonda.walker@usda.gov; lashonda.walker@usda.gov; Laura Schlapp <laura.a.schlapp.civ@mail.mil>; Laura.J.Brown@faa.gov; Trueman, Laura (OS) <Laura.Trueman@hhs.gov>; Lauren Gorey <lgorey@doc.gov>; <[\(b\) \(6\)@nsc.eop.gov](mailto:(b) (6)@nsc.eop.gov)>; Kotwicki, Lauren (OS) <Lauren.Kotwicki@hhs.gov>; LBGALLAGHER@fbi.gov; leslie.lankster@fns.usda.gov; leslie.lankster@fns.usda.gov; Levine.Carolyn@epa.gov; lhagee@fbi.gov; Litzow, Elizabeth <elizabeth.litzow@fema.dhs.gov>; Ortega, Lorena <lorena.ortega@fema.dhs.gov>; Lori.Irving@dot.gov; Lucero, Mark <Mark.Lucero@fema.dhs.gov>; Lujan, Maria <maria.lujan@fema.dhs.gov>; Lynne.Donahue@usdoj.gov; Macaulay Porter <[\(b\) \(6\)@ovp.eop.gov](mailto:(b) (6)@ovp.eop.gov)>; MALIN, STEPHANIE <STEPHANIE.MALIN@cbp.dhs.gov>; mallory bloun <[\(b\) \(6\)@who.eop.gov](mailto:(b) (6)@who.eop.gov)>; RASCHER, MALLORY <MALLORY.RASCHER@hq.dhs.gov>; Mancha, Patricia <Patricia.Mancha@fema.dhs.gov>; Marc Short <[\(b\) \(6\)@ovp.eop.gov](mailto:(b) (6)@ovp.eop.gov)>; Marc.Raimondi@usdoj.gov; Margaret.Schaefer@dhs.gov; mark hinkle <mark.hinkle@ssa.gov>; Mark Mchale <mark.mchale@gsa.gov>; Mark.Ballesteros@va.gov; Weber, Mark (OS) <Mark.Weber@hhs.gov>; Mary.A.Brandenberger@usdoj.gov; Mary.E.Markos@usace.army.mil; Mary.E.Markos@usace.army.mil; Matt Schuck <Matthew.J.Schuck@hud.gov>; Matt Sheehey <msheehey@peacecorps.gov>; Matthew Lahr <matthew.lahr@dni.gov>; Matthew.Borgia@noaa.gov; Matthew.Burrell@gsa.gov; Maura.Beard@nctc.gov; McBride, Scott A LCDR <Scott.A.McBride@uscg.mil>; McCachrenC@state.gov; McCulloch, Robert <robert.mcculloch@fema.dhs.gov>; MCKENZIE MELISSA M <melissa.mckenzie@usss.dhs.gov>; MCMURRAY JULIA <Julia.Dagostino@usss.dhs.gov>; McNeil, Elizabeth <elizabeth.mcneil@fema.dhs.gov>; Meddie.Brown@gsa.gov; Media Inquiry <MediaInquiry@HQ.DHS.GOV>; media@ucia.gov; mediarelations@fcc.gov; Cardin, Megan <Megan.Cardin@fda.hhs.gov>; 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Mike Korbey <mike.korbey@ssa.gov>; Mike.Illenberg@oc.usda.gov; MILHOAN CATHERINE L <catherine.milhoan@usss.dhs.gov>; Miller, Bennett <Bennett.Miller@hq.dhs.gov>; Mina, Peter <Peter.Mina@hq.dhs.gov>; mira.lezell@dot.gov; Mizelle, Chad <Chad.Mizelle@hq.dhs.gov>; Harris, Missy J (NIH) <mjharris@mail.nih.gov>; MNLowry@fbi.gov; Molly Block <block.molly@epa.gov>; molly.meiners@treasury.gov; Morgan Bedan <[\(b\) \(6\)@who.eop.gov](mailto:(b) (6)@who.eop.gov)>; Morgan Ortagus <OrtagusMD@state.gov>; msgaine@cybercom.mil; Msiegel@doc.gov; msimms2@peacecorps.gov; Nalepa, Jessica <jessica.nalepa@fema.dhs.gov>; nancy gonzalez <nancy.gonzalez@ssa.gov>; NASON MICHAEL C <michael.nason@usss.dhs.gov>; Best, Natalia <Natalia.Best@hq.dhs.gov>; Natalie Hurst <[\(b\) \(6\)@ovp.eop.gov](mailto:(b) (6)@ovp.eop.gov)>; NationalJIC@dhs.gov; Lemar, Naweed (OS) <Naweed.Lemar@hhs.gov>; nctcpao@nctc.gov; Ndidi.Mojay@va.gov; Nelson, Jason <Jason.Nelson2@fema.dhs.gov>; NewsMedia@nps.gov; ng.ncr.ngb-arng.mbx.ngbjoccpa@mail.mil; 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Streeter, Ryan <Ryan.Streeter@hq.dhs.gov>; Strouse, Philip <Philip.Strouse@fema.dhs.gov>; Carlson, Sue <Sue.Carlson@fema.dhs.gov>; Sunset.r.Belinsky.mil@mail.mil; Susan Varga <(b) (6) @who.eop.gov>; Susan.b.miller@nctc.gov; Susanna.Marking-Stockl@uscg.gov; Sellman, Suzanne (OS) <Suzanne.Sellman@hhs.gov>; SWIFT, HEATHER <HEATHER.SWIFT@hq.dhs.gov>; Tagliento, Marc <Marc.Tagliento@fema.dhs.gov>; Broido, Tara (OS) <Tara.Broido@hhs.gov>; Bradley, Tasha (OS) <Tasha.Bradley@hhs.gov>; taylor.l.weeks@nasa.gov; TdJagerson@fbi.gov; Terrence.Hayes@va.gov; Terrence.Sutherland@sba.gov; t-hannen3@cranfordnj.org; Corry, Thomas (CMS) <Thomas.Corry@cms.hhs.gov>; Thompson, Christa <Christa.Thompson@fletc.dhs.gov>; Foster, Timothy (OS) <Timothy.Foster@hhs.gov>; timothy_williams@ios.doi.gov; (b) (6) @who.eop.gov; Vitek, Traci (OS) <Traci.Vitek@hhs.gov>; tracy.a.ograde-walsh.civ@mail.mil; Travis.Edwards@ice.dhs.gov; trhanna@nsa.gov; Troye, Olivia <(b) (6) @nsc.eop.gov>; Trupo.Michael@dol.gov; TUTONI VINCENT A <vincent.tutoni@ussd.dhs.gov>; Urbani, Adrien <adrien.urbani@fema.dhs.gov>; usagovemergency@gsa.gov; USCIS EXA NICCL Group <USCISEXANICCLGroup@uscis.dhs.gov>; Venture, Veronica <Veronica.Venture@HQ.DHS.GOV>; Vermette, Joseph <Joseph.Vermette@fema.dhs.gov>; veronica.davison.civ@mail.mil; Walsh, Brett <brett.walsh@fema.dhs.gov>; Ward, Erin <Erin.Ward@fema.dhs.gov>; Web Publishing <WebPublishing@HQ.DHS.GOV>; Wehagen, Robby <robby.wehagen@fema.dhs.gov>; Crozer, William (who.eop.gov) <(b) (6) @who.eop.gov>; Wilson, Thomas <thomas.wilson2@fema.dhs.gov>; Witmer, Wade <Wade.Witmer@fema.dhs.gov>

Subject: NICCL Summary 3.27.2020

Good afternoon,

Attached is the NICCL Summary for today's call. Thank you for your agency's participation.

Best,

Alexa Fortuna

Emergency Management Specialist | FEMA ESF 15 Coordination | Office of External Affairs

Mobile: (b) (6)

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Federal Emergency Management Agency
[fema.gov](https://www.fema.gov)

From: [O'Malley, Devin M. EOP/OVP](#)
To: [Rom, Colin](#); [Shah, Anand](#); [Cacomo, Stephanie](#)
Cc: [Murphy, Ryan \(OS\)](#); [Miller, Katie R. EOP/OVP](#)
Subject: Project
Date: Saturday, March 21, 2020 2:50:46 PM

Hey guys-

(b)(5) - [REDACTED]

[REDACTED] Dr. Hahn mentioned the name of a woman at FDA that would walk the reporter through some of the technical aspects, but I forget her name. Could you get this done tomorrow for online (and the Monday print)? (b)(5) [REDACTED]

Thanks!

Devin

Devin M. O'Malley

(b) (6) [REDACTED]

From: [O'Malley, Devin M. EOP/OVP](#)
To: [Cacomo, Stephanie](#); [Hall, Bill \(OS\)](#); [Miller, Katie R. EOP/OVP](#); [Fetalvo, Ninio J. EOP/OVP](#)
Cc: [Murphy, Ryan \(OS\)](#); [Oakley, Caitlin B \(OS\)](#); [McKeogh, Katherine \(OS\)](#); [Caliguri, Laura](#); [Felberbaum, Michael](#)
Subject: RE: FDA release on chloroquine
Date: Thursday, March 19, 2020 2:09:29 PM
Attachments: [image001.png](#)

(b)(5)

From: Cacomo, Stephanie <Stephanie.Cacomo@fda.hhs.gov>
Sent: Thursday, March 19, 2020 2:01 PM
To: O'Malley, Devin M. EOP/OVP (b)(6) @ovp.eop.gov>; Hall, Bill (OS) <bill.hall@hhs.gov>; Miller, Katie R. EOP/OVP (b)(6) ovp.eop.gov>; Fetalvo, Ninio J. EOP/OVP (b)(6) @ovp.eop.gov>
Cc: Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>; McKeogh, Katherine (OS) <Katherine.McKeogh@hhs.gov>; Caliguri, Laura <Laura.Caliguri@fda.hhs.gov>; Felberbaum, Michael <Michael.Felberbaum@fda.hhs.gov>
Subject: RE: FDA release on chloroquine

(b)(5)

Stephanie Cacomo

Press Officer

Office of Media Affairs
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From: O'Malley, Devin M. EOP/OVP <(b)(6) @ovp.eop.gov>
Date: March 19, 2020 at 1:53:15 PM EDT
To: Cacomo, Stephanie <Stephanie.Cacomo@fda.hhs.gov>; Hall, Bill (OS) (b)(6) @hhs.gov>; Miller, Katie R. EOP/OVP (b)(6) ovp.eop.gov>; Fetalvo, Ninio J. EOP/OVP (b)(6) o@ovp.eop.gov>
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<Michael.Felberbaum@fda.hhs.gov>
Subject: RE: FDA release on chloroquine

(b)(5)

From: Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>
Sent: Thursday, March 19, 2020 1:37 PM
To: O'Malley, Devin M. EOP/OVP (b)(6) @ovp.eop.gov>; Hall, Bill (OS) <bill.hall@hhs.gov>; Miller, Katie R. EOP/OVP (b)(6) @ovp.eop.gov>; Fetalvo, Ninio J. EOP/OVP (b)(6) @ovp.eop.gov>
Cc: Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>; McKeogh, Katherine (OS) <Katherine.McKeogh@hhs.gov>; Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>; Felberbaum, Michael <Michael.Felberbaum@fda.hhs.gov>
Subject: RE: FDA release on chloroquine

Will do. (b)(5) can we issue?

Stephanie Caccomo

Press Officer

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From: O'Malley, Devin M. EOP/OVP (b)(6) @ovp.eop.gov>
Sent: Thursday, March 19, 2020 1:35 PM
To: Hall, Bill (OS) (b)(6) @hhs.gov>; Miller, Katie R. EOP/OVP (b)(6) @ovp.eop.gov>; Fetalvo, Ninio J. EOP/OVP (b)(6) @ovp.eop.gov>
Cc: Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>; McKeogh, Katherine (OS) <Katherine.McKeogh@hhs.gov>; Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>; Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>
Subject: RE: FDA release on chloroquine

(b)(5)

From: Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>
Sent: Thursday, March 19, 2020 1:24 PM
To: O'Malley, Devin M. EOP/OVP (b)(6) @ovp.eop.gov>; Miller, Katie R. EOP/OVP (b)(6) @ovp.eop.gov>; Fetalvo, Ninio J. EOP/OVP (b)(6) @ovp.eop.gov>
Cc: Murphy, Ryan (OS/ASPA) <Ryan.Murphy1@hhs.gov>; Oakley, Caitlin B. (OS/ASPA)

<Caitlin.Oakley@HHS.GOV>; McKeogh, Katherine (OS/ASPA) <Katherine.McKeogh@hhs.gov>;
Caliguiri, Laura (FDA/OC) <Laura.Caliguiri@fda.hhs.gov>; Caccamo, Stephanie (FDA/OC)
<Stephanie.Caccamo@fda.hhs.gov>

Subject: FDA release on chloroquine

All...FDA is ready to issue this. Please let us know if we have the green light. Bill

William Hall

Deputy Assistant Secretary for Public Affairs (Public Health)
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Washington, DC
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Mobile: 202-823-2008
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>>>www.hhs.gov<<<



From: [O'Malley, Devin M. EOP/OVP](#)
To: [Cacomo, Stephanie](#)
Cc: [Miller, Katie R. EOP/OVP](#); [Fetalvo, Ninio J. EOP/OVP](#); [Manchester, Brittney](#); [Felberbaum, Michael](#); [Caliquiri, Laura](#)
Subject: Re: flag--media response re: n95 sterilization
Date: Sunday, March 29, 2020 1:58:40 PM

(b) (5)

Sent from my iPhone

On Mar 29, 2020, at 1:34 PM, Cacomo, Stephanie
<Stephanie.Cacomo@fda.hhs.gov> wrote:

Hi folks—

Flagging for you (b) (5) -

(b) (5)

Response:

(b) (5)

Stephanie Cacomo
Press Officer

Office of Media Affairs
Office of External Affairs
U.S. Food and Drug Administration
Desk: 301.348.1956
Cell: 240.762.8873
stephanie.caccomo@fda.hhs.gov

From: [O'Malley, Devin M. EOP/OVP](#)
To: [McGowan, Robert K \(CDC\)](#)
Cc: [McGuffee, Tyler A. EOP/OVP](#); [Hahn, Stephen](#); [Birx, Deborah L. EOP/NSC](#); [Fauci, Anthony S \(NIH\)](#); [Redfield, Robert R \(CDC\)](#); [Miller, Katie R. EOP/OVP](#); [Rom, Colin](#); [Lane, Henry C \(NIH\)](#); [Lenihan, Keagan](#); [Cacomo, Stephanie](#); [Caliquiri, Laura \(OS\)](#); [Galatas, Kate \(CDC\)](#); [Bonds, Michelle E \(CDC\)](#); [Murphy, Ryan \(OS\)](#)
Subject: Re: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document
Date: Saturday, March 21, 2020 3:27:44 PM

Adding the appropriate hhs Comms components to make sure they follow up with policy offices to start promoting this

Sent from my iPhone

On Mar 21, 2020, at 2:44 PM, McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov> wrote:

Thank you. We will post it shortly.

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From: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov>
Sent: Saturday, March 21, 2020 2:43:47 PM
To: McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; McGuffee, Tyler A. EOP/OVP (b) (6) @ovp.eop.gov>; Hahn, Stephen (b) (6) @fda.hhs.gov>; Birx, Deborah L. EOP/NSC (b) (6) @nsc.eop.gov>; Fauci, Anthony (NIH/NIAID) [E] (b) (6) @niaid.nih.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) @ovp.eop.gov>
Cc: Rom, Colin (FDA/OC) <Colin.Rom@fda.hhs.gov>; Lane, Cliff (NIH/NIAID) [E] <CLANE@niaid.nih.gov>; Lenihan, Keagan (FDA/OC) <Keagan.Lenihan@fda.hhs.gov>
Subject: RE: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

My understanding is that our approval was the final outstanding approval, so if that's correct then yes.

From: McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>
Sent: Saturday, March 21, 2020 2:42 PM
To: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov>; McGuffee, Tyler A. EOP/OVP (b) (6) @ovp.eop.gov>; Hahn, Stephen (b) (6) @fda.hhs.gov>; Birx, Deborah L. EOP/NSC (b) (6) @nsc.eop.gov>; Fauci, Anthony (NIH/NIAID) [E] (b) (6) @niaid.nih.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) @ovp.eop.gov>
Cc: Rom, Colin (FDA/OC) <Colin.Rom@fda.hhs.gov>; Lane, Cliff (NIH/NIAID) [E] <CLANE@niaid.nih.gov>; Lenihan, Keagan (FDA/OC) <Keagan.Lenihan@fda.hhs.gov>
Subject: Re: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Is the CDC cleared to post this on our website?

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From: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov>
Sent: Saturday, March 21, 2020 2:38:18 PM
To: McGuffee, Tyler A. EOP/OVP (b) (6) ovp.eop.gov>; Hahn, Stephen (b) (6) fda.hhs.gov>; Birx, Deborah L. EOP/NSC (b) (6) nsc.eop.gov>; Fauci, Anthony (NIH/NIAID) [E] (b) (6) niaid.nih.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) ovp.eop.gov>
Cc: Rom, Colin (FDA/OC) <Colin.Rom@fda.hhs.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; Lane, Cliff (NIH/NIAID) [E] <CLANE@niaid.nih.gov>; Lenihan, Keagan (FDA/OC) <Keagan.Lenihan@fda.hhs.gov>
Subject: RE: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Good. Just want to make sure that the appropriate comms teams know that we want to see the content that promotes this before it goes out. Thanks!

From: McGuffee, Tyler A. EOP/OVP (b) (6) ovp.eop.gov>
Sent: Saturday, March 21, 2020 2:26 PM
To: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov>; Hahn, Stephen (b) (6) fda.hhs.gov>; Birx, Deborah L. EOP/NSC (b) (6) nsc.eop.gov>; Fauci, Anthony S (NIH) (b) (6) niaid.nih.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) ovp.eop.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>; McGowan, Robert K (CDC) <omc2@cdc.gov>; Lane, Henry C (NIH) <clane@niaid.nih.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: RE: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Message from Dr. Stephen Hahn to all:

Attached is the FINAL v9. Dr. Hahn and Devin O'Malley just met in person and made the following changes:

(b) (5)

Pushing this back to OVP Comms for final affirmative clearance. Please advise when approved by OVP Comms we are ready for OVP comms to coordinate with Dr. Redfield, CDC communications and others on publication.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D.
Office of the White House Coronavirus Response Coordinator
Associate Advisor to the Office of the Vice President
C: (202) 881-8195 [no text]

From: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov
Sent: Saturday, March 21, 2020 1:59 PM
To: McGuffee, Tyler A. EOP/OVP (b) (6) ovp.eop.gov; Hahn, Stephen (b) (6) fda.hhs.gov; Birx, Deborah L. EOP/NSC (b) (6) nsc.eop.gov; Fauci, Anthony S (NIH) (b) (6) niaid.nih.gov; Redfield, Robert R (CDC) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) ovp.eop.gov
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>; McGowan, Robert K (CDC) <omc2@cdc.gov>; Lane, Henry C (NIH) <clane@niaid.nih.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: RE: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Some thoughts attached (b) (5)

From: McGuffee, Tyler A. EOP/OVP (b) (6) ovp.eop.gov
Sent: Saturday, March 21, 2020 1:14 PM
To: Hahn, Stephen (b) (6) fda.hhs.gov; Birx, Deborah L. EOP/NSC (b) (6) nsc.eop.gov; Fauci, Anthony S (NIH) (b) (6) niaid.nih.gov; Redfield, Robert R (CDC) <olx1@cdc.gov>; Miller, Katie R. EOP/OVP (b) (6) ovp.eop.gov; O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>; McGowan, Robert K (CDC) <omc2@cdc.gov>; Lane, Henry C (NIH) <clane@niaid.nih.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: RE: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Message from Dr. Stephen Hahn to OVP Comms:

Attached is the FINAL information for clinicians regarding treatment of COVID-19 patients. This has been reviewed and approved by the principals in the "To:" line. When approved by OVP Comms we are ready for you to coordinate with Dr. Redfield, CDC communications and others on publication.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D.
Office of the White House Coronavirus Response Coordinator
Associate Advisor to the Office of the Vice President
C: (202) 881-8195 [no text]

From: Hahn, Stephen <(b) (6)@fda.hhs.gov>
Sent: Saturday, March 21, 2020 12:48 PM
To: Birx, Deborah L. EOP/NSC <(b) (6)@nsc.eop.gov>; Lane, Henry C (NIH) <clane@niaid.nih.gov>; McGuffee, Tyler A. EOP/OVP <(b) (6)@ovp.eop.gov>; Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>; Redfield, Robert R (CDC) <olx1@cdc.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>; McGowan, Robert K (CDC) <omc2@cdc.gov>
Subject: Re: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

(b)(5)

From: Birx, Deborah L. EOP/NSC <(b) (6)@nsc.eop.gov>
Date: March 21, 2020 at 12:40:16 PM EDT
To: Lane, Henry C (NIH) <clane@niaid.nih.gov>, McGuffee, Tyler A. EOP/OVP <(b) (6)@ovp.eop.gov>, Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>, Hahn, Stephen <(b) (6)@fda.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>, McGowan, Robert K (CDC) <omc2@cdc.gov>
Subject: Re: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

(b) (5)

(b) (5) - DPP deb

From: "Lane, Cliff (NIH/NIAID) [E]" <clane@niaid.nih.gov>
Date: Saturday, March 21, 2020 at 12:31 PM
To: "McGuffee, Tyler A. EOP/OVP" <(b) (6)@ovp.eop.gov>, "Fauci, Anthony (NIH/NIAID) [E]" <(b) (6)@niaid.nih.gov>, "Hahn, Stephen" <(b) (6)@fda.hhs.gov>, "Birx, Deborah L. EOP/NSC" <(b) (6)@nsc.eop.gov>, "Redfield, Robert R. (CDC/OD)" <olx1@cdc.gov>
Cc: "Rom, Colin (FDA/OC)" <Colin.Rom@fda.hhs.gov>, "McGowan, Robert (Kyle) (CDC/OD/OCS)" <omc2@cdc.gov>

Subject: Re: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

I realize I am on the cc line, however I have three comments and have tracked suggestions:

(b) (5)

Cliff Lane

From: "McGuffee, Tyler A. EOP/OVP" <(b) (6) ovp.eop.gov>
Date: Saturday, March 21, 2020 at 11:33 AM
To: Anthony Fauci <(b) (6) niaid.nih.gov>, "Hahn, Stephen" <(b) (6) fda.hhs.gov>, "Birx, Deborah L. EOP/NSC" <(b) (6) nsc.eop.gov>, "Redfield, Robert R. (CDC/OD)" <olx1@cdc.gov>
Cc: "Lane, Cliff (NIH/NIAID) [E]" <clane@niaid.nih.gov>, "Rom, Colin (FDA/OC)" <Colin.Rom@fda.hhs.gov>, "McGowan, Robert (Kyle) (CDC/OD/OCS)" <omc2@cdc.gov>
Subject: NEEDS FINAL AFFIRMATIVE CLEARANCE RE: Treatment Document

Per Dr. Hahn, V6 attached for FINAL approval. Please REPLY ALL with affirmative clearance.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D.
Office of the White House Coronavirus Response Coordinator
Associate Advisor to the Office of the Vice President
C: (202) 881-8195 [no text]

From: Fauci, Anthony (NIH/NIAID) [E] <(b) (6) niaid.nih.gov>
Sent: Friday, March 20, 2020 7:47 PM
To: Hahn, Stephen <(b) (6) fda.hhs.gov>
Cc: Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Birx, Deborah L. EOP/NSC <(b) (6) nsc.eop.gov>; Lane, Cliff (NIH/NIAID) [E] <clane@niaid.nih.gov>; McGuffee, Tyler A. EOP/OVP <(b) (6) ovp.eop.gov>; Rom, Colin (FDA/OC) <Colin.Rom@fda.hhs.gov>
Subject: RE: Treatment Document

Sounds good to me.

Thanks,

Tony

From: Hahn, Stephen <(b) (6)@fda.hhs.gov>

Sent: Friday, March 20, 2020 7:36 PM

To: Fauci, Anthony (NIH/NIAID) [E] <(b) (6)@niaid.nih.gov>

Cc: Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Birx, Deborah L. EOP/NSC <(b) (6)@nsc.eop.gov>; Lane, Cliff (NIH/NIAID) [E] <clane@niaid.nih.gov>; (b) (6)@ovp.eop.gov; Rom, Colin (FDA/OC) <Colin.Rom@fda.hhs.gov>

Subject: Re: Treatment Document

Tony,

Looks like we (b) (5) - [REDACTED]. The group wants to make some more edits and then send out this evening for review. We would like to meet up prior to or after the task force meeting tomorrow. Sound OK?

Steve

Sent from my iPad

On Mar 20, 2020, at 7:06 PM, Hahn, Stephen <(b) (6)@fda.hhs.gov> wrote:

I have a couple of comments

(b) (5)

I'll await for other comments.

Thanks

Steve

Sent from my iPad

On Mar 20, 2020, at 6:45 PM, Fauci, Anthony (NIH/NIAID) [E]

<(b) (6)@niaid.nih.gov> wrote:

Team:

As per my discussion with Steve a few minutes ago, I have made some changes in the document. First, I stated what the purpose of the document is in the introduction. I have removed granular material that I do not feel contributes to our purpose. In addition, I have not checked out the references with the statements that were made. I am attaching a tracked version of the document that was your FINAL as well as a clean copy with all of the changes accepted. Please take a look and Steve said that he would like to set up a quick call to discuss after you have had a look. I am very sorry to come in with these changes at this late point, but I really did not get a chance to have a good look at the document as I was in a car.

Thanks,
Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: (301) 496-2263
FAX: (301) 496-4409
E-mail: (b) (6) niaid.nih.gov

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<dbInformation for Clinicians on COVID-19 Therapies31hcl -
with Fauci and Lane tracked changes showing.docx>
<dbInformation for Clinicians on COVID-19 Therapies31hcl -
with Fauci and Lane tracked Clean copy.docx>

From: [O'Malley, Devin M. EOP/OVP](#)
To: [Galatas, Kate \(CDC\)](#); [Cacomo, Stephanie](#); [Caliguri, Laura](#); [Murphy, Ryan \(OS\)](#)
Cc: [Hall, Bill \(OS\)](#); [Bonds, Michelle E \(CDC\)](#); [Oakley, Caitlin B \(OS\)](#); [Miller, Katie R. EOP/OVP](#); [Love, Kelly A. EOP/OVP](#)
Subject: RE: Releases
Date: Friday, March 13, 2020 7:49:05 AM

Someone had mentioned that (b) (5) [REDACTED]. No worries if not.

From: Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>
Sent: Friday, March 13, 2020 7:48 AM
To: O'Malley, Devin M. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov>; Cacomo, Stephanie (FDA/OC) <Stephanie.Cacomo@fda.hhs.gov>; Caliguri, Laura (FDA/OC) <Laura.Caliguri@fda.hhs.gov>; Murphy, Ryan (OS/ASPA) <Ryan.Murphy1@hhs.gov>
Cc: Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Oakley, Caitlin B. (OS/ASPA) <Caitlin.Oakley@HHS.GOV>; Miller, Katie R. EOP/OVP <(b) (6) [REDACTED]@ovp.eop.gov>; Love, Kelly A. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov>
Subject: Re: Releases

We are having a telebriefing at 1pm today — (b) (5) [REDACTED]. Undoubtedly we will be asked about this today and will be ready to respond on the telebriefing.

Take care,
Kate

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From: O'Malley, Devin M. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov>
Sent: Friday, March 13, 2020 7:37:44 AM
To: Cacomo, Stephanie (FDA/OC) <Stephanie.Cacomo@fda.hhs.gov>; Caliguri, Laura (FDA/OC) <Laura.Caliguri@fda.hhs.gov>; Murphy, Ryan (OS/ASPA) <Ryan.Murphy1@hhs.gov>
Cc: Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Oakley, Caitlin B. (OS/ASPA) <Caitlin.Oakley@HHS.GOV>; Miller, Katie R. EOP/OVP <(b) (6) [REDACTED]@ovp.eop.gov>; Love, Kelly A. EOP/OVP <(b) (6) [REDACTED]@ovp.eop.gov>
Subject: RE: Releases

Is anyone from the CDC available to provide an update on their end? I can wait to send our release if they have something to include.

From: Cacomo, Stephanie <Stephanie.Cacomo@fda.hhs.gov>
Sent: Friday, March 13, 2020 6:34 AM
To: O'Malley, Devin M. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov>; Caliguri, Laura <Laura.Caliguri@fda.hhs.gov>; Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>
Cc: Hall, Bill (OS) <bill.hall@hhs.gov>; Galatas, Kate (CDC) <kkg2@cdc.gov>; Bonds, Michelle E (CDC) <meb0@cdc.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>; Miller, Katie R. EOP/OVP <(b) (6) [REDACTED]@ovp.eop.gov>; Love, Kelly A. EOP/OVP <(b) (6) [REDACTED]@ovp.eop.gov>

Subject: RE: Releases

Noted. Will push soon

Stephanie Caccomo

Press Officer

Office of Media Affairs
Office of External Affairs
U.S. Food and Drug Administration
Desk: [301.348.1956](tel:301.348.1956)
Cell: [240.762.8873](tel:240.762.8873)
stephanie.caccomo@fda.hhs.gov

From: O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov>

Date: March 13, 2020 at 3:59:21 AM EDT

To: Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>, Caliguiri, Laura
<Laura.Caliguiri@fda.hhs.gov>, Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>

Cc: Hall, Bill (OS) <bill.hall@hhs.gov>, Galatas, Kate (CDC) <kkg2@cdc.gov>, Bonds,
Michelle E (CDC) <meb0@cdc.gov>, Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>,
Miller, Katie R. EOP/OVP <(b) (6) ovp.eop.gov>, Love, Kelly A. EOP/OVP
<(b) (6) ovp.eop.gov>

Subject: RE: Releases

Importance: High

Hi all-

Here is the plan:

(b) (5)

Thanks for your coordination on this; I think it will prove to be more effective.

Devin

(b) (5)

(b) (5)

(b) (5)

From: Cacco, Stephanie <Stephanie.Cacco@fda.hhs.gov>

Sent: Friday, March 13, 2020 12:06 AM

To: O'Malley, Devin M. EOP/OVP <(b) (6)@ovp.eop.gov>; Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>; Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>

Cc: Hall, Bill (OS) <bill.hall@hhs.gov>; Galatas, Kate (CDC) <kkg2@cdc.gov>; Bonds, Michelle E (CDC) <meb0@cdc.gov>; Oakley, Caitlin B (OS) <Caitlin.Oakley@HHS.GOV>

Subject: RE: Releases

Hi Devin—

Attaching our draft release. These actions happened this evening (within the last hour), so they can be discussed in AM TV programs. Please feel free to call if you need any walk through on any of this.

Stephanie Caccomo

Press Officer

Office of Media Affairs
Office of External Affairs
U.S. Food and Drug Administration
Desk: 301.348.1956
Cell: 240.762.8873
stephanie.caccomo@fda.hhs.gov

From: O'Malley, Devin M. EOP/OVP <(b) (6)@ovp.eop.gov>

Sent: Thursday, March 12, 2020 10:56 PM

To: Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>; Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>

Cc: Hall, Bill (OS) <bill.hall@hhs.gov>; Galatas, Kate (CDC) <kkg2@cdc.gov>; Bonds, Michelle E (CDC) <meb0@cdc.gov>; Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>

Subject: RE: Releases

Checking in on where folks are at with their releases.

(b) (5)

From: Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>

Sent: Thursday, March 12, 2020 8:32 PM

To: O'Malley, Devin M. EOP/OVP <(b) (6)@ovp.eop.gov>; Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>

Cc: Hall, Bill (OS) <bill.hall@hhs.gov>; Galatas, Kate (CDC) <kkg2@cdc.gov>; Bonds, Michelle E (CDC) <meb0@cdc.gov>; Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>

Subject: RE: Releases

Here is where we are: We are buttoning up on our end, going through our clearance, (b) (5) -

From: O'Malley, Devin M. EOP/OVP <(b) (6)@ovp.eop.gov>

Sent: Thursday, March 12, 2020 8:27 PM

To: Murphy, Ryan (OS) <Ryan.Murphy1@hhs.gov>
Cc: Hall, Bill (OS) <bill.hall@hhs.gov>; Galatas, Kate (CDC) <kkg2@cdc.gov>; Bonds, Michelle E (CDC) <meb0@cdc.gov>; Caccomo, Stephanie <Stephanie.Caccomo@fda.hhs.gov>; Caliguiri, Laura <Laura.Caliguiri@fda.hhs.gov>
Subject: RE: Releases

Thank you. Put NIH on by accident. Taking them off now.

From: Murphy, Ryan (OS/ASPA) <Ryan.Murphy1@hhs.gov>
Sent: Thursday, March 12, 2020 8:25 PM
To: O'Malley, Devin M. EOP/OVP (b) (6) <[REDACTED]@ovp.eop.gov>
Cc: Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>; Stover, Kathy (NIH/NIAID) [E] <kathy.stover@nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Caccomo, Stephanie (FDA/OC) <Stephanie.Caccomo@fda.hhs.gov>; Caliguiri, Laura (FDA/OC) <Laura.Caliguiri@fda.hhs.gov>
Subject: Re: Releases

+ Stephanie and Laura w/ FDA

On Mar 12, 2020, at 8:20 PM, O'Malley, Devin M. EOP/OVP (b) (6) <[REDACTED]@ovp.eop.gov> wrote:

Hi CDC and FDA-

I've heard from each of you separately that you will have testing-related press releases tomorrow.

Can you let me know how the drafting of materials is going? (b) (5) [REDACTED]

Thanks!

Devin

Devin M. O'Malley
202-881-8964

From: [O'Malley, Devin M. EOP/OVP](#)
To: [O'Malley, Devin M. EOP/OVP](#)
Cc: [Miller, Katie R. EOP/OVP](#); [Fetalvo, Ninio J. EOP/OVP](#); [Love, Kelly A. EOP/OVP](#)
Subject: Upcoming Items
Date: Saturday, March 14, 2020 6:16:24 PM

Hi all-

You are receiving this email because you have a principal that is on the Task Force or frequently attends its meetings. (b) (5)



As you may know, we are working on meetings with nurses, physicians, and the tourism industry, so having a sense of what you all may be planning could help us build out a more robust communications plan around those meetings.

Thanks!

Devin

Devin M. O'Malley
202-881-8964

From: [Murphy, Ryan \(OS/ASPA\)](#)
To: [Lemar, Naweed \(OS\)](#); [Robinson, Michael J \(OS\)](#); [Myrie, Simone \(OS\)](#); [Bradley, Tasha \(OS\)](#); [Formoso, Paula \(OS\)](#); [Daniels, Carla L \(OS\)](#); [Felberbaum, Michael](#); [Cacomo, Stephanie](#); [Block, Molly](#); [Galatas, Kate \(CDC\)](#); [Bonds, Michelle E \(CDC\)](#); [Oury, Rachael \(CDC\)](#); [Billet, Courtney R \(NIH\)](#); [Routh, Jennifer M \(NIH\)](#); [Burklow, John T \(NIH\)](#); [Myles, Renate H \(NIH\)](#); [Michael, Gretchen \(OS\)](#); [Kane, Eileen \(OS\)](#); [Danko, Carol \(OS\)](#); [Heck, Mia \(OS\)](#); [Broido, Tara \(OS\)](#); [Sherman, Jennifer \(OS\)](#)
Cc: [Blakeman, Scott \(OS\)](#); [Brennan, Patrick \(OS\)](#); [Caputo, Michael R \(OS\)](#); [Foster, Timothy \(OS\)](#); [Hall, Bill \(OS\)](#); [McKeogh, Katherine \(OS\)](#); [Oakley, Caitlin B \(OS\)](#); [Pratt, Michael \(OS\)](#); [Traverse, Brad \(OS\)](#); [Weber, Mark \(OS\)](#)
Subject: UPDATED: for clearances
Date: Friday, May 15, 2020 3:32:24 PM

Hey Folks – I hope everyone is having a good Friday afternoon. I wanted to send a quick update on the process here. Below are updated lists of WH and OVP folks who need to be on the clearance emails you send up to the WH/OVP. Also, please make sure that you receive affirmative WH approval in addition to OVP approval before proceeding.

Appreciate everyone's assistance and great work. Please let me know if you've any questions.

Thanks,

Ryan

For material and print interview clearances –

Devin O'Malley [\(b\) \(6\)](#) @ovp.eop.gov)
Katie Miller [\(b\) \(6\)](#) ovp.eop.gov)
Hannah MacInnis [\(b\) \(6\)](#) @ovp.eop.gov)
Alyssa Farah [\(b\) \(6\)](#) @who.eop.gov)
Kayleigh Gilmartin [\(b\) \(6\)](#) @who.eop.gov)
Hogan Gidley [\(b\) \(6\)](#) @who.eop.gov)
Brittany Yanick [\(b\) \(6\)](#) @who.eop.gov)
Tori Syrek [\(b\) \(6\)](#) @who.eop.gov)
Judd Deere [\(b\) \(6\)](#) @who.eop.gov)

For broadcast interview clearances –

Devin O'Malley
Katie Miller
Hannah MacInnis
Alyssa Farah
Kayleigh Gilmartin

Hogan Gidley

Brittany Yanick

Tori Syrek

Judd Deere

Alexa Henning (b) (6) @who.eop.gov

Roma Daravi (b) (6) @who.eop.gov

John Hortsman (b) (6) @who.eop.gov

From: Murphy, Ryan (OS/ASPA)

Sent: Monday, May 11, 2020 3:21 PM

To: Lemar, Naweed (OS/ASPA) <Naweed.Lemar@hhs.gov>; Michael Robinson (michael.robinson@hhs.gov) <michael.robinson@hhs.gov>; Simone Myrie (Simone.Myrie@hhs.gov) <Simone.Myrie@hhs.gov>; Bradley, Tasha (OS/ASPA) <Tasha.Bradley@hhs.gov>; Formoso, Paula (HHS/ASPA) <Paula.Formoso@hhs.gov>; Daniels, Carla (HHS/ASPA) <Carla.Daniels@hhs.gov>; Felberbaum, Michael (FDA/OC) <Michael.Felberbaum@fda.hhs.gov>; Caccamo, Stephanie (FDA/OC) <Stephanie.Caccamo@fda.hhs.gov>; Molly Block (Molly.Block@fda.hhs.gov) <Molly.Block@fda.hhs.gov>; Kate Galatas (CDC/OD/OADC) (kkg2@cdc.gov) <kkg2@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Oury, Rachael (CDC/OD) <QKC3@cdc.gov>; Courtney (NIH/NIAID) Billet [E] (billetc@niaid.nih.gov) <billetc@niaid.nih.gov>; Jennifer (NIH/NIAID) Routh [E] (jennifer.routh@nih.gov) <jennifer.routh@nih.gov>; John Burklow (burklowj@od.nih.gov) <burklowj@od.nih.gov>; Myles, Renate (NIH/OD) [E] <mylesr@mail.nih.gov>; Gretchen Michael (Gretchen.Michael@hhs.gov) <Gretchen.Michael@hhs.gov>; Elleen Kane (OS/ASPR/OEA) (Elleen.Kane@hhs.gov) <Elleen.Kane@hhs.gov>; Danko, Carol (OS/ASPR/IO) <Carol.Danko@hhs.gov>; Mia Heck (HHS/OASH) (Mia.Heck@hhs.gov) <Mia.Heck@hhs.gov>; Tara Broido (Tara.Broido@hhs.gov) <Tara.Broido@hhs.gov>; Jennifer Sherman (HHS/OASH) (Jennifer.Sherman@hhs.gov) <Jennifer.Sherman@hhs.gov>

Cc: Blakeman, Scott (OS/ASPA) <Scott.Blakeman@hhs.gov>; Brennan, Patrick (OS/ASPA) <Patrick.Brennan@hhs.gov>; Caputo, Michael (HHS/ASPA) <Michael.Caputo@hhs.gov>; Foster, Timothy (OS/ASPA) <Timothy.Foster@hhs.gov>; Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>; McKeogh, Katherine (OS/ASPA) <Katherine.McKeogh@hhs.gov>; Oakley, Caitlin B. (OS/ASPA) <Caitlin.Oakley@HHS.GOV>; Pratt, Michael (OS/ASPA) <Michael.Pratt@hhs.gov>; Traverse, Brad (HHS/ASPA) <Brad.Traverse@hhs.gov>; Weber, Mark (HHS/ASPA) <Mark.Weber@hhs.gov>

Subject: RE: for clearances

Just a quick follow-up here to clarify on this: there's not been a change in the COVID-19

clearance process. Stuff still needs to be flagged for ASPA and/or approved by ASPA before going up to WH/OVP. The email below was simply to update you all on who at WH/OVP will need to receive the clearance emails when they go up to WH/OVP. The processes we've been following remain in place. Please call with any questions.

From: Murphy, Ryan (OS/ASPA)

Sent: Monday, May 11, 2020 12:42 PM

To: Lemar, Naweed (OS/ASPA) <Naweed.Lemar@hhs.gov>; Michael Robinson (<michael.robinson@hhs.gov> <michael.robinson@hhs.gov>; Simone Myrie (<Simone.Myrie@hhs.gov> <Simone.Myrie@hhs.gov>; Bradley, Tasha (OS/ASPA) <Tasha.Bradley@hhs.gov>; Formoso, Paula (HHS/ASPA) <Paula.Formoso@hhs.gov>; Daniels, Carla (HHS/ASPA) <Carla.Daniels@hhs.gov>; Felberbaum, Michael (FDA/OC) <Michael.Felberbaum@fda.hhs.gov>; Caccomo, Stephanie (FDA/OC) <Stephanie.Caccomo@fda.hhs.gov>; Molly Block (<Molly.Block@fda.hhs.gov> <Molly.Block@fda.hhs.gov>; Kate Galatas (CDC/OD/OADC) (<kkg2@cdc.gov> <kkg2@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Oury, Rachael (CDC/OD) <QKC3@cdc.gov>; Courtney (NIH/NIAID) Billet [E] (<billetec@niaid.nih.gov> <billetec@niaid.nih.gov>; Jennifer (NIH/NIAID) Routh [E] (<jennifer.routh@nih.gov> <jennifer.routh@nih.gov>; John Burklow (<burklowj@od.nih.gov> <burklowj@od.nih.gov>; Myles, Renate (NIH/OD) [E] <mylesr@mail.nih.gov>; Gretchen Michael (<Gretchen.Michael@hhs.gov> <Gretchen.Michael@hhs.gov>; Elleen Kane (OS/ASPR/OEA) (<Elleen.Kane@hhs.gov> <Elleen.Kane@hhs.gov>; Danko, Carol (OS/ASPR/IO) <Carol.Danko@hhs.gov>; Mia Heck (HHS/OASH) (<Mia.Heck@hhs.gov> <Mia.Heck@hhs.gov>; Tara Broido (<Tara.Broido@hhs.gov> <Tara.Broido@hhs.gov>; Jennifer Sherman (HHS/OASH) (<Jennifer.Sherman@hhs.gov> <Jennifer.Sherman@hhs.gov>
Cc: Blakeman, Scott (OS/ASPA) <Scott.Blakeman@hhs.gov>; Brennan, Patrick (OS/ASPA) <Patrick.Brennan@hhs.gov>; Caputo, Michael (HHS/ASPA) <Michael.Caputo@hhs.gov>; Foster, Timothy (OS/ASPA) <Timothy.Foster@hhs.gov>; Hall, Bill (HHS/ASPA) <bill.hall@hhs.gov>; McKeogh, Katherine (OS/ASPA) <Katherine.McKeogh@hhs.gov>; Oakley, Caitlin B. (OS/ASPA) <Caitlin.Oakley@HHS.GOV>; Pratt, Michael (OS/ASPA) <Michael.Pratt@hhs.gov>; Traverse, Brad (HHS/ASPA) <Brad.Traverse@hhs.gov>; Weber, Mark (HHS/ASPA) <Mark.Weber@hhs.gov>

Subject: for clearances

Hey Folks – we thought it might be helpful to send an update to what folks at WH/OVP should receive clearance emails. Below reflects our understanding of who has been routinely receiving clearance items and/or who WH/OVP has often added to a chain for review. I've bucketed the lists below. Please let me know if you have any questions.

- Ryan

For material and print interview clearances –

Devin O'Malley (b) (6) @ovp.eop.gov)

Katie Miller (b) (6) ovp.eop.gov)

Hannah MacInnis (b) (6) @ovp.eop.gov)

Meghan Burris (b) (6) @who.eop.gov)

Brittany Yanick (b) (6) @who.eop.gov)

Tori Syrek (b) (6) @who.eop.gov)

Judd Deere (b) (6) @who.eop.gov)

For broadcast interview clearances –

Devin O'Malley

Katie Miller

Hannah MacInnis

Meghan Burris

Brittany Yanick

Tori Syrek

Judd Deere

Alexa Henning (b) (6) g@who.eop.gov)

Roma Daravi (b) (6) @who.eop.gov)

John Hortsman (b) (6) who.eop.gov)

From: Miller, Katie R. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov]
Sent: 5/29/2020 1:44:26 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(b) (6) [REDACTED] Stephen.Hah]
Subject: reporter contact

Sarah Oweremohle <soweremohle@politico.com>

From: Miller, Katie R. EOP/OVP (b) (6) [REDACTED]@ovp.eop.gov]
Sent: 4/15/2020 6:19:27 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(b) (6) [REDACTED] Stephen.Hah]
Subject: Fwd: Thurs at 11 am ET: FDA Commissioner Dr. Stephen Hahn, Steve Ballmer with Wash Post Live
Attachments: invite.ics; ATT00001.htm

Sent from my iPhone

Begin forwarded message:

From: The Washington Post Live <washpostlive@washpost.com>
Date: April 15, 2020 at 4:41:32 PM EDT
To: "Miller, Katie R. EOP/OVP" (b) (6) [REDACTED]@ovp.eop.gov>
Subject: Thurs at 11 am ET: FDA Commissioner Dr. Stephen Hahn, Steve Ballmer with Wash Post Live

[REDACTED]

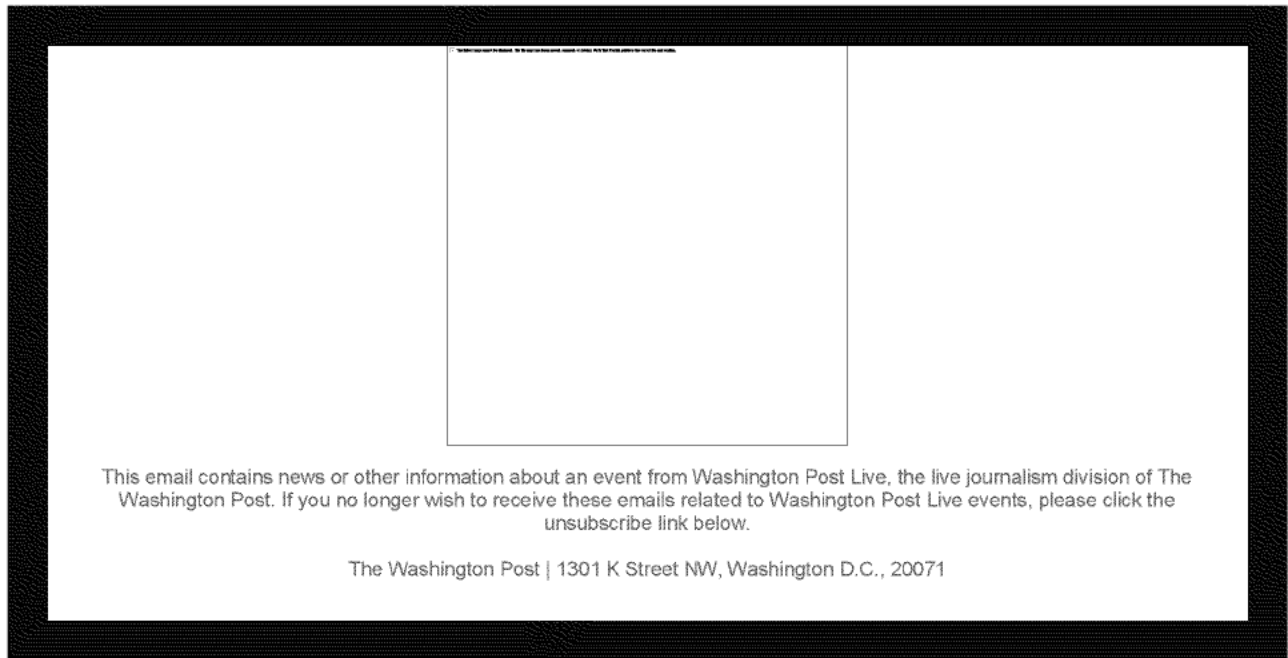
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Thursday, April 16th
Streaming will begin at 11:00 a.m. ET

This event will be streamed on The Washington Post Live's Facebook, Twitter and YouTube pages, as well as The Washington Post homepage.

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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS- (b) (6) -cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]

Subject: Operational Check-in

Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment

Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM

End: 3/31/2020 3:00:00 PM

Show Time As: Busy

Recurrence: Weekly

Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
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Recurrence: Weekly
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Participant Code (b) (6)

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
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Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment; Untitled Attachment; Canceled: Phone Call: Joe/ Dr. Hahn
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment; Untitled Attachment
Location: Joe will call Dr. Hahn
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End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in ; Canceled: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
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Recurrence: Weekly
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If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Operational Check-in
Location: Roosevelt Room
Start: 3/30/2020 2:00:00 PM
End: 3/30/2020 2:30:00 PM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Operational Check-in
Location: Dr. Birx Office
Start: 3/30/2020 2:00:00 PM
End: 3/30/2020 2:30:00 PM
Show Time As: Busy

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:55:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbddd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6) ovp.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9bafce245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]
Subject: Call: (b)(5) - DPP
Location: (202) 395-6392, (b) (6) #
Start: 3/30/2020 8:00:00 PM
End: 3/30/2020 8:30:00 PM
Show Time As: Busy
Recurrence: (none)

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

Follow up from 2 pm meeting re: (b) (5)

Hahn
Birx
Fauci
Giroir
Redfield
Verma
Grogan

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6) who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6) who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6) @ (b) (6) Bruno, Grace A. EOP/OMB [(b) (6) (b) (6) Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6) who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6) who.eop.gov]
Subject: HOLD: ALS Meeting
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Busy

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Monday, April 13, 2020 8:21 AM
To: Grogan, Joseph J. EOP/WHO; Sheehy, Janice; Williams, James H. EOP/WHO; Merkel, Theo W. EOP/WHO; D'Angelo, Gregory B. EOP/OMB; Bruno, Grace A. EOP/OMB; Bonner, Maria K. EOP/WHO; Giuliani, Andrew H. EOP/WHO; Sugarman, AJ J. EOP/WHO
Subject: HOLD: ALS Meeting
When: Friday, April 17, 2020 9:30 AM-10:00 AM (UTC-05:00) Eastern Time (US & Canada).
Where:

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]
Subject: Operational Check-in
Attachments: Untitled Attachment
Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]
Subject: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
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Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
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To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in ; Canceled: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
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Participant Dial-In: (202) 395-6392

Participant Code (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment; Untitled Attachment
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
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Show Time As: Busy
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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
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Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]

Subject: Operational Check-in

Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in

Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM

End: 3/31/2020 3:00:00 PM

Show Time As: Busy

Recurrence: (none)

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Untitled Attachment
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Subject: Operational Check-in

Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment

Location: Roosevelt Room

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment
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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Canceled: Operational Check-in
Location: Roosevelt Room
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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Canceled: Operational Check-in
Location: Roosevelt Room
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Show Time As: Busy
Recurrence: (none)

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Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[(b) (6)] D'Angelo, Gregory B. EOP/OMB [(b) (6)]@[(b) (6)] Williams,
James H. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov];
DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[(b) (6)] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: ALS Check-In

Location: Dial-in 202-395-6392; [(b) (6)]

Start: 4/9/2020 5:30:00 PM

End: 4/9/2020 6:00:00 PM

Show Time As: Busy

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Canceled: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Canceled: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
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To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6)@hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6)] @[(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] [(b) (6)] Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]
Subject: ALS Phone Call
Attachments: [(b) (5)]
[REDACTED]
[REDACTED]
Location: Roosevelt Room
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

* Please note that Congressman Fortenberry and his staff will be the only external participants on the call.*

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

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Sent: 3/30/2020 7:59:49 AM
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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6)] @[(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] (b) (6) Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]

Subject: ALS Phone Call

Attachments: [(b) (5)]
[(b) (5)]

Location: [(b) (6)]

Start: 4/17/2020 9:30:00 AM

End: 4/17/2020 10:00:00 AM

Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

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Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]

Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy

Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

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Sent: 4/13/2020 8:23:13 AM
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Subject: ALS Phone Call

Attachments: [(b) (5)]
[REDACTED]
[REDACTED]

Location: Roosevelt Room

Start: 4/17/2020 9:30:00 AM

End: 4/17/2020 10:00:00 AM

Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

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Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy

Recurrence: (none)

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Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment
Location: Joe will call Dr. Hahn
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Recurrence: (none)

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Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room

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Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Canceled: Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

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To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6);ms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6) who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6) who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6) @ (b) (6) Bruno, Grace A. EOP/OMB [(b) (6) (b) (6) Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6) who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6) who.eop.gov]
Subject: ALS Meeting
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Busy

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Monday, April 13, 2020 8:21 AM
To: Grogan, Joseph J. EOP/WHO; Sheehy, Janice; Williams, James H. EOP/WHO; Merkel, Theo W. EOP/WHO; D'Angelo, Gregory B. EOP/OMB; Bruno, Grace A. EOP/OMB; Bonner, Maria K. EOP/WHO; Giuliani, Andrew H. EOP/WHO; Sugarman, AJ J. EOP/WHO
Subject: HOLD: ALS Meeting
When: Friday, April 17, 2020 9:30 AM-10:00 AM (UTC-05:00) Eastern Time (US & Canada).
Where:

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]

Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment
Location: Roosevelt Room

Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy

Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6)@hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd]; (b) (6);ms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: (none)

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:55:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbddd983419fcd-HHS-olx1-cd] (b) (6) cms.hhs.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; McGuffee, Tyler Ann A. EOP/OVP (b) (6) ovp.eop.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS (b) (6)]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9bafce245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]

Subject: Call: (b) (5)

Start: 3/31/2020 7:30:00 AM
End: 3/31/2020 8:00:00 AM
Show Time As: Busy

Recurrence: (none)

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

Follow up from 2 pm meeting re: (b) (5)

Hahn
Birx
Fauci
Giroir
Redfield
Verma
Grogan

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Copy: Operational Check-in
Location: Roosevelt Room
Start: 3/30/2020 2:30:00 PM
End: 3/30/2020 3:00:00 PM
Show Time As: Tentative
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/18/2020 1:52:45 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: FDA/DPC Meeting
Location: EEOB 176

Start: 2/21/2020 8:30:00 AM
End: 2/21/2020 9:00:00 AM
Show Time As: Busy

Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov/> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints to room 176 of the EEOB.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[(b) (6)] D'Angelo, Gregory B. EOP/OMB [(b) (6)]@[(b) (6)] Williams,
James H. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov];
DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[(b) (6)] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: ALS Check-In

Location: Dial-in 202-395-6392; [(b) (6)]

Start: 4/9/2020 5:30:00 PM

End: 4/9/2020 6:00:00 PM

Show Time As: Busy

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 10:08:14 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@[b] (6)]; Ruggiero, Anthony J. EOP/NSC [b] (6) [b] (6) Kanapathy, Ivan J. EOP/NSC [b] (6) [b] (6) Hooker, Allison M. EOP/NSC [b] (6) [b] (6) Sinclair, Michael R. EOP/NSC [b] (6) [b] (6)
Subject: FDA/EOP Call on [b] (5)
Location: Dial-in 202-395-6392; [b] (6)
Start: 4/9/2020 2:00:00 PM
End: 4/9/2020 2:30:00 PM
Show Time As: Busy
Recurrence: (none)

Roosevelt Room for internal participants
Participant Dial-In: (202) 395-6392
Participant Code: [b] (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] (b) (6) Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]

Subject: ALS Phone Call

Attachments: [(b) (5)]
[REDACTED]

Location: (202) 395-6392,,, [(b) (6)]

Start: 4/17/2020 9:30:00 AM

End: 4/17/2020 10:00:00 AM

Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

* Please note that Congressman Fortenberry and his staff will be the only external participants on the call.*

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

For those on the WH campus, we will meet in the Roosevelt Room to get on the call.

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6)] (b) (6) Bruno, Grace A. EOP/OMB [(b) (6)] (b) (6) Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]
Subject: ALS Phone Call
Attachments: (b) (5)
[REDACTED]
[REDACTED]
Location: Roosevelt Room
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

* Please note that Congressman Fortenberry and his staff will be the only external participants on the call.*

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

For those on the WH campus, we will meet in the Roosevelt Room to get on the call.

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:51:36 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Telecon: Joe/Dr. Hahn Check-in
Location: Dr. Hahn to call Joe
Start: 3/23/2020 3:40:00 PM
End: 3/23/2020 4:00:00 PM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 10:08:14 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@[b] (6)]; Ruggiero, Anthony J. EOP/NSC [b] (6) [b] (6) Kanapathy, Ivan J. EOP/NSC [b] (6) [b] (6) Hooker, Allison M. EOP/NSC [b] (6) [b] (6) Sinclair, Michael R. EOP/NSC [b] (6) [b] (6)
Subject: FDA/EOP Call on [b] (5)
Location: Dial-in 202-395-6392; [b] (6)
Start: 4/9/2020 2:00:00 PM
End: 4/9/2020 2:30:00 PM
Show Time As: Tentative
Recurrence: (none)

Roosevelt Room for internal participants
Participant Dial-In: (202) 395-6392
Participant Code: [b] (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [(b) (6)] @[(b) (6)] Williams,
James H. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov];
DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[(b) (6)] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sugarman, AJ J.
EOP/WHO [(b) (6)] who.eop.gov]; Planning, David M. EOP/WHO [(b) (6)] who.eop.gov]; Riley,
Sean M. EOP/WHO [(b) (6)] who.eop.gov]
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]

Subject: ALS Check-In

Location: Dial-in 202-395-6392; [(b) (6)]

Start: 4/9/2020 5:45:00 PM

End: 4/9/2020 6:15:00 PM

Show Time As: Tentative

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[REDACTED] D'Angelo, Gregory B. EOP/OMB [REDACTED]@ [REDACTED] Williams,
James H. EOP/WHO [REDACTED] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[REDACTED] who.eop.gov]; Merkel, Theo W. EOP/WHO [REDACTED] who.eop.gov];
DeValliere, Ian C. EOP/WHO [REDACTED] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[REDACTED] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [REDACTED] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [REDACTED] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: ALS Check-In

Location: Dial-in 202-395-6392; [REDACTED]

Start: 4/9/2020 5:30:00 PM

End: 4/9/2020 6:00:00 PM

Show Time As: Tentative

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: [REDACTED]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [(b) (6)] @[(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] (b) (6) Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]
Subject: ALS Phone Call
Attachments: [(b) (5)]
[REDACTED]
[REDACTED]
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Tentative

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

*** Please note that Congressman Fortenberry and his staff will be the only external participants on the call.***

Participant Dial-In: (202) 395-6392

Participant Code: [(b) (6)]

****For those on the WH campus, we will meet in the Roosevelt Room to get on the call.****

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO (b) (6) who.eop.gov; Merkel, Theo W. EOP/WHO (b) (6) who.eop.gov; D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@ (b) (6) Bruno, Grace A. EOP/OMB (b) (6) (b) (6) Bonner, Maria K. EOP/WHO (b) (6) who.eop.gov]; Giuliani, Andrew H. EOP/WHO (b) (6) who.eop.gov; Sugarman, AJ J. EOP/WHO (b) (6) who.eop.gov]
Subject: HOLD: ALS Meeting
Start: 4/17/2020 9:30:00 AM
End: 4/17/2020 10:00:00 AM
Show Time As: Tentative

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Monday, April 13, 2020 8:21 AM
To: Grogan, Joseph J. EOP/WHO; Sheehy, Janice; Williams, James H. EOP/WHO; Merkel, Theo W. EOP/WHO; D'Angelo, Gregory B. EOP/OMB; Bruno, Grace A. EOP/OMB; Bonner, Maria K. EOP/WHO; Giuliani, Andrew H. EOP/WHO; Sugarman, AJ J. EOP/WHO
Subject: HOLD: ALS Meeting
When: Friday, April 17, 2020 9:30 AM-10:00 AM (UTC-05:00) Eastern Time (US & Canada).
Where:

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:55:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]

Subject: Call: (b) (5)

Start: 3/31/2020 7:30:00 AM

End: 3/31/2020 8:00:00 AM

Show Time As: Tentative

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

Follow up from 2 pm meeting re: (b) (5)

Hahn
Birx
Fauci
Giroir
Redfield
Verma
Grogan

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:55:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbddd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]

Subject: Call: (b) (5)

Start: 3/30/2020 8:00:00 PM

End: 3/30/2020 8:30:00 PM

Show Time As: Tentative

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

Follow up from 2 pm meeting re (b) (5)

Hahn
Birx
Fauci
Giroir
Redfield
Verma
Grogan

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[(b) (6)] D'Angelo, Gregory B. EOP/OMB [(b) (6)]@[(b) (6)] Williams,
James H. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov];
DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[(b) (6)] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sugarman, AJ J.
EOP/WHO [(b) (6)] who.eop.gov]; Planning, David M. EOP/WHO [(b) (6)] who.eop.gov]; Riley,
Sean M. EOP/WHO [(b) (6)] who.eop.gov]
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: ALS Check-In
Location: Dial-in 202-395-6392; [(b) (6)]
Start: 4/9/2020 5:45:00 PM
End: 4/9/2020 6:15:00 PM
Show Time As: Tentative
Recurrence: (none)

Participant Dial-In: (202) 395-6392
Participant Code: [(b) (6)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Operational Check-in
Location: Dr. Birx Office
Start: 3/30/2020 2:00:00 PM
End: 3/30/2020 2:30:00 PM
Show Time As: Tentative

Recurrence: (none)

From: Bix, Deborah L. EOP/NSC [Deborah.L.Bix@ (b) (6)]
Sent: 3/28/2020 2:44:40 PM
To: Short, Marc T. EOP/OVP [(b) (6)]<ovp.eop.gov>; randal@mail.house.gov; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; [(b) (6)]<HHS.GOV>; stm77@treasury.gov; Kudlow, Larry A. EOP/WHO [(b) (6)]<who.eop.gov>; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]<Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]>; BiegunSE@state.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; as1cfw@hq.dhs.gov; [(b) (6)]<cms.hhs.gov>; rlw@va.gov; Pottinger, Matthew F. EOP/WHO [(b) (6)]<who.eop.gov>; Vought, Russell T. EOP/OMB [(b) (6)]<(b) (6)>; Troye, Olivia EOP/NSC [(b) (6)]<(b) (6)>; Harris, Shane M. EOP/WHO [(b) (6)]<who.eop.gov>; Ferrer Piran Basualdo, Austin G. EOP/WHO [(b) (6)]<who.eop.gov>; David.Lyons@sd.mil; Croghan, Mary E. EOP/WHO [(b) (6)]<who.eop.gov>; Kate@mail.house.gov; DeValliere, Ian C. EOP/WHO [(b) (6)]<who.eop.gov>; Campana, Alexandra D. EOP/WHO [(b) (6)]<who.eop.gov>; Zachary.McEntee@treasury.gov; shirley.gathers@treasury.gov; Andrew.Hughes@hud.gov; Jennifer.L.Naaden@hud.gov; Lin, Merry S. EOP/WHO [(b) (6)]<who.eop.gov>; Baker, Brittany G. EOP/WHO [(b) (6)]<who.eop.gov>; Olmem, Andrew J. EOP/WHO [(b) (6)]<who.eop.gov>; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Marston, Hilary D (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=87f32347b819459fb55d2b7e2bacc5eb-HHS-hilary.]>; Dulaigh, Joel (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=01f4f5f895214d4f8112c62d40ac50ce-HHS-Joel.Du]; Hurst, Natalie R. EOP/OVP [(b) (6)]<ovp.eop.gov>; OVPSchedule [OVPSchedule@OVP.eop.gov]; BurnettJD@state.gov; HattinghEF@state.gov; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; julia.bristol@hq.dhs.gov; natalia.best@hq.dhs.gov; Nkosi.thomas@hq.dhs.gov; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf6245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; Perez-Rivera, Diana (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8c224eebfa1e4624b0c22b3b343fe6c7-HHS-Diana.P]; pamelapowers@va.gov; belinda.carrington@va.gov; jacqueline.colli@va.gov; Hennessey, Millicent S. EOP/NSC [(b) (6)]<(b) (6)>; Conant, Ann M. EOP/OMB [(b) (6)]<(b) (6)>; Tignor, Beth (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44f3651e3b164ef786d33dc18b5112a4-HHS-Beth.Ti]; Dareshori, Zachary (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3460db40e0d54c918d19bb70b52d8825-HHS-Zachary]; Lair, Kate E. EOP/WHO [(b) (6)]<who.eop.gov>; Goyer, Jim L. IV EOP/WHO [(b) (6)]<who.eop.gov>; Riggs, Charlotte R. EOP/WHO [(b) (6)]<who.eop.gov>; Murrell, Baxter R. EOP/WHO [(b) (6)]<who.eop.gov>; Pottebaum, Nic D. EOP/WHO [(b) (6)]<who.eop.gov>; Jennifer.Stewart@sd.mil; Rader, John N. EOP/NSC [(b) (6)]<(b) (6)>; Haley, Vincent M. EOP/WHO [(b) (6)]<who.eop.gov>; Gabriel, Robert Jr. EOP/WHO [(b) (6)]<who.eop.gov>; Worthington, Ross P. EOP/WHO [(b) (6)]<who.eop.gov>; Baldwin, Brittany L. EOP/WHO [(b) (6)]<who.eop.gov>; Royer, Theodore M. EOP/WHO [(b) (6)]<who.eop.gov>; Bolduc, Brian J. EOP/OVP [(b) (6)]<ovp.eop.gov>; Dumbauld, Cassidy M. EOP/WHO [(b) (6)]<who.eop.gov>; Hannah.Gonzalez@sd.mil; michael.harrison@sd.mil; anne.powers@sd.mil; Cytryn, Jen B. EOP/WHO [(b) (6)]<who.eop.gov>; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]<ovp.eop.gov>; Hahn, Julia A. EOP/WHO [(b) (6)]<who.eop.gov>; Taylor, Elizabeth A. EOP/WHO [(b) (6)]<who.eop.gov>; DL WHO COMMS Speechwriters [DL.COMMS.Speechwriters@whmo.mil]; Ford-Barnes, Arwenitha (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group

(FYDIBOHF23SPDLT)/cn=Recipients/cn=38db99da9c0f4495b790adda00040fe7-HHS-Arwenh]; Brunson, Brandy (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=2c990cd3880043fead47cd06152e16e5-HHS-Brandy.]; donna.o'berry@dot.gov; amie.kalsbeek@dot.gov; Nesheiwat, Julia EOP/NSC (b) (6) (b) (6)
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(FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Callahan, Victoria (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=9d5435dfac644077bd8590ebcaa98b57-HHS-Victori]; Bante, Katie (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=8abd9d9ceb7c4ebfba6da1cdabb56db4-HHS-Katie.B]; Woolfolk, Jon J. EOP/OVP (b) (6) ovp.eop.gov]; Myung.Kim@fema.dhs.gov; Hicks, Hope C. EOP/WHO [Hope@who.eop.gov]; Fisher, Garrett C. EOP/OVP (b) (6) ovp.eop.gov]; Nevins, Kristan K. EOP/WHO (b) (6) who.eop.gov]; Hudson, Renee R. EOP/WHO (b) (6) who.eop.gov]; O'Malley, Devin M. EOP/OVP (b) (6) @ovp.eop.gov]; Sheehan, Matthew J. EOP/OVP (b) (6) ovp.eop.gov]; Toland, Scott R. EOP/WHO (b) (6) who.eop.gov]; Bonner, Maria K. EOP/WHO (b) (6) who.eop.gov]; Davis, May M. EOP/WHO (b) (6) who.eop.gov]; Harrison, Brian (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=ac2bfe7febef45ed98c87b83e5bcf8d0-HHS-Brian.H]; Pataki, Tim A. EOP/WHO (b) (6) who.eop.gov]; Hodgson, Christopher M. EOP/OVP (b) (6) ovp.eop.gov]; Hoelscher, Douglas L. EOP/WHO (b) (6) who.eop.gov]; Obenshain, Tucker T. EOP/OVP (b) (6) ovp.eop.gov]; Stuft, Julie M. EOP/NSC (b) (6) (b) (6) Kushner, Jared C. EOP/WHO (b) (6) @who.eop.gov]; Kadlec, Robert P (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=70539a2f88924cc8913781ea74278b12-HHS-Robert.]; Joel.Szabat@dot.gov; Philipson, Tomas J. EOP/CEA (b) (6) cea.eop.gov]; Miller, Katie R. EOP/OVP (b) (6) ovp.eop.gov]; Liddell, Christopher P. EOP/WHO (b) (6) who.eop.gov]; Grisham, Stephanie A. EOP/WHO (b) (6) who.eop.gov]; Philbin, Patrick F. EOP/WHO (b) (6) @who.eop.gov]; Miller, Stephen EOP/WHO [Stephen.Miller@who.eop.gov]; Pete.Gaynor@fema.dhs.gov; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; McBride, Emily J. EOP/WHO (b) (6) who.eop.gov]

CC: Bauer, Zachary C. EOP/OVP (b) (6) ovp.eop.gov]

Subject: Re: White House Coronavirus Task Force Call

Attachments: TaskForce28Marchfinal.pptx

For internal use. Thank you..deb

From: "Hurst, Natalie R. EOP/OVP" <(b) (6) ovp.eop.gov> on behalf of "Short, Marc T. EOP/OVP" <(b) (6) ovp.eop.gov>

Date: Saturday, March 28, 2020 at 2:21 PM

To: "randal@mail.house.gov" <randal@mail.house.gov>, "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>, "(b) (6) HHS.GOV" <(b) (6) HHS.GOV>, "stm77@treasury.gov" <stm77@treasury.gov>, "Kudlow, Larry A. EOP/WHO" <(b) (6) who.eop.gov>, "(b) (6) cdc.gov" <(b) (6) cdc.gov>, "AFAUCI@niaid.nih.gov" <AFAUCI@niaid.nih.gov>, "Jerome.Adams@hhs.gov" <Jerome.Adams@hhs.gov>, "BiegunSE@state.gov" <BiegunSE@state.gov>, "sh1@fda.hhs.gov" <sh1@fda.hhs.gov>, "as1cfw@hq.dhs.gov" <as1cfw@hq.dhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6) (b) (6) cms.hhs.gov> <(b) (6) cms.hhs.gov>, "rlw@va.gov" <rlw@va.gov>, "Pottinger, Matthew F. EOP/WHO" <(b) (6) who.eop.gov>, "Vought, Russell T. EOP/OMB" <(b) (6) (b) (6) "Troye, Nsc" <(b) (6) (b) (6) "Harris, Shane M. EOP/WHO" <(b) (6) who.eop.gov>, "Ferrer Piran Basualdo, Austin G. EOP/WHO" <(b) (6) who.eop.gov>, "David.Lyons@sd.mil" <David.Lyons@sd.mil>, "Croghan, Mary E. EOP/WHO" <(b) (6) who.eop.gov>, "Kate@mail.house.gov" <Kate@mail.house.gov>, "DeValliere, Ian C.

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Cc: "Bauer, Zachary C. EOP/OVP" <(b) (6) ovp.eop.gov>
Subject: White House Coronavirus Task Force Call

All –

There will be a **White House Coronavirus Task Force Call** tomorrow afternoon at **4:00pm**. If you do not have access to a secure phone/SCIF, the White House Situation Room will be available.

Agenda attached.

Thank you,

Natalie Hurst

Operations Coordinator, White House Coronavirus Task Force
Executive Assistant to the Chief of Staff
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(202) 881-9981

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/1/2020 5:15:56 AM
To: Wainer, Andrea F [andrea.wainer@abbott.com]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Stenzel, Timothy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e181c337cf1d429bae363600706a5fc4-Timothy.Ste]
CC: Ford, Robert B [Robert.Ford@abbott.com]
Subject: Re: [EXTERNAL] Abbott's daily COVID Data

Thank you so much and thank you for talking with the laboratories and seems things are picking up. If in your conversations you sense there is a issue with human capacity we can follow up with the sites. Den

From: "Wainer, Andrea F" <andrea.wainer@abbott.com>
Date: Tuesday, March 31, 2020 at 6:42 PM
To: "Giroir, Brett (HHS/OASH)" <Brett.Giroir@hhs.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>, "Haddad, Carla (HHS/OASH)" <Carla.Haddad@hhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>, "Shuren, Jeff (FDA/CDRH)" <Jeff.Shuren@fda.hhs.gov>, "Stenzel, Timothy (FDA/CDRH)" <Timothy.Stenzel@fda.hhs.gov>
Cc: "Ford, Robert B" <Robert.Ford@abbott.com>
Subject: [EXTERNAL] Abbott's daily COVID Data

Good evening,

Attached are: (1) ID NOW's first report; and (2) m2000 US sites. Given this is our first inclusion of ID NOW data, I have revised the explanations below to include both sets of data and explained what we are and are not reporting on ID NOW. Given this is our first m2000 report with cumulative tests performed, positives and positive %, I have also added 2(d) below to note that we have added cumulative tests performed, etc (see last three columns in the report).

Please find attached Abbott's data as of March 30 for (1) ID NOW tests; and (2) m2000 tests.

For m2000 test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week.
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. First, we only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).
 - b. Second, for those customers with the remote data link, we are providing raw data that has the number of tests run and the number of positives. Customers run their own required protocols to validate the accuracy of a test when a new test first becomes available. Those

validation processes include negative and positive samples. The raw data we get from data link of the instrument cannot distinguish between validation samples and patient samples.

- c. Third, as requested, the raw data for the Prior Day Tests Performed and positive numbers and rates (columns J, K and L) are for the previous day only.
 - d. Fourth, we have added columns for Cumulative Tests Performed, Cumulative Positives, and Cumulative % Positive.
3. We do not have data regarding inventory at the labs.

For ID NOW test data:

1. We are reporting names, addresses, total cumulative tests shipped, and total tests shipped this week.
2. Unlike the m2000 instrument, we do not have any data on tests performed from the ID NOW instruments.

Best regards

Andrea

(b) (6)



Abbott

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From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/22/2020 8:18:38 AM
To: Short, Marc T. EOP/OVP [(b) (6)@ovp.eop.gov]; Troye, Olivia EOP/NSC [(b) (6)@ (b) (6)] Harrison, Brian (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ac2bfe7efebef45ed98c87b83e5bcf8d0-HHS-Brian.H]; Pataki, Tim A. EOP/WHO [(b) (6)@who.eop.gov]; Goyer, Jim L. IV EOP/WHO [(b) (6)@who.eop.gov]; Pottebaum, Nic D. EOP/WHO [(b) (6)@who.eop.gov]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Hodgson, Christopher M. EOP/OVP [(b) (6)@ovp.eop.gov]; Hoelscher, Douglas L. EOP/WHO [(b) (6)@who.eop.gov]; Obenshain, Tucker T. EOP/OVP [(b) (6)@ovp.eop.gov]; Nevins, Kristan K. EOP/WHO [(b) (6)@who.eop.gov]; Stuft, Julie M. EOP/NSC [(b) (6)@ (b) (6)] Davis, May M. EOP/WHO [(b) (6)@who.eop.gov]; Bonner, Maria K. EOP/WHO [(b) (6)@who.eop.gov]; Hudson, Renee R. EOP/WHO [(b) (6)@who.eop.gov]; Devin.O'Malley@treasury.gov; Sheehan, Matthew J. EOP/OVP [(b) (6)@ovp.eop.gov]; Moore, Caroline E. EOP/WHO [(b) (6)@who.eop.gov]; Kushner, Jared C. EOP/WHO [(b) (6)@who.eop.gov]; Hicks, Hope C. EOP/WHO [Hope@who.eop.gov]; Fisher, Garrett C. EOP/OVP [(b) (6)@ovp.eop.gov]; Kadlec, Robert P (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=70539a2f88924cc8913781ea74278b12-HHS-Robert.]; Joel.Szabat@dot.gov; randal@mail.house.gov; Grogan, Joseph J. EOP/WHO [(b) (6)@who.eop.gov]; (b) (6)@HHS.GOV; stm77@treasury.gov; Kudlow, Larry A. EOP/WHO [(b) (6)@who.eop.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; BiegunSE@state.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0fca3c4b98913833e38a036e9f-Stephen.Hah]; as1cfw@hq.dhs.gov; (b) (6)@cms.hhs.gov; rlw@va.gov; Pottinger, Matthew F. EOP/WHO [(b) (6)@who.eop.gov]; Vought, Russell T. EOP/OMB [(b) (6)@ (b) (6)] Miller, Katie R. EOP/OVP [(b) (6)@ovp.eop.gov]; Liddell, Christopher P. EOP/WHO [(b) (6)@who.eop.gov]; Grisham, Stephanie A. EOP/WHO [(b) (6)@who.eop.gov]; Philbin, Patrick F. EOP/WHO [(b) (6)@who.eop.gov]; Miller, Stephen EOP/WHO [Stephen.Miller@who.eop.gov]; Pete.Gaynor@fema.dhs.gov; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Kate@mail.house.gov; DeValiere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]; Zachary.McEntee@treasury.gov; shirley.gathers@treasury.gov; Andrew.Hughes@hud.gov; Jennifer.L.Naaden@hud.gov; Lin, Merry S. EOP/WHO [(b) (6)@who.eop.gov]; Baker, Brittany G. EOP/WHO [(b) (6)@who.eop.gov]; Olmem, Andrew J. EOP/WHO [(b) (6)@who.eop.gov]; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Marston, Hilary D (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=87f32347b819459fb55d2b7e2bacc5eb-HHS-hilary.]; Dulaigh, Joel (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=01f4f5f895214d4f8112c62d40ac50ce-HHS-Joel.Du]; Hurst, Natalie R. EOP/OVP [(b) (6)@ovp.eop.gov]; OVPSchedule [OVPSchedule@OVP.eop.gov]; BurnettJD@state.gov; HattinghEF@state.gov; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; julia.bristol@hq.dhs.gov; natalia.best@hq.dhs.gov; Nkosi.thomas@hq.dhs.gov; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf6245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; Perez-Rivera, Diana (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8c224eebfa1e4624b0c22b3b343fe6c7-HHS-Diana.P];

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/21/2020 12:02:10 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: McGuffee, Tyler A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: A couple of edits
Attachments: (b) (5)

(b) (5)

. Thank you

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/21/2020 9:02:11 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Fwd: [EXTERNAL] Milken Institute Launches COVID-19 Treatment and Vaccine Tracker

Sent from my iPhone

Begin forwarded message:

(b) (5)



(b) (5)

Begin forwarded message:

From: "Matthew Aleshire (maleshire@milkeninstitute.org)" <maleshire@milkeninstitute.org>

Date: March 18, 2020 at 8:16:52 PM EDT

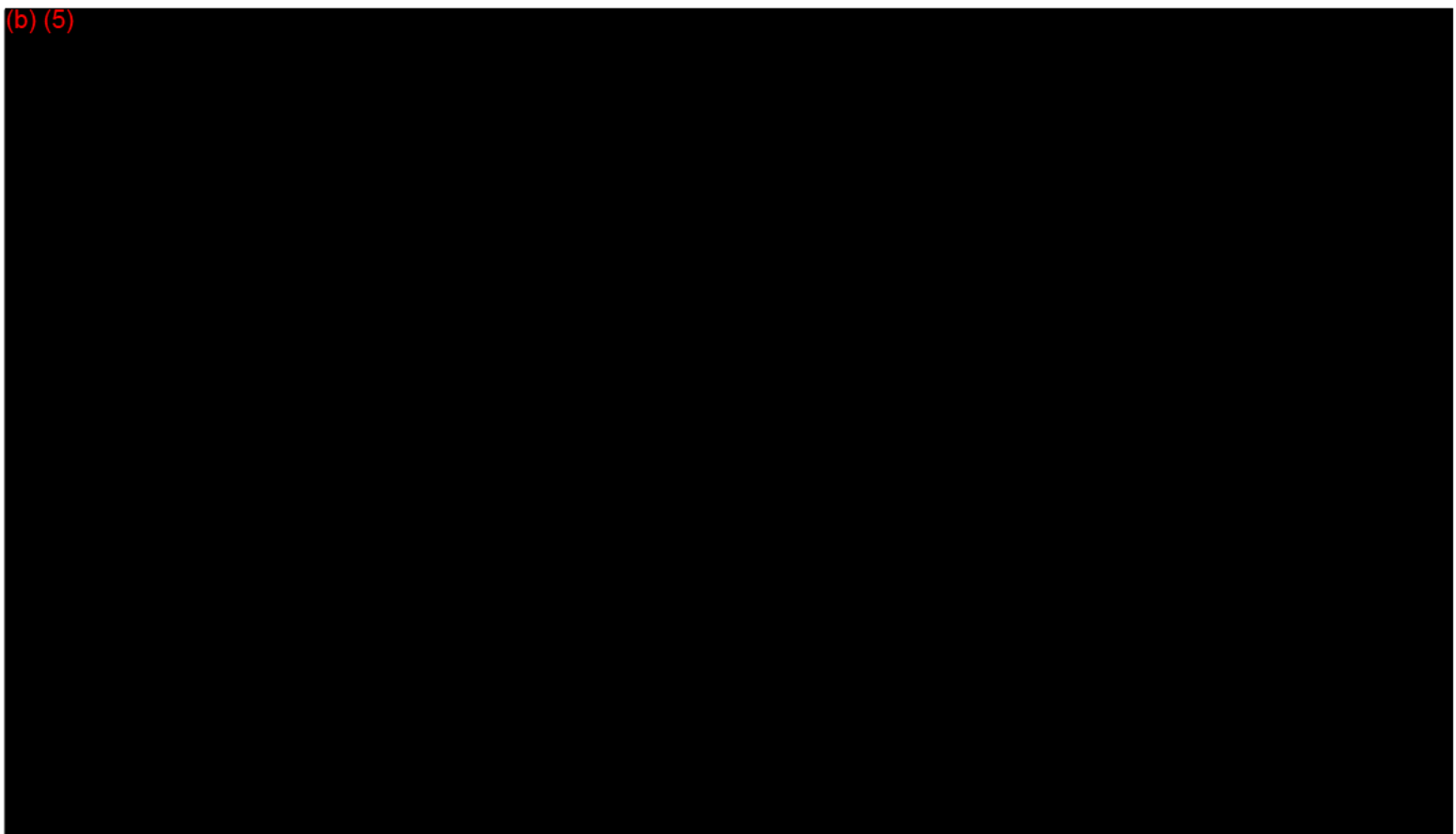
To: "Liddell, Christopher P. EOP/WHO" <(b) (6) who.eop.gov>

Cc: "Dianna Dunne (ddunne@milkeninstitute.org)" <ddunne@milkeninstitute.org>

Subject: [EXTERNAL] Milken Institute Launches COVID-19 Treatment and Vaccine Tracker

policymakers

(b) (5)



Begin forwarded message:

From: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@
Date: March 16, 2020 at 7:58:47 AM EDT
To: "Moorhead, Quellie U. EOP/WHO" <who.eop.gov>
Subject: Fwd: Covid-19 modeling

For printing. The word document.

Sent from my iPhone

Begin forwarded message:

From: "Zaidi, Irum F" <ZaidiIF@state.gov>
Date: March 16, 2020 at 7:55:37 AM EDT
To: "Birx, Deborah L" <BirxDL@state.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@
"Vitek, Charles (CDC/DDPHSIS/CGH/DGHT)" <cxv3@cdc.gov>
Subject: Fw: Covid-19 modeling

From: Ferguson, Neil M <neil.ferguson@imperial.ac.uk>
Sent: Sunday, March 15, 2020 10:48 PM
To: Zaidi, Irum F
Subject: RE: Covid-19 modeling

See attached for a slightly incomplete report on NPIs. It contains mostly UK modelling, but the results are very similar for the US. I will be including more US model runs in the next day or two, including locally triggered policies.

This report will (when tidied up) be released publicly tomorrow. Please keep this incomplete draft confidential for 24h, though it is fine to use the contents internally.

Also happy to share our estimates of CFR/IFR, healthcare demand needs (all in 5 year age bands):

	0 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49
Proportion of infections hospitalised	0.000744	0.000634	0.001171	0.002395	0.005346	0.01029	0.016235	0.023349	0.028945	0.03860
Proportion of infections needing critical care	3.74E-05	3.18E-05	5.88E-05	0.00012	0.000269	0.000517	0.000815	0.001243	0.001729	0.0028
Proportion of hospitalised cases needing critical care	0.050223	0.050223	0.050223	0.050223	0.050223	0.050223	0.050223	0.053215	0.059744	0.07460
Proportion of critical cases dying	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5
Proportion of non-critical care cases dying	0.013448	0.013448	0.013448	0.013448	0.013448	0.013448	0.013448	0.014294	0.016159	0.02050

This gives 4.4% of infections hospitalised, 30% of hospitalised cases needing ICUs.

IFR is 1% overall (we rounded up from the actual estimate of 0.97%!) in the UK population. Maybe different in France.

Most of these numbers will be in the final version of this

(<https://www.medrxiv.org/content/10.1101/2020.03.09.20033357v1>) which hopefully will come out in Lancet ID this week.

The 30% ICU figure comes from an observation in the UK and Italy that non-invasive ventilation is largely ineffective in COVID-19 cases.

Delays we have estimated:

- Mean time from hospital admission to discharge, non-ICU and non-lethal cases = 8 days
- Mean time from hospital admission to death for lethal cases not admitted to ICU = 8 days
- Mean time from hospital admission to ICU admission = 5 days
- Mean time in ICU, non-lethal and lethal cases = 10 days
- Mean time remaining in hospital after discharge from ICU = 5 days
- Mean time in ICU for lethal cases=10 days

Neil

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/12/2020 6:38:14 PM
To: Wainer, Andrea F [andrea.wainer@abbott.com]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Stenzel, Timothy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e181c337cf1d429bae363600706a5fc4-Timothy.Ste]
CC: Ford, Robert B [Robert.Ford@abbott.com]
Subject: Re: [EXTERNAL] Abbott's Covid Data

Thank you. Deb

From: "Wainer, Andrea F" <andrea.wainer@abbott.com>
Date: Sunday, April 12, 2020 at 6:37 PM
To: "Giroir, Brett (HHS/OASH)" <Brett.Giroir@hhs.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>, "Haddad, Carla (HHS/OASH)" <Carla.Haddad@hhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>, "Shuren, Jeff (FDA/CDRH)" <Jeff.Shuren@fda.hhs.gov>, "Stenzel, Timothy (FDA/CDRH)" <Timothy.Stenzel@fda.hhs.gov>
Cc: "Ford, Robert B" <Robert.Ford@abbott.com>
Subject: [EXTERNAL] Abbott's Covid Data

Good evening, Commissioner Hahn and Adm Giroir, I will be sending the pooling data as per our previous email tonight. Confirming it is in process and coming.

Please find attached Abbott's data as of April 11 for (1) ID NOW; and (2) m2000.

For m2000 test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week (Sunday to Saturday shipments).
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. We only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).
 - b. For those customers with the remote data link, we are providing raw data that has the number of tests run and the number of positives. Customers run their own required protocols to validate the accuracy of a test when a new test first becomes available. Those validation processes include negative and positive samples. The raw data we get from data link of the instrument cannot distinguish between validation samples and patient samples.
3. We do not have data regarding inventory at the labs.

For ID NOW test data:

1. We are reporting names, addresses, total cumulative tests shipped, and total tests shipped this week (Monday to Sunday shipments).
2. Unlike the m2000 instrument, we do not have any data on tests performed from the ID NOW instruments.

Best Regards,

Andrea

(b) (6)



Andrea Wainer
Executive Vice President
Rapid & Molecular Diagnostics

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Building AP6C-2
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O: +1 224-668-9155
andrea.wainer@abbott.com

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From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/9/2020 9:03:00 PM
To: McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Hahn, Stephen
[o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: FLAGGING — RE: Oracle call with Dr. Birx?

I didn't ask them to do this – I only listened to her and did NOT commit to anything nor did I say this was a good idea. I (b) (5)
(b) (5) am copying Dr Hahn and maybe he knows who activated them as we advised against it. Deb

From: "McGuffee, Tyler Ann A. EOP/OVP" <(b) (6) ovp.eop.gov>
Date: Thursday, April 9, 2020 at 8:48 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: FLAGGING — RE: Oracle call with Dr. Birx?

Follow up from Oracle CEO's staff
Flagging the note about HHS and TLS testing data

Begin forwarded message:

From: Josh Pitcock <josh.pitcock@oracle.com>
Date: April 9, 2020 at 8:37:17 PM EDT
To: "McGuffee, Tyler Ann A. EOP/OVP" <(b) (6) ovp.eop.gov>, "Pinkos, Stephen M. EOP/OVP" <(b) (6) ovp.eop.gov>
Cc: Ken Glueck <kenneth.glueck@oracle.com>
Subject: RE: [EXTERNAL] RE: Oracle call with Dr. Birx?

Tyler Ann,

Since Safra and Dr. Birx spoke we have updated the TLS and it is now capable of taking in the testing results. Through conversations with testing companies we already have some of the testing data coming in. We also have been able to integrate EHR's from some of the hospital systems we are working with (Wake Forest for example). So, great progress for what Dr. Birx was hoping TLS could do.

But to be honest I'm not sure HHS completely understands Dr. Birx's desire for TLS to get the testing data. We've heard back from them that there are a couple workstreams for testing data and they're trying to sort that out. I raise this so you are aware (we of course have limited visibility into all of this so you may already be working through this), and if that is the case we obviously would advocate that TLS serve as at least a, if not the, testing data repository. The interfaces to pull in the data and run the analytics are built and working and the testing companies we've spoken to are supportive. We're also still working with HHS to get a TLS announcement release out so we can continue to build provider and patient enrollment. Hopefully they'll do that soon, but as you know it is a slow process.

Let us know if you have questions. We want to help however we can.

Thanks for all your work on this. –Josh

From: McGuffee, Tyler Ann A. EOP/OVP <(b) (6) ovp.eop.gov>
Sent: Tuesday, April 7, 2020 1:31 PM
To: Paula Chaltas <paula.chaltas@oracle.com>; Pinkos, Stephen M. EOP/OVP <(b) (6) ovp.eop.gov>
Cc: Josh Pitcock <josh.pitcock@oracle.com>; Ken Glueck <kenneth.glueck@oracle.com>; Dave Jentsch <david.jentsch@oracle.com>; Barry Brown <barry.x.brown@oracle.com>
Subject: RE: [EXTERNAL] RE: Oracle call with Dr. Birx?

Safra and Dr. Birx are connected. Thanks all.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: (b) (6) [no text]
Email: Tyler.A.McGuffee2@ovp.eop.gov

From: Paula Chaltas <paula.chaltas@oracle.com>
Sent: Monday, April 6, 2020 6:48 PM
To: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>; Pinkos, Stephen M. EOP/OVP <(b) (6)@ovp.eop.gov>
Cc: Josh Pitcock <josh.pitcock@oracle.com>; Ken Glueck <kenneth.glueck@oracle.com>; Dave Jentsch <david.jentsch@oracle.com>; Barry Brown <barry.x.brown@oracle.com>
Subject: RE: [EXTERNAL] RE: Oracle call with Dr. Birx?

Thanks Tyler Ann,

Yes 1:30pm – 1:40pm EDT / 10:30am – 10:40am PDT tomorrow, Tuesday April 7 will work for Safra.

Please ask Dr. Birx to call Safra on her direct line: (b) (6)

Thanks so much,
Paula

From: McGuffee, Tyler Ann A. EOP/OVP [mailto:(b) (6)@ovp.eop.gov]
Sent: Monday, April 6, 2020 3:42 PM
To: Paula Chaltas <paula.chaltas@oracle.com>; Pinkos, Stephen M. EOP/OVP <(b) (6)@ovp.eop.gov>
Cc: Josh Pitcock <josh.pitcock@oracle.com>; Ken Glueck <kenneth.glueck@oracle.com>; Dave Jentsch <david.jentsch@oracle.com>; Barry Brown <barry.x.brown@oracle.com>
Subject: RE: [EXTERNAL] RE: Oracle call with Dr. Birx?

Hi Paula,
I appreciate your patience! Can we confirm this call tomorrow (4/7) from 1:30-1:40pm, please?
If so, please provide the direct number for Dr. Birx to dial Safra.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: (b) (6) [no text]
Email: (b) (6)@ovp.eop.gov

From: Paula Chaltas <paula.chaltas@oracle.com>
Sent: Monday, April 6, 2020 1:12 PM
To: McGuffee, Tyler Ann A. EOP/OVP (b) (6) <(b) (6)@ovp.eop.gov>; Pinkos, Stephen M. EOP/OVP <Stephen.M.Pinkos@ovp.eop.gov>
Cc: Josh Pitcock <josh.pitcock@oracle.com>; Ken Glueck <kenneth.glueck@oracle.com>; Dave Jentsch <david.jentsch@oracle.com>; Barry Brown <barry.x.brown@oracle.com>
Subject: [EXTERNAL] RE: Oracle call with Dr. Birx?

Hi Tyler Ann,

Please let us know what works best for Dr. Birx and we will clear Safra's calendar, as needed.

Thanks so much,
Paula

ORACLE

Paula Chaltas | Office of the CEO
Office: +1 650 506 1170 | Mobile: +1 (b) (6) | paula.chaltas@oracle.com
500 Oracle Parkway, Redwood Shores, CA 94065 U.S.A.

From: Josh Pitcock
Sent: Monday, April 6, 2020 6:45 AM
To: McGuffee, Tyler Ann A. EOP/OVP (b) (6) <(b) (6)@ovp.eop.gov>; Pinkos, Stephen M. EOP/OVP (b) (6) <(b) (6)@ovp.eop.gov>
Cc: Ken Glueck <kenneth.glueck@oracle.com>; Dave Jentsch <david.jentsch@oracle.com>; Barry Brown <barry.x.brown@oracle.com>; Paula Chaltas <paula.chaltas@oracle.com>
Subject: RE: Oracle call with Dr. Birx?

Super, thanks Tyler Ann.
I know Safra will want to be flexible for what works for Dr. Birx, and she is very grateful for her time.
I'm copying Dave, Barry and Paula who will be able to assist on scheduling.
Thanks again and we are all thinking of you and the team this week.

From: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>
Sent: Monday, April 6, 2020 9:27 AM
To: Josh Pitcock <josh.pitcock@oracle.com>; Pinkos, Stephen M. EOP/OVP <(b) (6)@ovp.eop.gov>
Cc: Ken Glueck <kenneth.glueck@oracle.com>
Subject: RE: Oracle call with Dr. Birx?

Hi Josh,
Dr. Birx would like to schedule a call with your CEO this week.
Please let me know who I should work with on your end.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: (b) (6) [no text]

Email (b) (6) @ovp.eop.gov

From: Josh Pitcock <josh.pitcock@oracle.com>
Sent: Wednesday, April 1, 2020 11:57 AM
To: McGuffee, Tyler Ann A. EOP/OVP (b) (6) @ovp.eop.gov; Pinkos, Stephen M. EOP/OVP
<(b) (6) @ovp.eop.gov>
Cc: Ken Glueck <kenneth.glueck@oracle.com>
Subject: [EXTERNAL] Oracle call with Dr. Birx?

Tyler Ann and Steve,

We would like to ask if Dr. Birx is available for a short call with Oracle CEO Safra Catz to walk through the application we have built to assist with COVID-19? It has changed a little since Dr. Birx last spoke with Larry Ellison about it, and Safra would like to update her and explain how we think it can help augment clinical trials and other efforts currently underway. (By the way, Oracle software is one of the leading systems used in clinical trials, so this is familiar ground for us.)

The legal hurdles have been cleared and HHS is supportive.

The website is live at covid19.oracle.com.

I've attached some slides, the first 2 give a short explanation, and the rest are screen shots of what the site looks like and what kind of dashboard analytics it will produce.

Appreciate your consideration and know how busy you are.

Thanks. -Josh

ORACLE

Josh Pitcock, Vice President
Office: +1.202.721.4829
Mobile: +1 (b) (6)
Oracle Government Affairs
1015 15th Street, NW, Suite 250
Washington, DC 20005

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/3/2020 1:31:08 PM
To: Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (b) (6) Stephen.Hah]
CC: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6)]
Subject: FW: DOJ's Abbott Device/BOP Request

(b) (5)

From: Mandolfo, James D. EOP/WHO <James.D.Mandolfo@who.eop.gov>
Sent: Friday, April 3, 2020 10:55 AM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Cc: Campana, Alexandra D. EOP/WHO <(b) (6)@who.eop.gov>
Subject: DOJ's Abbott Device/BOP Request

Joe,

Here is the issue regarding BOP getting access to Abbott devices:

(b) (5)

The contact at DOJ for this issue is Associate Deputy Attorney General Christopher Grieco. His cell phone is (b) (6) and email is Christopher.Grieco@usdoj.gov.

Thank you,

James Mandolfo
Special Assistant to the President
Domestic Policy Council
(202) 881-6421

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/6/2020 12:15:13 PM
To: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6)]
Subject: Fwd: [EXTERNAL] Abbott POC for Agency Orders

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: "Foltz, Nicole" <nicole.foltz@abbott.com>
Date: April 6, 2020 at 11:57:16 AM EDT
To: "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>
Subject: [EXTERNAL] Abbott POC for Agency Orders

Morning Joe,

Thanks for bearing with me on the calls yesterday. We are going to hold on the requests for orders from BOP, CIA, Secret Service Army, DOE, until we hear from you on how to proceed with one point of contact from WH.

Really appreciate it.
Nicole



Abbott

Nicole Foltz
Senior Director
Federal Government Affairs

Abbott
1399 New York Ave. NW
Suite 200
Washington, DC 20005

O: 202-378-2020
F: 202-783-6631
M: 202.717.7370
nicole.foltz@abbott.com

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From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@**(b) (6)**]
Sent: 4/5/2020 9:38:07 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Subject: Re: Tammy Beckham????

(b) (5)

Sent from my iPhone

On Apr 5, 2020, at 9:14 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

(b) (5)

S

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: April 5, 2020 at 9:06:52 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@**(b) (6)**>
Subject: Re: Tammy Beckham????

Thanks. There have been document leaks out of that shop too. Confidential commercial information which is bs, especially with all these non government types over there.

Sent from my iPhone

On Apr 5, 2020, at 9:00 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

I definitely know who this is. I'll check with Brett.
Steve

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: April 4, 2020 at 8:48:03 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@**(b) (6)**>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Tammy Beckham????

Ok. Steve can you do a friendly check in buddy buddy with Giroir and find out what these guys are doing? And let's not waste Abbott's time.

Sent from my iPhone

> On Apr 4, 2020, at 8:20 PM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@**(b) (6)**> wrote:

>

> Thought that name sounded familiar - works with Girior - was on the Southern HIV end the epidemic

>

> On 4/4/20, 8:15 PM, "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov> wrote:

>

> **(b) (5)**

>

> Sent from my iPhone

>

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/31/2020 1:32:18 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: CORONAVIRUS FLAG: First cell treatment to fight coronavirus awaits FDA approval for clinical trial

Thx Joe

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 31, 2020 at 1:07:00 PM EDT
To: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: CORONAVIRUS FLAG: First cell treatment to fight coronavirus awaits FDA approval for clinical trial

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: News Alerts <NewsAlerts@WHO.eop.gov>
Date: March 31, 2020 at 9:09:44 AM EDT
Subject: CORONAVIRUS FLAG: First cell treatment to fight coronavirus awaits FDA approval for clinical trial

First cell treatment to fight the coronavirus awaits FDA approval for clinical trial

CNBC

Charlie Wood

March 31, 2020

<https://www.cnn.com/2020/03/31/cell-therapy-to-fight-covid-19-awaits-fda-approval-for-clinical-trial.html>

- *New Jersey-based therapeutics company Celularity is awaiting permission from the FDA to test whether a cancer treatment could be effective against COVID-19.*
- *The cell therapy works by boosting the body's early immune response in a way that could target the coronavirus.*
- *The company transforms placental stem cells into one-size-fits-all "Natural Killer" cells that act as sentinels and keep the virus from replicating out of control.*
- *Some researchers caution that the strategy is highly uncertain and potentially risky, but if the treatment proves safe and effective, Celularity will ramp up production quickly.*

The Food and Drug Administration is expected to approve the first of a whole new type of weapon to be tested in the international struggle against COVID-19 as the disease continues to sweep across the globe.

New Jersey-based therapeutics company Celularity announced that its cancer treatment, CYNK-001, is awaiting "Investigational New Drug" status for COVID-19 from the FDA, which could come any day. The treatment will immediately enter a preliminary clinical trial to see if it can help people suffering from the illness. Independent immunologists say that the

rationale for the treatment is solid but warn that it could exacerbate the most severe cases of the disease. If the new strategy proves effective, Celularity stands ready to rapidly increase production.

“It’s important the world knows that there are companies out there developing therapies,” says Dr. Robert Hariri, Celularity’s founder, chairman and CEO. “I bet we will have a therapy.”

Celularity — which has raised \$311 million in venture capital funding and attracted the support of big-name entrepreneurs like John Sculley, former CEO of Pepsi and [Apple](#) — is a growing biotech company with dreams of taking stem cell therapies mainstream. While sourcing these flexible cells has traditionally been ethically controversial, Hariri, a biomedical researcher, has developed a way to grow the regenerative cells from human placentas which would otherwise be thrown away.

Sculley, the vice chair of the company’s board of directors, envisions a wide range of applications, including someday growing synthetic lungs, but one of the company’s initial goals has been to make a cutting-edge cancer treatment more accessible. Infusions of a certain type of immune cell known as Natural Killer (NK) cells have proven effective in some cases. “All of a sudden their cancer starts melting way,” says [Corey Casper](#), a medical researcher and president of the Infectious Disease Research Institute in Seattle. “It’s like science fiction.”

But creating personalized NK cells from a patient’s blood is a laborious and lengthy process, which is why Celularity developed CYNK-001. The company transforms placental stem cells into one-size-fits all NK cells, which they keep on ice, ready for transfusion into any patient, at any time. “What’s really a game changer here is these end cells can be stored on the shelf and are ready, not specific to any one individual,” says Casper. “It’s a leap in the technology we haven’t had before.”

Now Celularity is hoping that its NK cells might help patients suffering from COVID-19 too. Where many of the drugs currently under investigation try to neutralize the SARS-CoV-2 virus directly, CYNK-001 — which is the first cell therapy awaiting FDA approval for trials for this illness — has a different goal: to deliver reinforcements to a beleaguered immune system.

When a virus invades the body, the immune system produces a horde of specialized cells that hunt down and kill the intruders. But learning to recognize the virus and raising an army takes days to a week. During that time, NK cells act as sentinels and keep the virus from replicating out of control. How exactly they pull off this task isn’t completely understood, but one of their abilities is to target and destroy stressed cells — a potential sign of infection.

This general capacity to target any and all diseased cells is what makes NK cells effective against certain cancers, and it also makes them the body’s first line of defense against viruses of all varieties. Celularity hopes that additional NK cells will curb SARS-CoV-2’s ability to spread through the body, buying enough time for the immune system to start producing its own antibodies and permanently quell the infection.

Natural Killer cells foe of viruses

But will it work? [Some research](#) suggests that transplanting mature NK cells into baby mice makes them less susceptible to one particular virus, but no researcher has yet succeeded in using the all-purpose fighters to defeat a virus in humans. One challenge is that viruses and NK cells are ancient foes, and many viruses have become skilled in deception over the eons. “We kind of get hoodwinked by the virus’ ability to evade the NK cells,” says [Wayne Yokoyama](#), an immunologist at the Washington University School of Medicine in St. Louis and longtime researcher of NK cells.

Yokoyama calls the CYNK-001 treatment “an intriguing idea,” but says that the only way to discover whether SARS-CoV-2 will prove a stealth master or a sitting duck is to try and see.

He warns, however, that testing should proceed with extreme caution. COVID-19 turns lethal when the immune system goes on a rampage in what’s known as a “[cytokine storm](#),” recklessly attacking otherwise healthy lung cells. For these people, pushing the immune system even further into overdrive with additional NK cells is the last thing doctors want to do.

Celularity has proved CYNK-001 safe in small numbers of cancer patients, but in those cases the immune system generally remains calm, at little risk of being pushed over the edge. It has been used as a treatment for acute myeloid leukemia, multiple myeloma, and glioblastoma multiforme. “Findings in cancer patients cannot be transposed to COVID-19 patients,” says Puck van Kasteren, a virologist at the National Institute for Public Health in the Netherlands.

But Dr. Hariri notes that the immune system does sometimes respond strongly while fighting cancer, and that Celularity has not observed any signs of cytokine storms while treating cancer patients with CYNK-001. He does not expect that CYNK-001 will cause any adverse effects in COVID-19 patients either. “Although this viral disease is different, we have taken steps to design our clinical trial to “tune” the anti-viral effect by escalating dose slowly while monitoring for evidence of toxicity,” says Dr. Hariri.

He notes that there is early evidence this treatment holds promise. The National Research Project for SARS, Beijing Group has studied NK cell number and function in patients of severe acute respiratory syndrome and the findings point to the fact that they play a direct role in fighting coronavirus.

With the FDA’s blessing, Casper will immediately begin recruiting 86 patients for a combined Phase I/Phase II clinical trial to test whether CYNK-001 is safe and effective for patients with COVID-19. The full trial will last for 11 months from recruitment to analysis, but he hopes the treatment’s effects will become visible within weeks to months. Celularity is funding the trial, which will cost millions of dollars.

To minimize the risk of patients succumbing to what Casper calls “friendly fire” from a rampaging immune system, the trial will focus on moderately ill people — patients who are hospitalized but not those who already need intensive care. Doctors will monitor the first 14 patients especially closely for any signs that CYNK-001 is triggering cytokine storms. “This is a new therapy, and safety comes first,” Casper says. “If we see any signal, we will stop immediately. My hope is that we won’t see this.”

Rush to fast-track experimental treatments

The therapy will join hundreds of other treatments currently undergoing FDA-approved testing for Covid-19. Statistically speaking, about one-third of such experimental drugs advance to Phase III for large-scale, rigorous testing.

If CYNK-001 is among the effective treatments, Celularity will be ready to ramp up production quickly. It can derive about 1,000 stem cells from a single placenta. The company recently built a \$75 million factory in New Jersey and anticipates being able to produce tens to hundreds of thousands of treatments by summer, according to Sculley. “This is not a dream of the future,” he says.

Early price projections put CYNK-001 at between \$2,000 and \$7,000 per dose, and in the clinical trial, each patient will receive three doses over the course of one week. But a Celularity spokesperson said that it’s too early to know what the treatment might cost if it reaches the market.

And if NK cells aren’t able to bring the SARS-CoV-2 virus to heel, that lesson could be useful to researchers, too. In the global war against COVID-19, every battle helps turn the tide. “You’ve got to start somewhere,” Yokoyama says. “Maybe this in itself gives us some valuable clues as to what the next step might be.”

From: News Alerts <NewsAlerts@WHO.eop.gov>

Sent: Wednesday, March 25, 2020 2:28 PM

Subject: CORONAVIRUS FLAG: UK to make 15-minute at-home kits available within days

Coronavirus test: UK to make 15-minute at-home kits available within days

The Independent

Kate Ng

March 25, 2020

><https://www.independent.co.uk/news/uk/home-news/coronavirus-test-uk-kit-home-nhs-cases-symptoms-public-health-england-a9424741.html><

'Once they have been tested this week and the bulk of tests arrive, they will be distributed into the community,' says Public Health England director

New 15-minute home test kits for coronavirus will be made available to the British public within days, said a Public Health England (PHE) director.

Thousands of tests will be sold in chemists such as Boots or delivered by Amazon to people with symptoms who are self-isolating as soon as next week.

Professor Sharon Peacock, director of the national infection service at PHE, told MPs on the science and technology committee once the tests are cleared, they will be "distributed to the community".

Matt Hancock, the health secretary, said the government bought millions of the tests on Tuesday and is ordering millions more.

The antibody test involves pricking a finger and analysing a drop of blood in a device that looks like a pregnancy test. It will only tell the person if they have had Covid-19, not if they currently have it.

The test will detect the presence of the antibodies IGM, which emerges in the early stages of infection, and IGG, which increases during the body's response to the virus.

Ms Peacock said the tests would “absolutely” be available within days, rather than weeks or months, when asked by MPs.

She said: “Several million tests have been purchased for use. These are brand new products. We have to be clear they work as they are claimed to do.

“Once they have been tested this week and the bulk of tests arrive, they will be distributed into the community.”

Currently, only patients admitted to hospital are being routinely tested for Covid-19. Between 5,000 to 6,000 people are being tested a day, but the government plans to increase this to 25,000 tests a day within four weeks.

The new antibody tests could help the UK achieve what the World Health Organisation (WHO) has urged governments to do, which is to “test, test, test”.

Tedros Adhanom Ghebreyesus, director-general of the WHO, said: “We cannot stop this pandemic if we do not know who is infected.”

The antibody tests are also being ordered across Europe and Southeast Asia, said Ms Peacock.

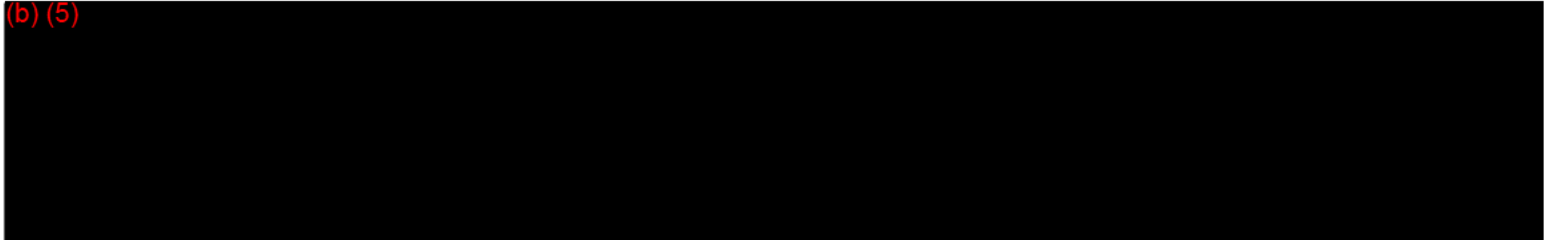
“We are not alone in doing this,” she added.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/24/2020 6:26:46 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
CC: Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]
Subject: Re: Talkers on CTAP

(b) (5). Thanks, Joe. We'll work on this.
Steve

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 24, 2020 at 6:26:03 PM EDT
To: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Bonner, Maria K. EOP/WHO <(b) (6) who.eop.gov>, Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>
Subject: Re: Talkers on CTAP

(b) (5)

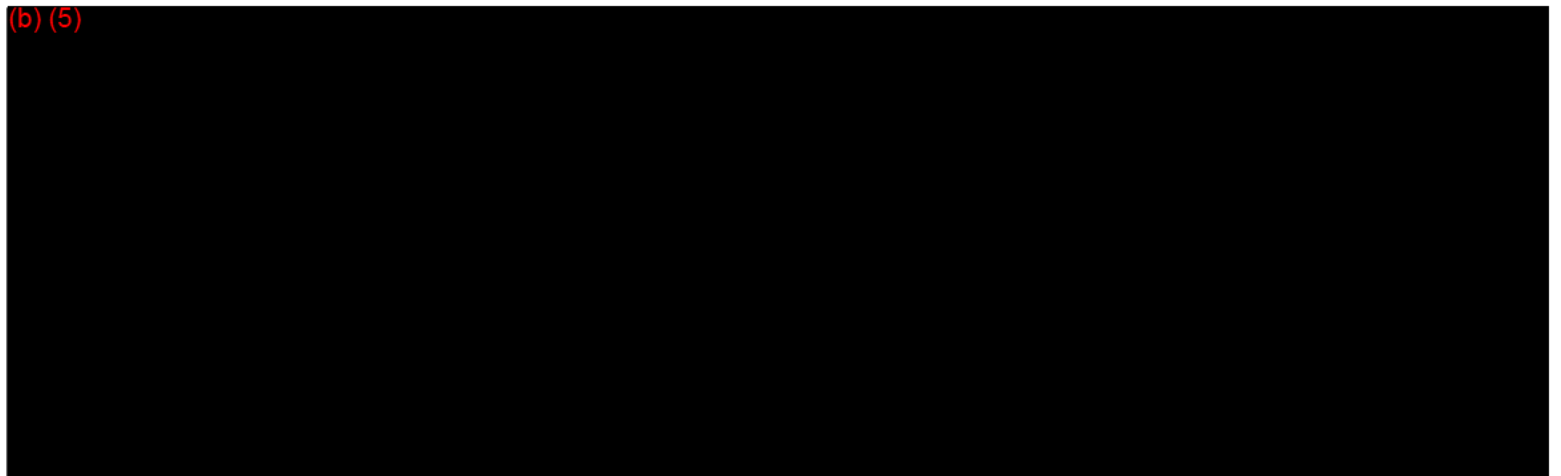


Sent from my iPhone

On Mar 24, 2020, at 2:26 PM, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov> wrote:

Stating point:

(b) (5)



(b) (5)



From: News Alerts <NewsAlerts@WHO.eop.gov>

Sent: Wednesday, March 25, 2020 2:28 PM

Subject: CORONAVIRUS FLAG: UK to make 15-minute at-home kits available within days

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The Independent

Kate Ng

March 25, 2020

<https://www.independent.co.uk/news/uk/home-news/coronavirus-test-uk-kit-home-nhs-cases-symptoms-public-health-england-a9424741.html>

'Once they have been tested this week and the bulk of tests arrive, they will be distributed into the community,' says Public Health England director

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The new antibody tests could help the UK achieve what the [World Health Organisation](#) (WHO) has urged governments to do, which is to "test, test, test".

Tedros Adhanom Ghebreyesus, director-general of the WHO, said: "We cannot stop this pandemic if we do not know who is infected."

The antibody tests are also being ordered across Europe and Southeast Asia, said Ms Peacock.

"We are not alone in doing this," she added.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/27/2020 9:39:38 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Hodgson, Christopher M. EOP/OVP (b) (6)@ovp.eop.gov]
CC: Troye, Olivia EOP/NSC (b) (6) (b) (6)
Subject: Re: Best person to contact

The company stopped compassionate use but they started an expanded access protocol which we approved on Tuesday. It is worth reaching out to the company

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 27, 2020 at 9:04:31 PM EDT
To: Hodgson, Christopher M. EOP/OVP <(b) (6)@ovp.eop.gov>
Cc: Troye, Olivia EOP/NSC <(b) (6) (b) (6)> Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Best person to contact

Steve is compassion use an option?

Sent from my iPhone

On Mar 27, 2020, at 8:54 PM, Hodgson, Christopher M. EOP/OVP <(b) (6)@ovp.eop.gov> wrote:

Per the email below from Rep. Liz Cheney's CoS, is there a good contact for them to reach out to about the Ramdesivir trial?

Chris Hodgson
Director of Legislative Affairs
Office of the Vice President
C: (b) (6)

Begin forwarded message:

From: "Ahern, Kara" <Kara.Ahern@mail.house.gov>
Date: March 27, 2020 at 8:45:36 PM EDT
To: "Hodgson, Christopher M. EOP/OVP" <(b) (6)@ovp.eop.gov>
Subject: Best person to contact

Chris - sorry to bother you as I know you are swamped. Liz asked me to reach out and see if you could point me in the right direction. The mother of the the former (b) (6) is in a hospital in NYC on a ventilator with COVID-19. Her Doctor asked him to see if there is anyway to get Ramdesivir to their hospital as they believe it will help his mother. The reason he is told that they can not get it is that it is not an approved test site. I am wondering who I can speak with to figure out timing on the drug and if it may be possible to get into the trial. Any advice?

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/31/2020 7:46:58 AM
To: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: potential call

Yes, I do think we (FDA) should engage. We are working with manufacturers so we have to be careful about CCI. Do you have a POC and number?
Steve

From: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>
Date: March 30, 2020 at 6:57:17 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FW: potential call

Any interest in taking this call or delegate to staff?

From: Pinkos, Stephen M. EOP/OVP <(b) (6)@ovp.eop.gov>
Sent: Monday, March 30, 2020 5:26 PM
To: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>
Subject: potential call

Tyler Ann,

Please see below and attached when you get a chance. This is a group of medical and investor heavy hitters who have been expending a great deal of time convening folks and developing ideas. Marty Obst and Michael Milken have been the principal conveners of this group.

Do you think this would be worth of Dr. Birx and/or Dr Hahn time? If not, we can take care of it at a staff level and report back.

Thanks,
Steve

From: Thomas Cahill <tom@newpath.partners>
Sent: Monday, March 30, 2020 3:52 PM
To: Marty Obst <martyobst@mostrat.com>
Cc: Pinkos, Stephen M. EOP/OVP <(b) (6)@ovp.eop.gov>; Cydney Couch <cydney@mostrat.com>; Lauren Denman <Ldenman@newpath.partners>
Subject: [EXTERNAL] Re: Follow Up Call

Dear Marty and Steve,

Thank you for reaching out. It would be great to find a time to chat with you all -- some from our team will join as well (Drs. Michael Rosbash, Stuart Schreiber, Ed Scolnick, David Liu, and Ramnik Xavier). Our team of citizen-scientists has been iterating on the proposal (attached) for the last month. We anticipate that implementing the proposal will provide an effective and safe therapy for COVID-19 within as little as 3 months

(June). This approach could provide a broadly available therapeutic to the general public by late summer, prior to the widely anticipated second wave of coronavirus outbreaks.

Lauren, cc'd, can help coordinate a time to speak.

Best,
Tom

On Mon, Mar 30, 2020 at 3:22 PM Marty Obst <martyobst@mostrat.com> wrote:

Steve,

I thought it would be helpful for us to have a follow up call at some point over the next couple of days. I think Tom's group can be tremendous impactful and I'd like to compare notes and agree on some action items. I'm willing to help on whatever I can do to assist.

Let me know if there would be a time tomorrow or Wednesday that would work.

Thanks,
Marty Obst

Sent from my iPad

--

Thomas J. Cahill III, M.D., Ph.D.
Founder and Managing Partner
Newpath Partners, L.P.
800 Boylston Street, Suite 2222
Boston, MA 02199
978-771-9999 | tom@newpath.partners

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■

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/25/2020 1:23:15 PM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]
Subject: Re: Tps on Gilead expanded access

Yes, we need to revisit. Have additional updates on therapeutics for you Joe

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Date: March 25, 2020 at 9:19:13 AM EDT
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Bonner, Maria K. EOP/WHO <(b) (6) who.eop.gov>, Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>
Subject: Re: Tps on Gilead expanded access

That's what CDER is comfortable with, yes.

(b) (5) It's a tough situation.

Sent from my iPhone

On Mar 25, 2020, at 9:06 AM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:

(b) (5)

Sent from my iPhone

On Mar 25, 2020, at 8:47 AM, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov> wrote:

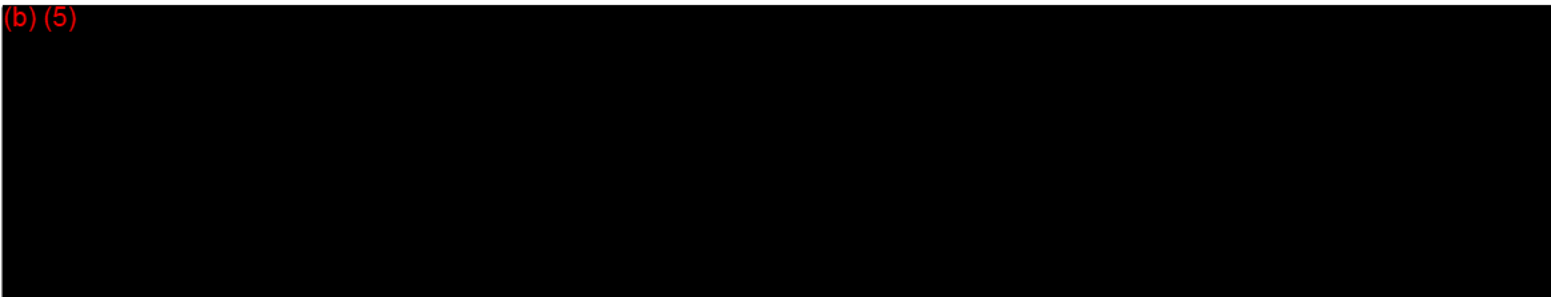
Cleared talkers:

FDA has been working with Gilead to provide investigational antiviral drug remdesivir to hospitalized COVID-19 patients in the U.S. through both clinical trials to evaluate safety and efficacy to fight the virus, as well as emergency use to individual patients of clinicians without access to a clinical trial. To date, the company has provided emergency access to remdesivir patients who are severely ill in the United States, Europe and Japan. Working with FDA, Gilead is moving to a broad expanded access program that is less burdensome to providers and patients. This is expected to accelerate the delivery of the drugs to hospitals, physicians and patients.

Sent from my iPhone

On Mar 24, 2020, at 8:18 PM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:

(b) (5)



Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/25/2020 9:39:43 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: STATE FLAG: Nevada governor bans malaria drugs for coronavirus patients

That is very interesting. This is definitely a patient-doctor issue within a local (state) context.

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 25, 2020 at 9:34:51 AM EDT
To: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: Re: STATE FLAG: Nevada governor bans malaria drugs for coronavirus patients

(b) (5)

Sent from my iPhone

On Mar 25, 2020, at 9:24 AM, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov> wrote:

We had a warning about this in our daily roundup yesterday (><https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-daily-roundup-march-24-2020><) and Consumer Update (><https://www.fda.gov/consumers/consumer-updates/beware-fraudulent-coronavirus-tests-vaccines-and-treatments><) that went out:

The FDA issued a Consumer Update advising consumers to be beware of fraudulent coronavirus tests, vaccines and treatments. The FDA is particularly concerned that deceptive and misleading products might cause Americans to delay or stop appropriate medical treatment, leading to serious and life-threatening harm. It's likely that the products do not do what they claim, and the ingredients in them could cause adverse effects and could interact with, and potentially interfere with, essential medications. There are no FDA-approved products to prevent COVID-19. For example, the FDA is aware of people trying to prevent COVID-19 by taking a product called chloroquine phosphate, which is sold to treat parasites in aquarium fish. Products for veterinary use or for "research use only" may have adverse effects, including serious illness and death, when taken by people. The agency warns not to take any form of chloroquine unless it has been prescribed by a health care provider and obtained from legitimate sources.

(b) (5)

Sent from my iPhone

On Mar 25, 2020, at 9:08 AM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: "Lyons, Derek S. EOP/WHO" <Derek.S.Lyons@who.eop.gov>

Date: March 25, 2020 at 9:04:39 AM EDT

To: "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>, "Cipollone, Pat A. EOP/WHO" <(b) (6)@who.eop.gov>, "Philbin, Patrick F. EOP/WHO" <(b) (6)@who.eop.gov>

Subject: FW: STATE FLAG: Nevada governor bans malaria drugs for coronavirus patients

From: News Alerts <NewsAlerts@WHO.eop.gov>

Sent: Wednesday, March 25, 2020 7:23 AM

Subject: STATE FLAG: Nevada governor bans malaria drugs for coronavirus patients

Nevada governor bans malaria drugs for coronavirus patients

Associated Press

Michelle Price

March 24, 2020

<https://www.washingtontimes.com/news/2020/mar/24/steve-sisolak-nevada-governor-bans-malaria-drugs-c/>

Nevada's governor has signed an emergency order barring the use of anti-malaria drugs for someone who has the coronavirus.

Democratic Gov. Steve Sisolak's order Tuesday restricting chloroquine and hydroxychloroquine comes after President Donald Trump touted the medication as a treatment for the virus.

Trump last week falsely stated that the Food and Drug Administration had just approved the use of chloroquine to treat patients infected with coronavirus. After the FDA's chief said the drug still needs to be tested for that use, Trump overstated the drug's potential benefits in containing the virus.

Sisolak said in a statement that there's no consensus among experts or Nevada doctors that the drugs can treat people with COVID-19. His order also limits a prescription to a 30-day supply to ensure it's available for "legitimate medical purposes" and so that people cannot find a way to stockpile the drug.

The governor's rule comes a day after a Phoenix-area man died and his wife was in critical condition from taking an additive used to clean fish tanks known as chloroquine phosphate, similar to the drug used to treat malaria.

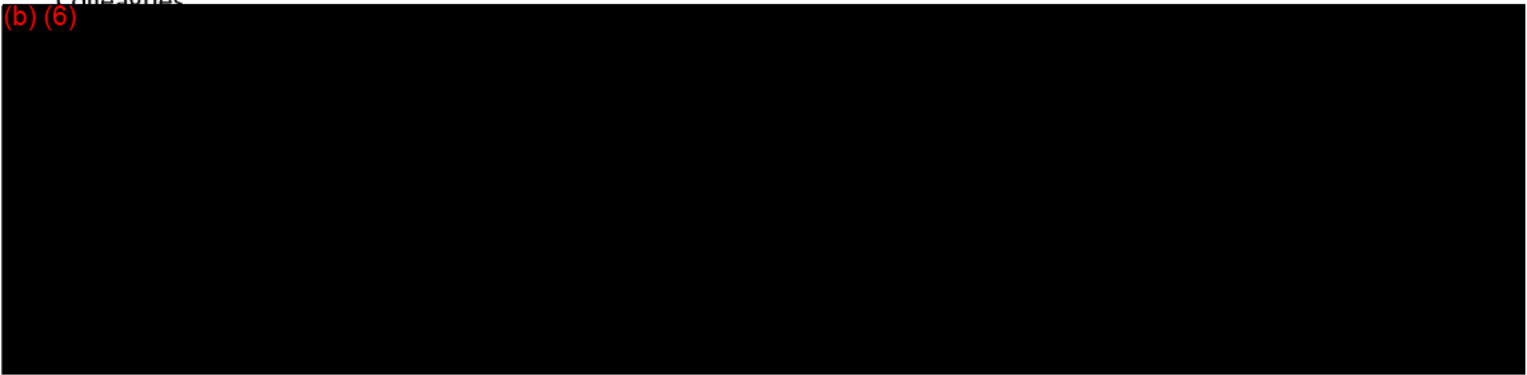
From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/22/2020 3:34:57 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Short, Marc T. EOP/OVP [(b) (6) ovp.eop.gov];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; (b) (6) HHS.GOV;
Seema Verma [Seema.Verma.OA@cms.hhs.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd];
Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]
CC: McGuffee, Tyler A. EOP/OVP [(b) (6) ovp.eop.gov]; Hurst, Natalie R. EOP/OVP [(b) (6) ovp.eop.gov]; Troye, Olivia EOP/NSC [(b) (6) (b) (6)]
Subject: Re: Birx virtual 22 March 2020

Deb,
Thank you very much for the information, your caution, and please take care.
Steve

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 8:29:18 AM EDT
To: Short, Marc T. EOP/OVP [(b) (6) ovp.eop.gov], Fauci, Anthony S (NIH) <(b) (6) niaid.nih.gov>, Hahn, Stephen <SH1@fda.hhs.gov>, (b) (6) HHS.GOV <(b) (6) HHS.GOV>, Seema Verma <Seema.Verma.OA@cms.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>, Adams, Jerome (OS) <Jerome.Adams@hhs.gov>
Cc: McGuffee, Tyler A. EOP/OVP <(b) (6) ovp.eop.gov>, Hurst, Natalie R. EOP/OVP <(b) (6) ovp.eop.gov>, Troye, Olivia EOP/NSC <(b) (6) (b) (6)>
Subject: Birx virtual 22 March 2020

Colleagues

(b) (6)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/26/2020 8:11:20 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: (b) (5)

Yes, for sure

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 26, 2020 at 7:50:09 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: (b) (5)

Let me know – (b) (5)

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Thursday, March 26, 2020 at 7:30 AM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: Re: (b) (5)

They tell us today

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 26, 2020 at 5:55:36 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: (b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/22/2020 3:33:48 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=Of1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]
Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

(b) (6)

Thanks

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 3:33:19 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>
Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

Will call you after task force – what is your cell number?

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Sunday, March 22, 2020 at 3:31 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Redfield, Robert R (CDC)" <(b) (6)@cdc.gov>
Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

Not doing press. I have lots of data on this.
S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 3:28:13 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>
Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

Yes – after call – are you doing press?

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Sunday, March 22, 2020 at 3:26 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Redfield, Robert R (CDC)" <(b) (6)@cdc.gov>
Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

(b) (5)

. Do
you have any time to talk about this?
S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 10:28:38 AM EDT

To: Hahn, Stephen <SH1@fda.hhs.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>

Subject: Fwd: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: Dr Mehmet Oz <drmoz@zoco.com>

Date: March 22, 2020 at 10:25:48 AM EDT

To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>

Cc: "McGuffee, Tyler A. EOP/OVP" <(b) (6)@ovp.eop.gov>, Michael Crupain <MCrupain@zoco.com>, "olx1@cdc.gov" <olx1@cdc.gov>

Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

Thanks for sharing but this does not address the shortage issue. We already have an IRB for prophylaxis and applying for treatment trial today but don't have drugs to complete so please share expectations that can inform our work. Can we at least get batches of drugs for a hundred trial patients? If you don't wish to put in writing, please call but I need guidance for my show and dozens of media interviews that I am doing tomorrow.

Also, the below summary correctly shares that no outcomes data is available from Marseille, but you should know that the French researcher confirmed clinical benefits but needs more data so will not release report for another 10 days. These findings offer hope to our people.

On Mar 22, 2020, at 10:17 AM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> wrote:

Dr Oz

This was posted yesterday on the CDC website and serves to address the issues you raised. Deb

Information for Clinicians on Therapeutic Options for COVID-19 Patients

There are no US Food and Drug Administration (FDA)-approved drugs specifically for the treatment of patients with COVID-19. At present clinical management includes infection prevention and control measures and supportive care, including supplementary oxygen and mechanical ventilatory support when indicated. An array of drugs approved for other indications as well as several investigational drugs are being studied in several hundred clinical trials that are underway across the globe. The purpose of this document is to provide information on two of the approved drugs (chloroquine and hydroxychloroquine) and one of the investigational agents (remdesivir) currently in use in the United States.

Remdesivir

Remdesivir is an investigational intravenous drug with broad antiviral activity that inhibits viral replication through premature termination of RNA transcription and has in-vitro activity against SARS-CoV-2 and in-vitro and in-vivo activity against related betacoronaviruses [13].

There are currently four options for obtaining remdesivir for treatment of hospitalized patients with COVID-19 and pneumonia in the United States:

- A National Institutes of Health (NIH)-sponsored adaptive double-blinded, placebo-controlled trial of remdesivir versus placebo in COVID-19 patients with pneumonia and hypoxia is enrolling

non-pregnant persons aged 18 years and older with oxygen saturation of $\leq 94\%$ on room air or requiring supplemental oxygen or mechanical ventilation (<https://clinicaltrials.gov/ct2/show/NCT04280705>;external icon). Exclusion criteria include alanine aminotransaminase or aspartate aminotransaminase levels >5 times the upper limit of normal, stage 4 severe chronic kidney disease or a requirement for dialysis (i.e., estimated glomerular filtration rate (eGFR) <30);

- Two phase 3 randomized open-label trials of remdesivir (5-days versus 10-days versus standard of care) are open to enrollment in persons aged 18 years and older with COVID-19, radiographic evidence of pneumonia and oxygen saturation of $\leq 94\%$ on room air (severe disease <https://clinicaltrials.gov/ct2/show/NCT04292899>;external icon) or $>94\%$ on room air (moderate disease <https://clinicaltrials.gov/ct2/show/NCT04292730>;external icon). Exclusion criteria include alanine aminotransaminase or aspartate aminotransaminase levels >5 times the upper limit of normal, participation in another clinical trial of an experimental treatment for COVID-19, requirement for mechanical ventilation, or creatinine clearance <50 mL/min; and
- Finally, in areas without clinical trials, COVID-19 patients in the United States and other countries have been treated with remdesivir on an uncontrolled compassionate use basis. While clinical trials are critical to establish the safety and efficacy of this drug, clinicians without access to a clinical trial may request remdesivir for compassionate use through the manufacturer for patients with clinical pneumonia: compassionateaccess@gilead.com

Hydroxychloroquine and Chloroquine

Hydroxychloroquine and chloroquine are oral prescription drugs that have been used for treatment of malaria and certain inflammatory conditions. Chloroquine has been used for malaria treatment and chemoprophylaxis, and hydroxychloroquine is used for treatment of rheumatoid arthritis, systemic lupus erythematosus and porphyria cutanea tarda. Both drugs have in-vitro activity against SARS-CoV, SARS-CoV-2, and other coronaviruses, with hydroxychloroquine having relatively higher potency against SARS-CoV-2 [14,5]. A study in China reported that chloroquine treatment of COVID-19 patients had clinical and virologic benefit versus a comparison group, and chloroquine was added as a recommended antiviral for treatment of COVID-19 in China [6]. Based upon limited in-vitro and anecdotal data, chloroquine or hydroxychloroquine are currently recommended for treatment of hospitalized COVID-19 patients in several countries. Both chloroquine and hydroxychloroquine have known safety profiles with the main concerns being cardiotoxicity (prolonged QT syndrome) with prolonged use in patients with hepatic or renal dysfunction and immunosuppression but have been reportedly well-tolerated in COVID-19 patients.

Due to higher in-vitro activity against SARS-CoV-2 and its wider availability in the United States compared with chloroquine, hydroxychloroquine has been administered to hospitalized COVID-19 patients on an uncontrolled basis in multiple countries, including in the United States. One small study reported that hydroxychloroquine alone or in combination with azithromycin reduced detection of SARS-CoV-2 RNA in upper respiratory tract specimens compared with a non-randomized control group but did not assess clinical benefit [7]. Hydroxychloroquine and azithromycin are associated with QT prolongation and caution is advised when considering these drugs in patients with chronic medical conditions (e.g. renal failure, hepatic disease) or who are receiving medications that might interact to cause arrhythmias.

Hydroxychloroquine is currently under investigation in clinical trials for pre-exposure or post-exposure prophylaxis of SARS-CoV-2 infection, and treatment of patients with mild, moderate, and severe COVID-19. In the United States, several clinical trials of hydroxychloroquine for prophylaxis or treatment of SARS-CoV-2 infection are planned or will be enrolling soon. More information on trials can be found at: <https://clinicaltrials.gov/>;external icon.

There are no currently available data from Randomized Clinical Trials (RCTs) to inform clinical guidance on the use, dosing, or duration of hydroxychloroquine for prophylaxis or treatment of SARS-CoV-2 infection. Although optimal dosing and duration of hydroxychloroquine for treatment of COVID-19 are unknown, some U.S. clinicians have reported anecdotally different hydroxychloroquine dosing such as: 400mg BID on day one, then daily for 5 days; 400 mg BID on day one, then 200mg BID for 4 days; 600 mg BID on day one, then 400mg daily on days 2-5.

Other Drugs

Lopinavir-ritonavir did not show promise for treatment of hospitalized COVID-19 patients with pneumonia in a recent clinical trial in China ^[8]. This trial was underpowered, and lopinavir-ritonavir is under investigation in a World Health Organization study.

Several other drugs are under investigation in clinical trials or are being considered for clinical trials of prophylaxis or treatment of COVID-19 in the United States and worldwide. Information on registered clinical trials for COVID-19 in the United States is available

at: >>>[<<<;external icon.](https://clinicaltrials.gov/)

References

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2. Sheahan TP, Sims AC, Leist SR, Schäfer A, Won J, Brown AJ, Montgomery SA, Hogg A, Babusis D, Clarke MO, Spahn JE, Bauer L, Sellers S, Porter D, Feng JY, Cihlar T, Jordan R, Denison MR, Baric RS. Comparative therapeutic efficacy of remdesivir and combination lopinavir, ritonavir, and interferon beta against MERS-CoV. *Nat Commun*. 2020 Jan 10;11(1):222.
3. Sheahan TP, Sims AC, Graham RL, Menachery VD, Gralinski LE, Case JB, Leist SR, Pyrc K, Feng JY, Trantcheva I, Bannister R, Park Y, Babusis D, Clarke MO, Mackman RL, Spahn JE, Palmiotti CA, Siegel D, Ray AS, Cihlar T, Jordan R, Denison MR, Baric RS. Broad-spectrum antiviral GS-5734 inhibits both epidemic and zoonotic coronaviruses. *Sci Transl Med*. 2017 Jun 28;9(396).
4. Colson P, Rolain JM, Lagier JC, Brouqui P, Raoult D. Chloroquine and hydroxychloroquine as available weapons to fight COVID-19. *Int J Antimicrob Agents*. 2020 Mar 4:105932. doi: 10.1016/j.ijantimicag.2020.105932. [Epub ahead of print]
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6. Gao J, Tian Z, Yang X. Breakthrough: Chloroquine phosphate has shown apparent efficacy in treatment of COVID-19 associated pneumonia in clinical studies. *Biosci Trends*. 2020 Mar 16;14(1):72-73
7. Gautret P, Lagier J, Parola P, Hoang V, Meddeb L, Mailhe M, et al. Hydroxychloroquine and azithromycin as a treatment of COVID-19: results of an open-label non-randomized clinical trial. *International Journal of Antimicrobial Agents*. In Press.
8. Cao B, Wang Y, Wen D, Liu W, Wang J, Fan G, Ruan L, Song B, Cai Y, Wei M, Li X, Xia J, Chen N, Xiang J, Yu T, Bai T, Xie X, Zhang L, Li C, Yuan Y, Chen H, Li H, Huang H, Tu S, Gong F, Liu Y, Wei Y, Dong C, Zhou F, Gu X, Xu J, Liu Z, Zhang Y, Li H, Shang L, Wang K, Li K, Zhou X, Dong X, Qu Z, Lu S, Hu X, Ruan S, Luo S, Wu J, Peng L, Cheng F, Pan L, Zou J, Jia C, Wang J, Liu X, Wang S, Wu X, Ge Q, He J, Zhan H, Qiu F, Guo L, Huang C, Jaki T, Hayden FG, Horby

PW, Zhang D, Wang C. A Trial of Lopinavir-Ritonavir in Adults Hospitalized with Severe Covid-19. N Engl J Med. 2020 Mar 18. doi: 10.1056/NEJMoa2001282. [Epub ahead of print]

Page last reviewed: March 21, 2020

Content source: National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases

Coronavirus Disease 2019 (COVID-19)

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From: Dr Mehmet Oz <drmoz@zoco.com>

Date: Sunday, March 22, 2020 at 10:11 AM

To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@(b) (6)>

Cc: "McGuffee, Tyler A. EOP/OVP" <(b) (6) ovp.eop.gov>, Michael Crupain <MCrupain@zoco.com>

Subject: Re: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

Can we get Taskforce commitment for academic centers to procure at least enough drugs for 100 patient trials like the project below. Does the Taskforce have an idea of the magnitude of shortage and estimates of length of time required to remedy situation?

If we cannot do trials, can we free US clinicians to start using this combo drug protocol. We cannot hide behind study protocols if we are not allowed to proceed. We should have started enrollment on Friday and I want to push brave Americans to join trials on my show tomorrow, but cannot without a game plan for accessing drugs.

P.S. The French physician Raoult argued that withholding access is unethical.

On Mar 22, 2020, at 9:59 AM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> wrote:

Guidelines to clinicians is coming out today or tomorrow around this essential issue. Deb

From: Dr Mehmet Oz <drmoz@zoco.com>

Date: Sunday, March 22, 2020 at 9:52 AM

To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>

Cc: "McGuffee, Tyler A. EOP/OVP" <(b) (6) ovp.eop.gov>, Michael Crupain <MCrupain@zoco.com>

Subject: [EXTERNAL] Urgent Oz: Clinical Trial Drug Shortage

I interviewed the respected Marseille Prof Dr Didier Raoult at 6am today. He authored the French hydroxychloroquine + azithromycin study and has very provocative un-published findings that are worth sharing. I shared his beliefs with my New York Presbyterian – Columbia team and we are writing IRBs for approval early this week but we need medications. However, in our massive hospital, we currently have enough hydroxychloroquine for 75 patients and azithromycin for 20 patients. I will personally fund the trial and committed \$250,00 but nothing can progress without medications. The President should sequester these medications for clinical trials like ours. Can you help us? I am taping material for tomorrow and would appreciate any advice on how to phrase the Task Force's efforts.

Mehmet Oz (917 648 8553)

(b) (5)

From: Andrew Whitney <andrew.whitney@vespasian.com>

Date: March 21, 2020 at 11:50:29 PM EDT

To: "McGuffee, Tyler A. EOP/OVP" <(b) (6)@ovp.eop.gov>

Cc: Robert Newman PHD <newmanscientificconsulting@gmail.com>, Debra Birnkrant <Debra.Birnkrant@fda.hhs.gov>

Subject: [EXTERNAL] Post-Call Report/Summary on FDA/Phoenix Biotechnology INC Call

Dear Taylor Ann,

It is certainly our conclusion that we had a very positive and productive call with Debbie (naturally I hope she agrees) and we are very grateful for the opportunity to meet the Director of Antivirals for FDA.

We sought to provide a very succinct and compelling account of the achievements to date, the envelope hypothesis that we believe explains our results against multiple viruses (our solution damages the ability of viral progeny to properly form their protective envelope and thus they fall victim to the body's immune system) and we also covered the Phase 1&2 clinical trials success to date that underscores safety.

We informed Debbie about the prearranged test against COVID19 at ALG labs in Minnesota this coming week.

We briefly touched on the situation in Mexico (with a suitable number of caveats and disclaimers so as not to overplay the point) but as of 9pm this evening it has been confirmed that the 8mo baby boy appears to be recovering well, no more fever or diarrhea and only some coughing; quite a reversal on the terminal status recorded by the doctor at the time the decision was taken to deploy Anvirez as a last ditch move.

We felt the call was very positive and the follow up actions are:

- 1) Provide papers/data to Debbie/FDA team to support claims on tests to date
- 2) Provide corroborating evidence against COVID19 once received from ALG labs this week coming
- 3) Submit 'Pre-IND' application; essentially all the above plus the material originally submitted for the Phase 1&2 (but repeated because last time it went in the system for oncology and this time it will go in as antiviral/COVID19).

A REQUEST: Tyler Ann we did ask if FDA personnel could perhaps put in a call to a couple of labs to get us some further testing opportunities (the labs all say they are too busy to fit us in, which is to some degree understandable given the current pressure on the system and also the fact that we are nobodies in the grand scheme) but while we understand that the FDA cannot insert itself/step forward to wield influence here I'd like to ask you if someone from Ambassador Birx's office might be willing to make that call on our behalf. We are very certain that if such a call were to come from her office and/or the White House these labs would likely find a test opportunity for us. I would be pleased to provide the contact details if you believe that could be made to happen.

We are very grateful for Debbie's advice, clarity and positive drive and engagement on this, particularly on a Saturday evening and indeed to you too Tyler Ann; it is an inspiring demonstration of what happens when great people assert themselves on a situation to bring about results.

We fully believe we have something unique here and We stand ready to respond at any hour.

Very best

Andrew

Andrew Whitney
Executive Chairman
Phoenix Biotechology Inc

Cell: (b) (6)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/25/2020 12:38:31 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: (b) (5)

Yes, pre-brief Thursday. Colin can you make sure that happens?

S

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 25, 2020 at 11:52:38 AM EDT
To: Rom, Colin <Colin.Rom@fda.hhs.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: (b) (5)

Ok. So pre brief Thursday?

Sent from my iPhone

> On Mar 25, 2020, at 11:51 AM, Rom, Colin <Colin.Rom@fda.hhs.gov> wrote:

>

> Will be ready to announce to task force on Friday

>

> -----Original Message-----

> From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>

> Sent: Wednesday, March 25, 2020 11:22 AM

> To: Hahn, Stephen <SH1@fda.hhs.gov>

> Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>

> Subject: (b) (5)

>

> I'm getting pressed to schedule it.

>

> Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/25/2020 12:32:21 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: FDA presentation friday

Joe,
It's coronavirus treatment acceleration plan

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 25, 2020 at 12:22:22 PM EDT
To: Troye, Olivia EOP/NSC <(b) (6) (b) (6)> Short, Marc T. EOP/OVP <(b) (6) ovp.eop.gov>, Miller, Stephen EOP/WHO <Stephen.Miller@who.eop.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: FDA presentation friday

FDA will be ready to present their Coronavirus Therapy Action Plan to the Task Force Friday. Please put it on the agenda.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/22/2020 8:50:32 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] mitchell.katz@nychhc.org
CC: Mary Dale Peterson [M.Peterson@asahq.org]
Subject: Re: [EXTERNAL] re ramping up personnel and ventilators

Mitch

I believe we know each other from time at UCSF.

I've attached the guidance.

Please let me know how we can help.

Steve

<https://www.fda.gov/media/136318/download>

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 8:45:38 PM EDT
To: mitchell.katz@nychhc.org <mitchell.katz@nychhc.org>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Mary Dale Peterson <M.Peterson@asahq.org>
Subject: Fwd: [EXTERNAL] re ramping up personnel and ventilators

Trying again.

Sent from my iPhone

Begin forwarded message:

From: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Date: March 22, 2020 at 8:38:14 PM EDT
To: "mitchellkatz@NYCHHC.org" <mitchellkatz@NYCHHC.org>
Cc: Stephen Hahn <sh1@fda.hhs.gov>, Mary Dale Peterson <M.Peterson@asahq.org>
Subject: Fwd: [EXTERNAL] re ramping up personnel and ventilators

Mitchell

I have copied Stephen Hahn and Mary Peterson. FDA has approved the use of OR vents and Dr. Peterson has been amazing on the below. She also has all the filter change information. Let us know how we can help. Deb

Sent from my iPhone

Begin forwarded message:

From: Mary Dale Peterson <M.Peterson@asahq.org>
Date: March 22, 2020 at 6:26:26 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Adams, Jerome (HHS/OASH)" <Jerome.Adams@hhs.gov>
Cc: Manuel Bonilla <M.Bonilla@asahq.org>, Paul Pomerantz <p.pomerantz@asahq.org>
Subject: [EXTERNAL] re ramping up personnel and ventilators

Drs. Birx and Adams- I wanted to let you know that ASA and APSF will be coming out with a statement recommending that anesthesia professionals wear N95 masks or have equivalent protection (CAPR/PAPR) for all intubations. We are

MULTI-HHS-FDA-20-0771-A-000309

beginning to see more community spread and instances where one day a person is not a PUI and the next day they are ill with COVID 19. We can't afford to lose our workforce at this critical time and those performing intubations are at the highest risk for aerosolized particles and the close proximity required for intubation. We understand that many hospitals are running low on N95s. Do you all have any idea how much could be released from stockpiles while manufacturing ramps up production or what the status is for n95s?

On another work stream, I want to share what we are doing to repurpose anesthesia ventilators and create an additional workforce:

1) By Tuesday evening we will have more specific, practical guidance to anesthesiologists on how to convert anesthesia gas machines to ventilate COVID19 patients that would include the common ventilatory modes needed and how to accomplish that. We will have short videos that demo this with the most common anesthesia gas machines as well as an FAQ section.

2) By the end of the week we will have an educational approach for critical care patient management

- Common dos and don'ts
- Infectious Disease 101- the right antibiotics to consider with co-infections
- Nutrition 101
- The role of ECMO (very limited)

3) We are looking at developing an ongoing resource where we would set up a hotline with our experts to assist anesthesiologists with repurposing their anesthesia machines for ICU ventilation. We are not sure exactly how to do this, but will be investigating the logistics. We have the volunteer experts.

We are organizing a tele town hall this Thursday that will concentrate on these 3 topics with our members.

We are working nonstop to help our members with resources to take care of the surge of patients. Please let me know if you have other thoughts or suggestions.

Sincerely,

Mary Dale Peterson, MD, MSHCA, FASA
President-Elect, ASA
(cell) 361-774-5530

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@(b) (6)>
Sent: Sunday, March 22, 2020 5:07 PM
To: Mary Dale Peterson <M.Peterson@asahq.org>; Adams, Jerome (HHS/OASH) <Jerome.Adams@hhs.gov>
Cc: Manuel Bonilla <M.Bonilla@asahq.org>
Subject: Re: [EXTERNAL] FW: [External] From the President of the Illinois Society of Anesthesiologists

Thank you – I have sent to the right people. Deb

From: Mary Dale Peterson <M.Peterson@asahq.org>
Date: Sunday, March 22, 2020 at 6:05 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@(b) (6)> "Adams, Jerome (HHS/OASH)" <Jerome.Adams@hhs.gov>
Cc: Manuel Bonilla <M.Bonilla@asahq.org>
Subject: [EXTERNAL] FW: [External] From the President of the Illinois Society of Anesthesiologists

Drs. Birx and Adams- Not sure who I should send this contact re manufacturing N95s.

Mary Dale

Mary Dale Peterson, MD, MSHCA, FASA
President-Elect, ASA
(cell) 361-774-5530

From: Feldman, Jeffrey <FELDMANJ@email.chop.edu>
Sent: Sunday, March 22, 2020 4:58 PM
To: Mary Dale Peterson <M.Peterson@asahq.org>; Manuel Bonilla <M.Bonilla@asahq.org>
Subject: FW: [External] From the President of the Illinois Society of Anesthesiologists

FYI

From: Sean Adams <ssadamss@me.com>
Date: Sunday, March 22, 2020 at 5:49 PM
To: "feldman@apsf.org" <feldman@apsf.org>
Cc: Doug Bennett <Douglas@aura-tech.us>
Subject: [External] From the President of the Illinois Society of Anesthesiologists

Good afternoon Jeff:

Thanks for all you are doing in these times.

I appreciated your comments during the Town Hall.

The CEO of a defense contractor (card below Doug Bennett, copied this email, >>[<>http://aura.company](http://aura.company)<<) specialized in 3D print technology solutions was referred to me as potential to make N95 supplies and other needs that may be in short supply at the local level.

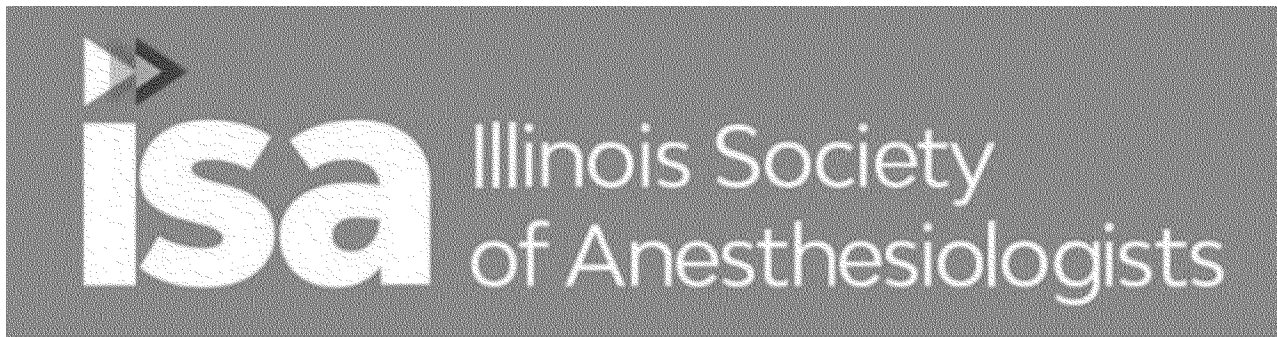
Who might I refer him towards for specific conversation?

You brought up N95 technical issues during the Town Hall that sound like you could have a productive discussion with him.

Please let me know anything I might do.

Thanks,

Sean
Sean S. Adams, M.D. FASA
Sean S. Adams, M.D.
mobile 312 961 0348
2019-2020 President to the Illinois Society of Anesthesiologists
(312) 580-2455
>>[<>www.isahq.org](http://www.isahq.org)<<



20 North Michigan Avenue, Suite 700

Chicago, Illinois 60602

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/24/2020 4:39:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: [EXTERNAL] URGENT: Significantly More Viable Coronavirus Test Kits - Made in USA

(b) (5)

S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 23, 2020 at 8:59:27 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: [EXTERNAL] URGENT: Significantly More Viable Coronavirus Test Kits - Made in USA

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: "Horn, Drew L. EOP/OVP" <(b) (6) ovp.eop.gov>
Date: March 23, 2020 at 5:52:36 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Cc: "Kellogg, Joseph Keith K. Jr. EOP/OVP" <(b) (6) ovp.eop.gov>, "Pinkos, Stephen M. EOP/OVP" <(b) (6) ovp.eop.gov>, "Howard, Jeff D. Jr. EOP/OVP" <(b) (6) ovp.eop.gov>, Vuong Vinh <vinh@vuonginc.com>, Keith Schiller <keith@ksgg.consulting>, "Gray, John W. EOP/OVP" <(b) (6) ovp.eop.gov>
Subject: Fwd: [EXTERNAL] URGENT: Significantly More Viable Coronavirus Test Kits - Made in USA

Ambassador Birx,

I know you are extremely busy but I am forwarding this as it is high profile and tied to Keith Schiller and his recent conversations with the President on this subject. Both he and Vinh are cc'd so they can connect with the appropriate member of your team.

Thanks,

Drew

Begin forwarded message:

From: Vinh Vuong <vinh@vuonginc.com>
Date: March 22, 2020 at 7:21:41 PM EDT
To: "Horn, Drew L. EOP/OVP" <(b) (6) ovp.eop.gov>
Subject: [EXTERNAL] URGENT: Significantly More Viable Coronavirus Test Kits - Made in USA

We have a more a far more viable solution for coronavirus (and other viruses) testing which will get around sample prep and DNA extraction bottlenecks -- and more importantly has a specificity and sensitivity at 100% respectively.

The test is from DiaCarta, based in Richmond, CA, please find their product flyer for the COVID-19 test attached:

- DiaCarta-Flyer-Quantivirus-SARS-CoV-2-Test-Kit-03212020 [**100% specificity / 100% sensitivity**]. This test already has already received an acknowledgement letter from the FDA on an EUA submission (attached).

Currently, (b) (4)

DiaCarta can scale up to (b) (4)

These tests have been validated on multiple PCR platforms, which solves the current bottleneck created by existing tests from Roche.

All tests MADE IN USA. See attached for the Manufacturer submission.

Please let me know of interest and will connect you or others to them.

Many thanks,

Vinh

--

Vinh Vuong

Chairman, Vuong Enterprises
Partner, Bork Communication Group
Partner, Lucas | Compton

P: +1 646-946-2176

LinkedIn: ><https://www.linkedin.com/in/vinhvuong/><

Twitter: ><https://www.twitter.com/thevinhvuong><

Website: <https://www.vinhvuong.com><

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/21/2020 6:29:25 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Subject: Re: Hand Sanitizer

Used to be called ATF

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 21, 2020 at 6:28:29 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Hand Sanitizer

What is TTB?

Sent from my iPhone

On Mar 21, 2020, at 6:25 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

FYI if you could help with pro-active situational awareness.
S

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Date: March 21, 2020 at 6:22:55 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Hand Sanitizer

We should chat again on this. You are going to hear about this at WH and from Hill. Below what was agreed to between FDA/TTB.

TTB Action items:

- Update guidance to remove production with undenatured alcohol, send to FDA
- Provide information on labeling and permit requirements for shipping both denatured and undenatured alcohol
- Provide Q&A on website with cross reference to FDA Q&A/Guidance
- If questions come in from manufacturers citing difficulty denaturing alcohol, ask whether the denaturants themselves are in short supply and who they purchase the denaturing chemicals from. Provide info to TTB

FDA Action items:

- Provide Q&A on website with cross reference to TTB Q&A/Guidance, include information on safety issue with undenatured alcohol
- Review TTB Denaturant list and provide input on which formulas would be appropriate for hand sanitizers
- Draft further guidance on production of ethanol as API, and describe safety issue with undenatured alcohol
- Discuss policy with Chief of Staff (b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/22/2020 11:20:58 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]
Subject: Re: Margolis COVID-19 tx working paper.pdf

Got it

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: March 22, 2020 at 10:55:43 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Shah, Anand <Anand.Shah@fda.hhs.gov>
Subject: Margolis COVID-19 tx working paper.pdf

(b) (5)

A large black rectangular redaction box covers the majority of the email body content below the subject line. The text "(b) (5)" is visible in the top left corner of this redacted area.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/15/2020 5:08:15 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: Senator Blunt and Senator Alexander call

Would be happy to do so. Colin or Keagan, would you check in with the VP's leg affairs person who was on the line to find out exactly what the senators want from us? One thing I wrote down is to create a document that speaks to the different technologies that we are looking out for diagnostic and serology testing.

Thanks

Steve

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: April 15, 2020 at 4:37:11 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Senator Blunt and Senator Alexander call

Can you start and I will fill in whatever you need from me

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Wednesday, April 15, 2020 at 4:29 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: Senator Blunt and Senator Alexander call

Debi,

We have a couple of deliverables for the Senators. What do you want me to work on?

thanks

Steve

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/15/2020 7:44:27 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: [EXTERNAL] Rapid Immunoassay Kits

Beautifully done.
Very very nice
S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 15, 2020 at 7:36:23 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: [EXTERNAL] Rapid Immunoassay Kits

Are you all looking at this.

Sent from my iPhone

Begin forwarded message:

From: Jonathan Cohen <jonathan@biocheckinfo.com>
Date: March 15, 2020 at 7:11:10 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: [EXTERNAL] Rapid Immunoassay Kits

Dr. Birx:

Thank you for the call today.

As discussed, our company has acquired exclusive U.S. distribution rights from two large Chinese manufacturers of rapid IgM / IgG antibody detection kits. Notwithstanding the extraordinary progress which the White House Coronavirus Task Force seems to be making to advance testing, there are several reasons why rapid antibody tests should be immediately deployed to augment America's COVID-19 armamentarium. In short, they include the following:

- Rapid results (under 10 minutes)
- High sensitivity (~98%) and specificity (~92%)
- Well validated on numerous cohorts in China
- Whole blood testing likely remedies some false negatives inherent in respiratory swab samples
- Low cost (under \$10 per test)
- Ease of use; no need for laboratory personnel, equipment or sample transport
- Can be easily mass produced to over 200,000 per day

The attached manuscript from a large group of Chinese practitioners makes the case for IgM / IgG antibody tests for COVID-19. (The two manufacturers that we have under contract report better sensitivity of 98%.)

Last week we submitted an FDA Emergency Use Authorization request notwithstanding the fact that the current EUA template is geared to RT-PCR based laboratory tests.

We would welcome further discussions with you and the Task Force on ways in which rapid antibody testing might augment current lab based RT-PCR testing. Your confirmation of receipt of this message would be most appreciated.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/15/2020 7:43:42 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
CC: Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]
Subject: Re: [EXTERNAL] Rapid Immunoassay Kits

I'll ask my Deputy, Anand Shah to look into it.
Steve

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 15, 2020 at 7:36:23 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: [EXTERNAL] Rapid Immunoassay Kits

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: Jonathan Cohen <jonathan@biocheckinfo.com>
Date: March 15, 2020 at 7:11:10 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: [EXTERNAL] Rapid Immunoassay Kits

Dr. Birx:

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- Ease of use; no need for laboratory personnel, equipment or sample transport
- Can be easily mass produced to over 200,000 per day

The attached manuscript from a large group of Chinese practitioners makes the case for IgM / IgG antibody tests for COVID-19. (The two manufacturers that we have under contract report better sensitivity of 98%.)

Last week we submitted an FDA Emergency Use Authorization request notwithstanding the fact that the current EUA template is geared to RT-PCR based laboratory tests.

We would welcome further discussions with you and the Task Force on ways in which rapid antibody testing might augment current lab based RT-PCR testing. Your confirmation of receipt of this message would be most appreciated.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/11/2020 6:07:27 AM
To: Troye, Olivia EOP/NSC [(b) (6) (b) (6)] Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Wellstar in GA

I can confirm what Deb and I said was accurate. The legal question can be directed to CDC. That being said, if a laboratory is having any difficulty getting tests, we can connect them to the 2 manufacturers very quickly.

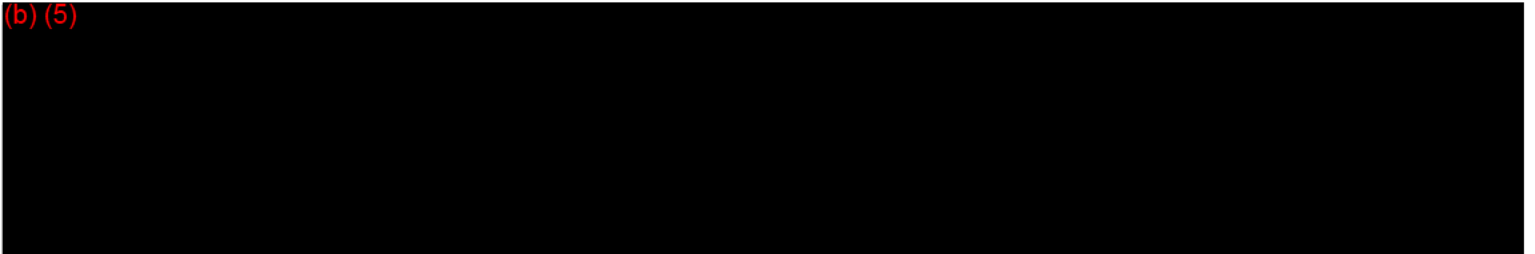
From: Troye, Olivia EOP/NSC <(b) (6) (b) (6)>
Date: March 10, 2020 at 11:23:23 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Wellstar in GA

I see. Okay. This puts it in the ongoing context.

Olivia Troye
Special Advisor for Homeland Security and Counterterrorism
Office of the Vice President
Office: (202) 456-2641
Mobile: (b) (6) Does not receive texts)

On Mar 10, 2020, at 9:13 PM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> wrote:

(b) (5)



Sent from my iPhone

On Mar 10, 2020, at 9:05 PM, Troye, Olivia EOP/NSC <(b) (6) (b) (6)> wrote:

(b) (5) This got routed to me internally to OVP.
Thank you.

Wellstar Health in GA

“From what I am hearing, WellStar doesn’t have the legal ability to give the test to whoever they want to. What I have heard is that, since the only test kits effectively in the market today are the CDC’s kits, WellStar has to request and obtain approval from the CDC (sometimes in conjunction with the Georgia department of health). Sadly, I know several other people who have very similar symptoms to those the Fleeman’s have (including some elderly people) and everyone is having the same issue. I will let you all know as soon as the

situation appears to change...I heard the VP today say that 1M kits have been distributed...I don't where they have gone as they don't appear to have come here"

On Mar 10, 2020, at 2:57 PM, Josh Youssef <josh@htp.org> wrote:

I am on the phone with a board member of one of the largest healthcare systems in the south. Can we talk ?

Josh

404 451 9051

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/11/2020 5:40:20 AM
To: Troye, Olivia EOP/NSC (b) (6) (b) (6) Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Wellstar in GA

Olivia

What Deb has written is correct in terms of not knowing to whom the tests were sold. We could ask the company and they could voluntarily tell us although that doesn't sound like the issue here. (b) (5)
(b) (5). I don't know Wellstar and I also don't know to whom they would like to give the tests. In any event, (b) (5) if possible.
Steve

From: Troye, Olivia EOP/NSC (b) (6) (b) (6)
Date: March 10, 2020 at 11:23:23 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Wellstar in GA

I see. Okay. This puts it in the ongoing context.

Olivia Troye
Special Advisor for Homeland Security and Counterterrorism
Office of the Vice President
Office: (202) 456-2641
Mobile: (202) 881-9378 (Does not receive texts)

On Mar 10, 2020, at 9:13 PM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> wrote:

It could be the case as we don't know where any of the commercial IDT test kits have gone. At least I don't know and no one can answer me. If hospitals or others didn't buy them they don't have anything outside of the CDC state health labs provided tests. All we know is there are kits to ship we don't know where they have gone as they don't have to show us. This is the same with usage. It's why we are focused on use and force reporting of use and positive and negatives. (b) (5)
(b) (5)

Sent from my iPhone

On Mar 10, 2020, at 9:05 PM, Troye, Olivia EOP/NSC (b) (6) (b) (6) wrote:

Can either of you shed some light on how this could be the case? This got routed to me internally to OVP.
Thank you.

Wellstar Health in GA

“From what I am hearing, WellStar doesn’t have the legal ability to give the test to whoever they want to. What I have heard is that, since the only test kits effectively in the market today are the CDC’s kits, WellStar has to request and obtain approval from the CDC (sometimes in conjunction with the Georgia department of health). Sadly, I know several other people who have very similar symptoms to those the Fleeman’s have (including some elderly people) and everyone is having the same issue. I will let you all know as soon as the situation appears to change...I heard the VP today say that 1M kits have been distributed...I don’t where they have gone as they don’t appear to have come here”

On Mar 10, 2020, at 2:57 PM, Josh Youssef <josh@htp.org> wrote:

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Josh

404 451 9051

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/12/2020 6:29:00 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; McGowan, Robert K (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e6175b088b1d49a4bfa2de3862800d4a-HHS-omc2-cd]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: The Reagents come from Germany

We are in constant contact in the manufacturers of reagents and while we have not had anyone reach out to us about this issue, we are looking into it. I've spoken to Jeff Shuren's team and they will specifically reach out about this.
Steve

Sent from my iPad

> On Mar 11, 2020, at 9:10 PM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:
>
> Guys, I'm being told that the reagents for the tests come from Germany and they have put export controls on everything covid-19. (b) (5)
>
> Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 3/3/2020 9:08:44 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Williams, James H. EOP/WHO [(b) (6) who.eop.gov]; Baehr, James S. EOP/WHO [James.S.Baehr@who.eop.gov]; DeValliere, Ian C. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: Treatment Candidate for Coronavirus

We're on it.
Steve

Sent from my iPad

On Mar 3, 2020, at 7:57 AM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:

Thanks. James give them whatever they need. This company comes highly recommended — i.e., they aren't kooks. (b) (6)

Sent from my iPhone

On Mar 3, 2020, at 6:50 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

James,
We will look at it.

(b) (5)

Thanks.

Steve

Sent from my iPad

On Mar 2, 2020, at 7:22 PM, Williams, James H. EOP/WHO <(b) (6) who.eop.gov> wrote:

Good evening Commissioner,

Well done at the press conference this evening.

Please see the attached document from Beyond Air, a company that produces a portable Nitric Oxide (NO) system. The company has already demonstrated safety for high levels of NO in a number of clinical settings. Given prior safety assessments, can this product be prioritized for consideration of approved testing and an open label trial with COVID-19 infected patients? Let us know if FDA would prefer an alternative approval process for this candidate product.

Thank you,

James H. Williams
Special Assistant to the President
Domestic Policy Council
The White House

Office: (202) 395-5812

Cell: (b) (6)

<200226 Beyond Air COV-19 Background.pdf>

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/14/2020 5:12:57 PM
To: Liddell, Christopher P. EOP/WHO [(b) (6)]<[redacted]@who.eop.gov>; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]<[redacted]@hhs.gov>; Kratsios, Michael J. EOP/OSTP [(b) (6)]<[redacted]@ostp.eop.gov>
CC: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]<[redacted]@eop.gov>; Kushner, Jared C. EOP/WHO [jck@who.eop.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Seema Verma [(b) (6)]<[redacted]@cms.hhs.gov>; Sharpless, Norman E (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d860d490594f4675960aad587639ed9c-HHS-norman.]; Tromberg, Bruce J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5089fb4d6fa44f82bea7b1016d4d4d5d-HHS-bruce.t]; Collins, Francis S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5257472fae794b85b15c27eb54598d70-HHS-collins]; Butterfield, Nicholas W. EOP/WHO [(b) (6)]<[redacted]@who.eop.gov>; Droegemeier, Kelvin K. EOP/OSTP [(b) (6)]<[redacted]@ostp.eop.gov>
Subject: RE: Quick description of our app

Michael,

(b) (5)

Steve

I am happy to facilitate.

From: Liddell, Christopher P. EOP/WHO <[(b) (6)]<[redacted]@who.eop.gov>
Date: April 14, 2020 at 5:11:38 PM EDT
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>, Fauci, Anthony S (NIH) <[(b) (6)]<[redacted]@niaid.nih.gov>, Kratsios, Michael J. EOP/OSTP <[(b) (6)]<[redacted]@ostp.eop.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)]<[redacted]@eop.gov>, Kushner, Jared C. EOP/WHO <jck@who.eop.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>, Seema Verma <[(b) (6)]<[redacted]@cms.hhs.gov>, Sharpless, Norman E (NIH) <norman.sharpless@nih.gov>, Tromberg, Bruce J (NIH) <bruce.tromberg@nih.gov>, Collins, Francis S (NIH) [(b) (6)]<[redacted]@nih.gov>, Butterfield, Nicholas W. EOP/WHO <[(b) (6)]<[redacted]@who.eop.gov>, Droegemeier, Kelvin K. EOP/OSTP <[(b) (6)]<[redacted]@ostp.eop.gov>
Subject: RE: Quick description of our app

+ Michael Kratsios (CTO)

(b) (5)

(b) (5) please just email him directly

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Monday, April 13, 2020 10:12 PM
To: Fauci, Anthony (NIH/NIAID) [E] <[(b) (6)]<[redacted]@niaid.nih.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>; Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)]<[redacted]@eop.gov>; Kushner, Jared C. EOP/WHO <jck@who.eop.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Seema Verma <[(b) (6)]<[redacted]@cms.hhs.gov>; Sharpless, Norman (NIH/NCI) [E] <norman.sharpless@nih.gov>; Tromberg, Bruce (NIH/NIBIB) [E] <bruce.tromberg@nih.gov>; Collins, Francis (NIH/OD) [E] <[(b) (6)]<[redacted]@nih.gov>; Liddell, Christopher P. EOP/WHO <[(b) (6)]<[redacted]@who.eop.gov>

<(b) (6)>who.eop.gov>

Subject: Re: Quick description of our app

Let's do it. Chris Liddell is working with a number tech companies on response

Sent from my iPhone

On Apr 13, 2020, at 10:08 PM, Fauci, Anthony (NIH/NIAID) [E] <(b) (6)>niaid.nih.gov> wrote:

Steve:

NIH (Sharpless and Tromberg) have an app that we should have presented to a subset of the Task Force.

Best,

Tony

From: Hahn, Stephen <SH1@fda.hhs.gov>

Sent: Monday, April 13, 2020 2:17 PM

To: Debi Birx MD <Deborah.L.Birx@> Jared Kushner <Jck@who.eop.gov>; Fauci, Anthony (NIH/NIAID) [E] <(b) (6)>niaid.nih.gov>; Redfield, Robert R. (CDC/OD) <olx1@cdc.gov>; Joe Grogan <Joseph.J.Grogan@who.eop.gov>; Seema Verma <(b) (6)>cms.hhs.gov>

Subject: Fwd: Quick description of our app

Is this something we have an interest in?

Steve

Sent from my iPhone

Begin forwarded message:

From: (b) (4) >

Date: April 13, 2020 at 12:51:47 PM EDT

To: "Hahn, Stephen" <SH1@fda.hhs.gov>

Cc: Bob Jackson (b) (4) >

Subject: Quick description of our app

Thanks Dr. Hahn – below are very quick thoughts and I am working to get your more visual material for your discussion-slides in a couple minutes

The wellness app (developed by (b) (4) Elemental Cognition) provides a mechanism to answer important questions about the epidemic that will inform risk to any given participant as well as to society or employer.

The app functions as daily verification that the participant is symptom free and also captures de-identified information that can be used for monitoring the epidemic in real time and at the same time capturing very important longitudinal data about various categories of participants.

This app can be a very important public health tool and also be used to provide meaningful information back to participants, employers, state and local and federal officials.

1. Provides daily confirmation that someone feels well is afebrile and symptom free

2. Contains information about viral and antibody testing- (note antibody testing and viral are only one of many features and are not mandatory)
 - a. Collects meaningful data that is informative to public health decision making
 - b. Avoids controversy around antibody testing certificates or other certification
 - c. Collects meaningful information regarding serology and risk and clinical course over time
3. Displays information about number and rate of those in various categories – these categories are used for multidimensional tracking of outcome and risk assessment
 - a. Well vs not well
 - b. Viral history and recovery history
 - c. Antibody history
 - d. Working vs Isolation
 - e. Vaccine yes or no (one of many future uses)
4. **App is one mechanism to enable employee check in** (vs clip board or home grown apps) and collect meaningful informative data
5. Detailed “state” logic that recommends testing strategy- very much optional element related to incorporating serology testing
6. QR code to store testing data linked to demographic and daily data in de-identified way
7. Allows optional participation in clinical trial with reach back capability
 - a. Will be enable many meaningful clinical trials, real-time learnings, and publications
 - b. Ability to combine our data with many other app and web based data collection
8. Design to systematically collect information to inform society about the epidemic
 - a. Proportions of patients in states
 - b. Rates of re-infection
 - c. Duration to re-infection
 - d. Rates of return to work
 - e. Geographic elements – of all categories and early identification of new outbreaks
 - f. Multiple variable baseline data analysis- demographics, race, co-morbidity, living arrangement, disability
9. Functions as a very important bio surveillance app as well serving same purpose for employers and institutions
10. Has visual displays demonstrating well participants vs ill and any other dimensions
11. Can partner with academic institutions and employers and other groups (organizations, cities, etc.)

(b) (4)

This e-mail message is intended for the use of its intended recipient and may contain proprietary, confidential and/or privileged information. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this e-mail, its contents and any attachment(s), in whole or in part, is strictly prohibited without the prior written consent of (b) (4). If you have received this e-mail in error or are not the intended recipient, you are not authorized to use the information in this message in any way. Please do not read, copy, forward or store this message unless you are an intended recipient of it. Please notify the sender immediately by return e-mail, delete this e-mail and any attachment(s) and destroy all copies. Any unauthorized use is strictly prohibited. If you reply to this message, (b) (4) collect personal information about you in accordance with our Privacy Policy. For additional information on our privacy practices, [please click here](#). Thank you.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/9/2020 8:02:33 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Seema Verma [Seema.Verma.OA@cms.hhs.gov]
CC: Polowczyk, John P RADM USN JS J4 (USA) [john.p.polowczyk.mil@mail.mil]; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Subject: Re: Excellent call with the lab directors

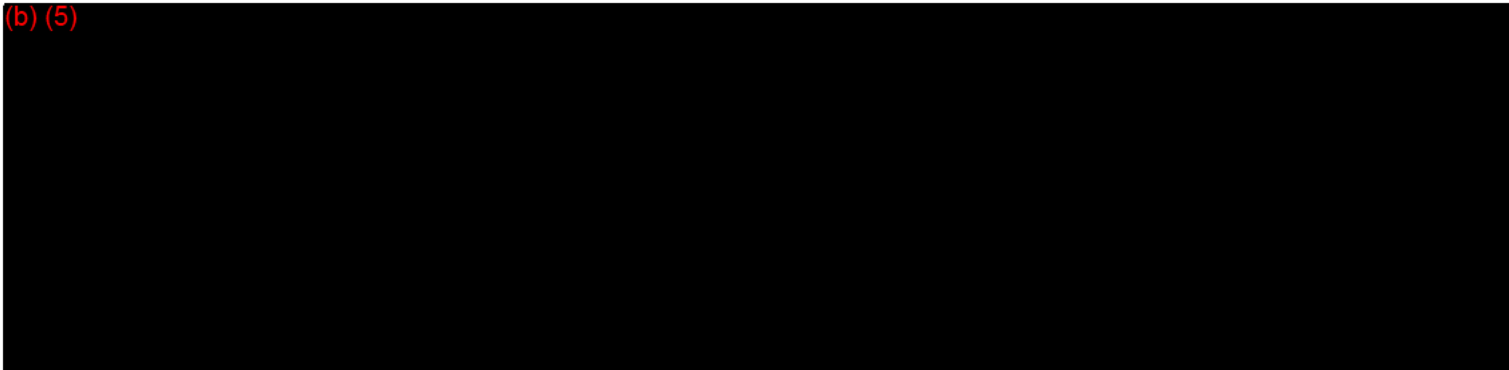
Deb,
We are very happy to have a call with them. Who is their point of contact and we will arrange?
Steve

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: April 8, 2020 at 9:40:50 PM EDT
To: Giroir, Brett (OS) <Brett.Giroir@hhs.gov>, Hahn, Stephen <SH1@fda.hhs.gov>, Seema Verma <Seema.Verma.OA@cms.hhs.gov>
Cc: Polowczyk, John P RADM USN JS J4 (USA) <john.p.polowczyk.mil@mail.mil>, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Subject: Excellent call with the lab directors

To summarize

Many issues discussed from labs around the country and this is a group we have left out of regular outreach and calls. (b) (5)

(b) (5)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/12/2020 5:06:03 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Finally read the packet insert

I did. Our approvals are dependent upon which company is able to provide the validation data. Obviously, we are prioritizing PoC tests.

S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: April 12, 2020 at 3:40:58 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Finally read the packet insert

(b) (5)

Deb

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/6/2020 12:02:32 PM
To: Staff Secretary [staffsecretary@who.eop.gov]; DL Chief of Staff Office [DLChiefofStaffOffice@WHO.eop.gov]; Salvi, Mary E. EOP/WHO [Mary.E.Salvi@who.eop.gov]; Eisenberg, John A. EOP/WHO [John.A.Eisenberg@who.eop.gov]; Philbin, Patrick F. EOP/WHO [(b) (6)@who.eop.gov]; imt@who.eop.gov; Kushner, Jared C. EOP/WHO [jck@who.eop.gov]; Berkowitz, Avraham J. EOP/WHO [avi@who.eop.gov]; Hicks, Hope C. EOP/WHO [Hope@who.eop.gov]; Vought, Russell T. EOP/OMB [(b) (6)@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@who.eop.gov]; Troye, Olivia EOP/NSC [(b) (6)@who.eop.gov]; Pottinger, Matthew F. EOP/WHO [(b) (6)@who.eop.gov]; john.gountanis@hq.dhs.gov; Blackwell, Juliana [juliana.blackwell@HQ.DHS.GOV]; Ditto, Jessica E. EOP/WHO [Jessica.E.Ditto@who.eop.gov]; Grisham, Stephanie A. EOP/WHO [(b) (6)@who.eop.gov]; Gidley, Hogan H. EOP/WHO [Hogan.Gidley@who.eop.gov]; Hahn, Julia A. EOP/WHO [(b) (6)@who.eop.gov]; Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]; Short, Marc T. EOP/OVP [(b) (6)@ovp.eop.gov]; Hoelscher, Douglas L. EOP/WHO [(b) (6)@who.eop.gov]; Pataki, Tim A. EOP/WHO [(b) (6)@who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Ueland, Eric M. EOP/WHO [Eric.M.Ueland@who.eop.gov]; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Liddell, Christopher P. EOP/WHO [(b) (6)@who.eop.gov]; Harrison, Brian (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ac2bfe7febef45ed98c87b83e5bcf8d0-HHS-Brian.H]; Kudlow, Larry A. EOP/WHO [(b) (6)@who.eop.gov]; Olmem, Andrew J. EOP/WHO [(b) (6)@who.eop.gov]; Rinat, Ory S. EOP/WHO [Ory.S.Rinat@who.eop.gov]; adam.boehler@dfc.gov; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Conway, Kellyanne E. EOP/WHO [KAC@who.eop.gov]
CC: Staff Secretary [staffsecretary@who.eop.gov]
Subject: RE: FOR QUICK REVIEW: POTUS Remarks for Call with pharmaceutical industry CEOs

Look good to me. Thanks
Steve

From: Staff Secretary <staffsecretary@who.eop.gov>
Date: April 6, 2020 at 11:52:34 AM EDT
To: DL Chief of Staff Office <DLChiefofStaffOffice@WHO.eop.gov>, Salvi, Mary E. EOP/WHO <Mary.E.Salvi@who.eop.gov>, Eisenberg, John A. EOP/WHO <John.A.Eisenberg@who.eop.gov>, Philbin, Patrick F. EOP/WHO <(b) (6)@who.eop.gov>, imt@who.eop.gov <imt@who.eop.gov>, Kushner, Jared C. EOP/WHO <jck@who.eop.gov>, Berkowitz, Avraham J. EOP/WHO <avi@who.eop.gov>, Hicks, Hope C. EOP/WHO <Hope@who.eop.gov>, Vought, Russell T. EOP/OMB <(b) (6)@who.eop.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@who.eop.gov>, Troye, Olivia EOP/NSC <(b) (6)@who.eop.gov>, Pottinger, Matthew F. EOP/WHO <(b) (6)@who.eop.gov>, john.gountanis@hq.dhs.gov <john.gountanis@hq.dhs.gov>, Blackwell, Juliana <juliana.blackwell@HQ.DHS.GOV>, Ditto, Jessica E. EOP/WHO <Jessica.E.Ditto@who.eop.gov>, Grisham, Stephanie A. EOP/WHO <(b) (6)@who.eop.gov>, Gidley, Hogan H. EOP/WHO <Hogan.Gidley@who.eop.gov>, Hahn, Julia A. EOP/WHO <(b) (6)@who.eop.gov>, Miller, Katie R. EOP/OVP <(b) (6)@ovp.eop.gov>, Short, Marc T. EOP/OVP <(b) (6)@ovp.eop.gov>, Hoelscher, Douglas L. EOP/WHO <(b) (6)@who.eop.gov>, Pataki, Tim A. EOP/WHO <(b) (6)@who.eop.gov>, Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>, Ueland, Eric M. EOP/WHO <Eric.M.Ueland@who.eop.gov>, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>, Liddell, Christopher P. EOP/WHO <(b) (6)@who.eop.gov>, Harrison, Brian (OS) <Brian.Harrison@hhs.gov>, Kudlow, Larry A. EOP/WHO <(b) (6)@who.eop.gov>, Olmem, Andrew J. EOP/WHO <(b) (6)@who.eop.gov>, Rinat, Ory S. EOP/WHO <Ory.S.Rinat@who.eop.gov>, adam.boehler@dfc.gov <adam.boehler@dfc.gov>, Rom, Colin

<Colin.Rom@fda.hhs.gov>, Conway, Kellyanne E. EOP/WHO <KAC@who.eop.gov>, Hahn, Stephen <SH1@fda.hhs.gov>

Cc: Staff Secretary <staffsecretary@who.eop.gov>

Subject: RE: FOR QUICK REVIEW: POTUS Remarks for Call with pharmaceutical industry CEOs

Updated remarks attached. Please let Staff Sec know if you have any edits by 12:30 pm today.

Thanks,

Staff Sec

From: Staff Secretary

Sent: Monday, April 6, 2020 10:11 AM

To: DL Chief of Staff Office <DLChiefofStaffOffice@WHO.eop.gov>; Salvi, Mary E. EOP/WHO <Mary.E.Salvi@who.eop.gov>; Eisenberg, John A. EOP/WHO <John.A.Eisenberg@who.eop.gov>; Philbin, Patrick F. EOP/WHO <pfp2dcp@who.eop.gov>; imt@who.eop.gov; Kushner, Jared C. EOP/WHO <jck@who.eop.gov>; Berkowitz, Avraham J. EOP/WHO <avi@who.eop.gov>; Hicks, Hope C. EOP/WHO <Hope@who.eop.gov>; Vought, Russell T. EOP/OMB <(b) (6)> <(b) (6)> Birx, Deborah L. EOP/NSC <Deborah.L.Birx@<(b) (6)> Troye, Olivia EOP/NSC <Olivia.Troye@<(b) (6)> Pottinger, Matthew F. EOP/WHO <(b) (6)> who.eop.gov>; 'john.gountanis@hq.dhs.gov' <john.gountanis@hq.dhs.gov>; 'Blackwell, Juliana' <juliana.blackwell@HQ.DHS.GOV>; Ditto, Jessica E. EOP/WHO <Jessica.E.Ditto@who.eop.gov>; Grisham, Stephanie A. EOP/WHO <(b) (6)> who.eop.gov>; Gidley, Hogan H. EOP/WHO <Hogan.Gidley@who.eop.gov>; Hahn, Julia A. EOP/WHO <(b) (6)> who.eop.gov>; Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>; Short, Marc T. EOP/OVP <(b) (6)> ovp.eop.gov>; Hoelscher, Douglas L. EOP/WHO <(b) (6)> who.eop.gov>; Pataki, Tim A. EOP/WHO <(b) (6)> who.eop.gov>; 'Fauci, Anthony (NIH/NIAID) [E]' <(b) (6)> niaid.nih.gov>; Ueland, Eric M. EOP/WHO <Eric.M.Ueland@who.eop.gov>; Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>; Liddell, Christopher P. EOP/WHO <(b) (6)> who.eop.gov>; 'Harrison, Brian (HHS/IOS)' <Brian.Harrison@hhs.gov>; Kudlow, Larry A. EOP/WHO <(b) (6)> who.eop.gov>; Olmem, Andrew J. EOP/WHO <(b) (6)> who.eop.gov>; Rinat, Ory S. EOP/WHO <Ory.S.Rinat@who.eop.gov>; 'adam.boehler@dfc.gov' <adam.boehler@dfc.gov>; 'Colin.Rom@fda.hhs.gov' <Colin.Rom@fda.hhs.gov>

Cc: Staff Secretary <staffsecretary@who.eop.gov>

Subject: FOR QUICK REVIEW: POTUS Remarks for Call with pharmaceutical industry CEOs

Attached for quick review are POTUS remarks for today's call with pharmaceutical industry CEOs.

Please let Staff Sec know by 11:00 am if you have any edits or comments.

Reach out directly with questions.

Thanks,

Staff Sec

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/6/2020 10:40:56 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Staff Secretary [staffsecretary@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
CC: Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]; Troutman, Joel D. EOP/WHO [Joel.D.Troutman@who.eop.gov]; Pataki, Tim A. EOP/WHO [(b) (6) who.eop.gov]; Williams, Michael B. EOP/WHO [Michael.B.Williams@who.eop.gov]
Subject: Re: FOR QUICK REVIEW: POTUS Remarks for Call with pharmaceutical industry CEOs

That is correct Joe

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: April 6, 2020 at 10:20:38 AM EDT
To: Staff Secretary <staffsecretary@who.eop.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>, Troutman, Joel D. EOP/WHO <Joel.D.Troutman@who.eop.gov>, Pataki, Tim A. EOP/WHO <(b) (6) who.eop.gov>, Williams, Michael B. EOP/WHO <(b) (6) who.eop.gov>
Subject: Re: FOR QUICK REVIEW: POTUS Remarks for Call with pharmaceutical industry CEOs

These are good. (b) (5)

Thank you .

Sent from my iPhone

On Apr 6, 2020, at 10:10 AM, Staff Secretary <staffsecretary@who.eop.gov> wrote:

Attached for quick review are POTUS remarks for today's call with pharmaceutical industry CEOs.

Please let Staff Sec know **by 11:00 am** if you have any edits or comments.

Reach out directly with questions.

Thanks,

Staff Sec

<Call with Pharmaceutical Company Executives - 10 am.docx>

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/19/2020 1:38:31 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Fwd: Hydroxychloroquine supply (>100 million tablets) + other COVID-19 therapeutic updates

Sent from my iPhone

Begin forwarded message:

From: "Achrekar, Angeli" <AchrekarA@state.gov>
Date: March 19, 2020 at 1:10:43 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: Fw: Hydroxychloroquine supply (>100 million tablets) + other COVID-19 therapeutic updates

FYI

Sent from my BlackBerry 10 smartphone.

From: Anil Soni <Anil.Soni@mylan.com>
Sent: Thursday, March 19, 2020 12:17 PM
To: Birx, Deborah L
Cc: Giroir, Brett (HHS/OASH); Fauci, Anthony (NIH/NIAID) [E]; Harder, Kristina (HHS/IOS); Valentine, Steven (HHS/OASH); Beckham, Tammy (HHS/OASH); Bembo, Dinah (HHS/OASH); Haigwood, Patricia (OS/ASPR/BARDA) (CTR); Haddad, Carla (HRSA)
Subject: Hydroxychloroquine supply (>100 million tablets) + other COVID-19 therapeutic updates

Debbi,

See below for updates from Mylan on therapeutics under evaluation for uses related to COVID-19. Please connect me to the relevant person(s) to quickly supply hydroxychloroquine. I'll send updates on the rest when available.

Hydroxychloroquine: Mylan's product is FDA approved, manufactured in (b) (4) in bottles of 100 200mg tablets (b) (4) tablets will be available to ship by the first week of April (b) (4) treatments if taken as 600mg daily for 10 days – based on Raoult's trial in France). We have enough API to then produce (b) (4) tablets (at least (b) (4) treatments); we're working to secure API to produce (b) (4) tablets more.

Lopinavir/ritonavir: Mylan has FDA tentative approval under PEPFAR for LPV/r (200/50mg in bottles of 120 tablets), manufactured in (b) (4) Though we are one of the largest suppliers of this product, (b) (4)

(b) (4)

(b) (4)

(b) (4)

Favipiravir: We do *not* currently manufacture this product, a 200mg tablet. (b) (4)

(b) (4)

(b) (4)

(b) (4)

Remdesivir: We do ***not*** currently manufacture this product, still under development by Gilead (10-day IV administration, 200mg Day 1 + 100mg (b) (4) [REDACTED]) [REDACTED]
[REDACTED]

I hope this information is helpful. Mylan has a long history of supplying products directly to the US government, including current contracts with the CDC under the National Strategic Stockpile program. If helpful, we can leverage existing contractual relationships with Mylan to ensure we move as quickly as possible. Please let me know how to follow up on hydroxychloroquine supply ASAP (b) (4) [REDACTED]. I can be a first point of contact ((b) (6) [REDACTED] mobile) to mobilize the relevant colleagues at Mylan. We will, in parallel, continue to pursue the steps noted for the other therapeutics being investigated.

Best wishes,
Anil

Head of Global Infectious Diseases
Mylan

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Please think before you print.



View in other languages.

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/18/2020 8:12:24 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Fwd: From Singapore Ambassador Ashok Mirpuri (re-sending)
Attachments: Covid-19 Test Kits from Singapore.pdf; ATT00001.htm; Dr Deborah Birx, 18 March 2020.pdf; ATT00002.htm

Sent from my iPhone

Begin forwarded message:

From: "Ashok KUMAR MIRPURI (MFA)" <Ashok_KUMAR_MIRPURI@mfa.gov.sg>
Date: March 18, 2020 at 5:34:15 PM EDT
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Cc: "Pottinger, Matthew F. EOP/WHO" <(b) (6) who.eop.gov>, "stilwelldr@state.gov" <stilwelldr@state.gov>, "Noah NEO (MFA)" <Noah_NEO@mfa.gov.sg>
Subject: FW: From Singapore Ambassador Ashok Mirpuri (re-sending)

Message Classification: Restricted

Re-sending. Typo in the email address.

From: Ashok KUMAR MIRPURI (MFA)
Sent: Wednesday, 18 March 2020 17:30
To: 'deborah.l.brix@ (b) (6)' <deborah.l.brix@ (b) (6)>
Cc: (b) (6) <(b) (6)>, (b) (6) <(b) (6)>, (b) (6) <(b) (6)>, 'stilwelldr@state.gov' <stilwelldr@state.gov>; Noah NEO (MFA) <Noah_NEO@mfa.gov.sg>
Subject: From Singapore Ambassador Ashok Mirpuri

Message Classification: Restricted

Dr Deborah Birx
White House Coronavirus Task Force Coordinator

Dear Dr Birx

Thank you for taking the time to speak to the ASEAN Ambassadors in Washington D.C. yesterday afternoon. We appreciate that you reached out, and offered a clear perspective of the current situation in the United States regarding Covid-19.

As promised, I write to follow up on our discussion on the Covid-19 test kits from Singapore. Eight Singaporean companies have developed diagnostic test kits for the Covid-19 virus. They allow for fast and highly accurate detection of the Covid-19 virus and utilise a range of technologies, viz. six based on Polymerase Chain Reaction (PCR) to detect the viral genome, one on Point of Care Testing (POCT) to detect viral antigens or antibodies, and one on Artificial Intelligence analysis of chest CT scans.

(b) (4)

. MiRXES and Veredus have already received Provisional Authorisation from Singapore's Health Sciences Authority (HSA); MiRXES has also been granted CE-IVD certification from the European Union. The remaining five – AIT Biotech, (b) (4) – are expected to submit their applications shortly. I attach a document containing information about the various test kits from Singapore.

(b) (4)

My Embassy is happy to follow up on this matter, and I welcome your support for expedited approval of these Singapore-made test kits. Please feel free to reach out if you or your team have questions or require more information.

Thank you again for your valuable time, and please know that Singapore stands ready to work with the United States and our regional partners to combat the spread of Covid-19.

*Yours sincerely,
Ashok Mirpuri*

cc

The Honorable David Stilwell
Assistant Secretary of State for East Asian and Pacific Affairs
United States of America

The Honorable Matthew Pottinger
Deputy National Security Advisor
National Security Council
Executive Office of the President

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/11/2020 6:32:09 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Redd, Stephen C (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=bb0e6496f1af42ce9f8e0d4f92fae009-HHS-scr1-cd]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Gastfriend, Daniel Z. EOP/OMB (b) (6) (b) (6)
Subject: As an alert and (b) (5)

(b) (5)

Q: What happens if I do not have the extraction platform referenced in the authorization of CDC's EUA-authorized test?

A: FDA believes that the CDC's EUA-authorized test could be used with the following extraction platforms which FDA cleared with the CDC's RNA-based influenza panel:

- **Roche MagNA Pure LC**

Kit: Roche MagNA Pure Total Nucleic Acid Kit

Protocol: Total NA External_lysis

Recommendation(s): Add 100 µL of sample to 300 µL of pre-aliquoted TNA isolation kit lysis buffer (total input sample volume is 400 µL). Elution volume is 100 µL.

- **Roche MagNA Pure Compact**

Kit: Roche MagNA Pure Nucleic Acid Isolation Kit I Protocol: Total_NA_Plasma100_400

Recommendation(s): Add 100 µL of sample to 300 µL of pre-aliquoted TNA isolation kit lysis buffer (total input sample volume is 400 µL). Elution volume is 100 µL.

- **Roche MagNA Pure 96**

Kit: Roche MagNA Pure 96 DNA and Viral NA Small Volume Kit

Protocol: Viral NA Plasma Ext Lys SV Protocol

Recommendation(s): Add 100 µL of sample to 350 µL of pre-aliquoted External Lysis Buffer (supplied separately) (total input sample volume is 450 µL). Proceed with the extraction on the MagNA Pure 96. (Note: Internal Control = None). Elution volume is 100 µL.

- **QIAGEN QIAcube with the QIAamp DSP Viral RNA Mini Kit**

Kit: QIAGEN QIAamp® DSP Viral RNA Mini Kit

Recommendations: Utilize 140 µL of sample and elute with 100 µL of buffer.

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/11/2020 6:27:29 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: (b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/9/2020 2:17:40 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Redd, Stephen C (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=bb0e6496f1af42ce9f8e0d4f92fae009-HHS-scr1-cd]
Subject: Re: Do we that testing 101

Thank you so much for your amazing work (b) (5)

What's there is fabulous. Deb

Sent from my iPhone

On Mar 9, 2020, at 12:33 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

You mean online at coronavirus.gov?
If so, the answer is yes, it is online and was by the deadline.
I have more updated information, as well.
Thanks
S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: March 9, 2020 at 10:54:31 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Do we that testing 101

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@**(b) (6)**]
Sent: 3/31/2020 9:19:18 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: Testing prioritization

(b) (5)

Sent from my iPhone

On Mar 31, 2020, at 8:18 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Debi,

(b) (5)

Steve

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/25/2020 11:22:11 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: When can you present CTAP to the TF?

I' m getting pressed to schedule it.

Sent from my iPhone

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/25/2020 2:42:04 PM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Campana, Alexandra D. EOP/WHO [(b) (6)] who.eop.gov
Subject: RE: Ban on gay men's blood donations

Awesome.

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Sent: Wednesday, March 25, 2020 2:41 PM
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Rom, Colin <Colin.Rom@fda.hhs.gov>; Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>; Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>
Subject: Re: Ban on gay men's blood donations

(b) (5)

Sent from my iPhone

On Mar 25, 2020, at 2:16 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

KEagan,
When will this new guidance be done? I think it is going through clearance.
S

From: Rom, Colin <Colin.Rom@fda.hhs.gov>
Date: March 25, 2020 at 2:10:19 PM EDT
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>, Hahn, Stephen <SH1@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Cc: Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>
Subject: RE: Ban on gay men's blood donations

+ Anand who has been running this issue

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Wednesday, March 25, 2020 2:09 PM
To: Hahn, Stephen <SH1@fda.hhs.gov>; Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>
Cc: Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>
Subject: Ban on gay men's blood donations

(b) (5)

(b) (5)

Thanks

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 3:53:57 PM
To: Caliguiri, Laura [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=aa086f2d6c0346c49e996932d86ac62e-Laura.Calig]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]
CC: Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]
Subject: chloroquine updates

Laura to the info you are sharing, can you please add a daily update (b) (5)

[REDACTED]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 3:31:30 PM
To: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]
Subject: FW: for POTUS

These are great. Since steve is at the press conference today, if these don't get inserted into potus comments, he should

From: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Sent: Monday, March 23, 2020 2:09 PM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: for POTUS

For talkers today:

(b) (5)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/20/2020 8:46:53 AM
To: Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Campana, Alexandra D. EOP/WHO [(b) (6)]@who.eop.gov]
Subject: Political all hands this afternoon

Guys I'd like to come up today and do a political all hands and get our arms around this. Colin can you help Alex set this up

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/10/2020 11:08:47 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: if you get a chance can you call me

(b) (6)

From: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Sent: 4/13/2020 4:47:20 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Can you call me

(b) (6)

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/9/2020 6:11:07 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Ford, Robert B [Robert.Ford@abbott.com]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Short, Marc T. EOP/OVP [(b) (6)]@ovp.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Alex M Azar [(b) (6)]@hhs.gov]; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]
Subject: Re: Meeting with Abbott on Monday

Looking forward to this. Deb

Sent from my iPhone

On Apr 9, 2020, at 5:14 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Robert,

Thanks for the call. We think your suggestion of an in-person meeting with your Chairman and you is a good idea. The purpose of the meeting, as I understand it, is to 1) discuss serology test development in all facets including manufacturing ramp up and 2) discuss how serology testing would be incorporated into 'back to work' plans including your own company's plan. I've copied the individuals who we've discussed would be invited. If you have any other comments/suggestions, please let me know. Once I have the go ahead form you, I'll ask Janice Sheehy to work with the White House on the meeting details.

Thanks again.

Steve

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6)]
Sent: 4/4/2020 8:16:02 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: Tammy Beckham????

No

On 4/4/20, 8:15 PM, "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov> wrote:

(b) (5)

Sent from my iPhone

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/6/2020 1:51:48 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: Journal publisher raises red flags about French malaria drug study

Of course

Sent from my iPhone

On Apr 6, 2020, at 1:35 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

FYI

From: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>
Date: April 6, 2020 at 1:33:04 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: Fw: Journal publisher raises red flags about French malaria drug study

FYI. I think that the issue of patient selection is one that is going to come up over and over again, as per our conversation this morning.

From: POLITICO Pro Health Care <politicoemail@politicopro.com>
Sent: Monday, April 6, 2020 1:31 PM
To: Abernethy, Amy <Amy.Abernethy@fda.hhs.gov>
Subject: Journal publisher raises red flags about French malaria drug study

Journal publisher raises red flags about French malaria drug study

By Sarah Oweremohle

04/06/2020 01:30 PM EDT

The society that recently published a French study that suggested malaria drug hydroxychloroquine could help coronavirus patients has raised formal concerns about the research.

In a statement, the International Society of Antimicrobial Chemotherapy says it "shares the concerns" raised by critics of the study, which was published on March 20 in a society-run journal. Such statements of concern are often the first step towards retracting a scientific paper.

The small study, led by controversial French researcher Didier Raoult, helped fuel growing interest in the drugs in the United States. President Donald Trump has cited Raoult's work while championing hydroxychloroquine as having "very, very encouraging" early results against the coronavirus.

But the society, which runs the International Journal of Antimicrobial Agents, has now said that the French study does not meet their standards — citing its "lack of better explanations" for how study participants were

chosen. Experts have pointed out that Raoult's team chose who would get the drug versus who would not, even though the gold standard for clinical trials is to assign patients to treatment groups randomly.

Raoult has not yet responded to a request for comment on the society's statement.

The results from other studies of hydroxychloroquine have been mixed, and the studies themselves have been small.

The president's focus on hydroxychloroquine has sparked divides within his administration, where several health officials feel there has been outsized attention on the drug even as other medicines are in trials.

The Food and Drug Administration last week authorized emergency use of the drug for severely ill patients but acknowledged there was still limited data about whether the treatment is effective.

To view online:

><https://subscriber.politicopro.com/health-care/whiteboard/2020/04/journal-publisher-raises-red-flags-about-french-malaria-drug-study-3978980><

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This email was sent to amy.abernethy@fda.hhs.gov by:

POLITICO, LLC
1000 Wilson Blvd.
Arlington, VA 22209
USA .

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/8/2020 8:36:02 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: RE: [EXTERNAL] ...

sheesh

From: Hahn, Stephen <SH1@fda.hhs.gov>
Sent: Wednesday, April 8, 2020 8:25 AM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Subject: Fwd: [EXTERNAL] ...

Wanted you to be aware of this. I spoke to the health officials at NY State and there is no randomized trial and there is no placebo.
Steve

From: Bauer, Zachary C. EOP/OVP <(b) (6)@ovp.eop.gov>
Date: April 7, 2020 at 5:55:17 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: [EXTERNAL] ...

Sent from my iPhone

Begin forwarded message:

From: "Michael, Molly A. EOP/WHO" <Molly.A.Michael@who.eop.gov>
Date: April 7, 2020 at 5:30:48 PM EDT
To: "Bauer, Zachary C. EOP/OVP" <(b) (6)@ovp.eop.gov>
Subject: FW: [EXTERNAL] ...

Thank you!

From: Laura Ingraham <tvingraham@gmail.com>
Sent: Tuesday, April 7, 2020 5:29 PM
To: Michael, Molly A. EOP/WHO <Molly.A.Michael@who.eop.gov>
Subject: [EXTERNAL] ...

Please tell POTUS this is worth a call from someone on his staff to New York's Health Commissioner Mr. Zucker. What is the placebo being used in the Hydroxy study? Are our trusted doctors getting the complete methodology being utilized? This is extremely important that full transparency be demanded.

BTW, Perricone is a world-famous dermatologist, best-selling author.

Begin forwarded message:

From: Nicholas Perricone <nvpmd2@icloud.com>

We need to get word out on the so-called double blind study being carried out in New York. They are using vitamin C as the placebo and of course it is an active antiviral agent.

This can't be an oversight so I have to assume they are trying to make the hydroxychloroquine look in effective when compared to a placebo. It was \supposed to be an inert agent

Laura needs to know about this so she can tell her viewers what the opposition is up to.

Nicholas Perricone M.D.

Chairman and Founder

Perricone MD

639 Research Parkway

Meriden, Ct 06450

t 2039350315

c (b) (6)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/3/2020 7:49:32 PM
To: Wainer, Andrea F [andrea.wainer@abbott.com]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Stenzel, Timothy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e181c337cf1d429bae363600706a5fc4-Timothy.Ste]
CC: Ford, Robert B [Robert.Ford@abbott.com]
Subject: Re: [EXTERNAL] FW: Today's Covid Data

Thank you so much. Of all your ID NOW equipment out there are these the only ones that requested tests? Deb

From: "Wainer, Andrea F" <andrea.wainer@abbott.com>
Date: Friday, April 3, 2020 at 7:24 PM
To: "Giroir, Brett (HHS/OASH)" <Brett.Giroir@hhs.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>, "Haddad, Carla (HHS/OASH)" <Carla.Haddad@hhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>, "Shuren, Jeff (FDA/CDRH)" <Jeff.Shuren@fda.hhs.gov>, "Stenzel, Timothy (FDA/CDRH)" <Timothy.Stenzel@fda.hhs.gov>
Cc: "Ford, Robert B" <Robert.Ford@abbott.com>
Subject: [EXTERNAL] FW: Today's Covid Data

Good evening,

In addition to our daily shipment and testing report, I am including at the request of Tim, an outlook of our shipments in the US. In the supply outlook we only show what we will be shipping in the US for the next 5 weeks. Our ID now production is dedicated to the US. But for the m2000, our actual production is more than double what we will be sending to the US. Based on the forecast throughput of our machines, this outlook is what we expect to ship to US customers.

Here's today's data. We'll be reporting Saturdays and Sundays from here on out so look for an email tomorrow afternoon. The m2000 utilization is showing a pickup.

Please find attached Abbott's data as of April 2 for (1) ID NOW; and (2) m2000.

For m2000 test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week.
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. First, we only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).

- b. Second, for those customers with the remote data link, we are providing raw data that has the number of tests run and the number of positives. Customers run their own required protocols to validate the accuracy of a test when a new test first becomes available. Those validation processes include negative and positive samples. The raw data we get from data link of the instrument cannot distinguish between validation samples and patient samples.
3. We do not have data regarding inventory at the labs.

For ID NOW test data:

1. We are reporting names, addresses, total cumulative tests shipped, and total tests shipped this week.
2. Unlike the m2000 instrument, we do not have any data on tests performed from the ID NOW instruments.



Andrea Wainer
Executive Vice President
Rapid & Molecular Diagnostics

Abbott
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Abbott Park, IL 60064

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andrea.wainer@abbott.com

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From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/2/2020 10:08:50 PM
To: Wainer, Andrea F [andrea.wainer@abbott.com]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Stenzel, Timothy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e181c337cf1d429bae363600706a5fc4-Timothy.Ste]
CC: Ford, Robert B [Robert.Ford@abbott.com]
Subject: Re: [EXTERNAL] Abbott COVID Data

Thank you so much for looking into this and working through this and understanding the issues. We stand ready to support. Deb

From: "Wainer, Andrea F" <andrea.wainer@abbott.com>
Date: Thursday, April 2, 2020 at 9:32 PM
To: "Giroir, Brett (HHS/OASH)" <Brett.Giroir@hhs.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>, "Haddad, Carla (HHS/OASH)" <Carla.Haddad@hhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>, "Shuren, Jeff (FDA/CDRH)" <Jeff.Shuren@fda.hhs.gov>, "Stenzel, Timothy (FDA/CDRH)" <Timothy.Stenzel@fda.hhs.gov>
Cc: "Ford, Robert B" <Robert.Ford@abbott.com>
Subject: [EXTERNAL] Abbott COVID Data

Good evening,

Along with our daily report, we have done some research with our customers to understand where they are at with their COVID testing. Below is a snapshot of the customers who report to be running less than 300 tests per day. I have asked for the list of customers reporting short staffing so stay tuned.

Current Abbott Link Instrument Not Running not at Full Capacity*

(b) (4)

Please find attached Abbott's data as of April 1 for (1) ID NOW tests; and (2) m2000 tests.

For m2000 test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week.
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. First, we only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).
 - b. Second, for those customers with the remote data link, we are providing raw data that has the number of tests run and the number of positives. Customers run their own required protocols to validate the accuracy of a test when a new test first becomes available. Those validation processes include negative and positive samples. The raw data we get from data link of the instrument cannot distinguish between validation samples and patient samples.
 - c. Third, as requested, the raw data for the Prior Day Tests Performed and positive numbers and rates (columns J, K and L) are for the previous day only.

3. We do not have data regarding inventory at the labs.

For ID NOW test data:

1. We are reporting names, addresses, total cumulative tests shipped, and total tests shipped this week.
2. Unlike the m2000 instrument, we do not have any data on tests performed from the ID NOW instruments.

Best regards, Andrea
224-430-0870



Andrea Wainer
Executive Vice President
Rapid & Molecular Diagnostics

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100 Abbott Park Road
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Abbott Park, IL 60064

O: +1 224-668-9155
andrea.wainer@abbott.com

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/27/2020 4:44:41 PM
To: Deere, Judd P. EOP/WHO [(b) (6) who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: [REDACTED] - comms coordination

(b) (5)

Thank you.

Sent from my iPhone

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:59:53 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]
Subject: Fwd: BUSINESS FLAG: Whole Foods workers planning strike on Tuesday

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: News Alerts <NewsAlerts@WHO.eop.gov>
Date: March 30, 2020 at 3:07:32 PM EDT
Subject: BUSINESS FLAG: Whole Foods workers planning strike on Tuesday

Whole Foods workers planning strike on Tuesday

The Hill

Chris Mills Rodrigo

March 30, 2020

<https://thehill.com/policy/technology/490196-whole-foods-workers-to-strike-tuesday>

Whole Foods workers are set to strike on Tuesday to protest what they say is a lack of employee protections amid the spread of coronavirus.

Workers at the national grocery chain will call out sick to demand guaranteed sick leave to employees who self-isolate, reinstatement of health care coverage for part-time workers, double hazard pay, a commitment to ensuring workplaces stay clean and the closure of any store where a worker tests positive.

The strike had originally been scheduled on May first.

"As this situation has progressed, our fundamental needs as workers have become more urgent," Whole Worker, a labor movement within the grocery chain, wrote in a statement.

"COVID-19 poses a very real threat to the safety of our workforce and our customers. We cannot wait for politicians, institutions, or our own management to step in to protect us."

Cases of COVID-19, the disease caused by the novel coronavirus, have been reported at Whole Foods locations in Chicago, New York City and Huntington Beach, Calif.

All of those locations have remained open.

In response to the pandemic, Whole Foods has boosted wages for U.S. and Canadian workers by \$2 per hour. It also promised workers diagnosed with COVID-19 or quarantined two weeks of paid leave.

The Hill has reached out to the chain for comment on the planned strike.

Tuesday's sickout at Whole Foods, which is owned by Amazon, would be the latest in a wave of worker activism amid the pandemic.

Amazon workers in Staten Island, N.Y. walked out Monday after their warehouse was kept open despite at least one positive case of COVID-19. The company said that the building has been cleaned.

Instacart shoppers also stopped accepting deliveries Monday in protest of the grocery delivery service's worker protections.

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/24/2020 8:17:44 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
CC: Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]
Subject: Tps on Gilead expanded access

Guys we need tps on the suspension of the EUA (b) (5)

Recognize this is wh tps and not fda tps so it needs to be in English and doesn't need to be as precise as you would require

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 3/5/2020 8:13:21 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Test

Sent from my iPhone

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/13/2020 8:23:13 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov]; D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] (b) (6) Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov]; Sugarman, AJ J. EOP/WHO [(b) (6)] who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Koroshetz, Walter J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4d97701b01894e15a53709b9df3e08e7-HHS-koroshe]; Davis, May M. EOP/WHO [(b) (6)] who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Walker, Paula J (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5230079373904be5a42bac56b97a1a3e-HHS-walkerp]; Scott, Paul A (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=30e3cd5ee9004c8cb9ab1441eb85dede-HHS-ScottP-]; Ward, Jackie M (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9195352dc4c040ca9e98a5434f9b0cca-HHS-jackie.]

Subject: ALS Phone Call

Attachments: (b) (5)

Location: (202) 395-6392,,, (b) (6)

Start: 4/17/2020 9:30:00 AM

End: 4/17/2020 10:00:00 AM

Show Time As: Busy

White House and Agency Participation

Domestic Policy Council; Office of Management and Budget; White House Counsel's Office; National Economic Council; Office of Legislative Affairs; Office of Public Liaison; Food and Drug Administration; National Institutes of Health

* Please note that Congressman Fortenberry and his staff will be the only external participants on the call.*

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

For those on the WH campus, we will meet in the Roosevelt Room to get on the call.

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 10:08:14 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@[b] (6)]; Ruggiero, Anthony J. EOP/NSC [b] (6) [b] (6) Kanapathy, Ivan J. EOP/NSC [b] (6) [b] (6) Hooker, Allison M. EOP/NSC [b] (6) [b] (6) Sinclair, Michael R. EOP/NSC [b] (6) [b] (6)

Subject: FDA/EOP Call on [b] (5)

Location: Dial-in 202-395-6392; [b] (6)

Start: 4/9/2020 2:00:00 PM

End: 4/9/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Roosevelt Room for internal participants

Participant Dial-In: (202) 395-6392

Participant Code: [b] (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/20/2020 2:16:26 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Joe/ Dr. Hahn Connect
Location: WW217
Start: 3/21/2020 8:30:00 AM
End: 3/21/2020 9:00:00 AM
Show Time As: Busy

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/3/2020 10:26:08 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Pre-Meet for Policy Time
Location: WW217
Start: 4/3/2020 12:30:00 PM
End: 4/3/2020 1:00:00 PM
Show Time As: Free
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/20/2020 2:12:30 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: DPC/FDA Connect
Location: EEOB 180A
Start: 3/21/2020 9:00:00 AM
End: 3/21/2020 10:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Attachments: Untitled Attachment; Untitled Attachment
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:51:36 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Joe/Dr. Hahn Check-in
Location: WW217
Start: 3/23/2020 3:40:00 PM
End: 3/23/2020 4:00:00 PM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 4:55:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Brookes, Brady (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=be9baf245ae491baa1c01e7e03ad9e4-HHS-Brady.B]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]
Subject: Call: (b) (5)
Start: 3/31/2020 7:30:00 AM
End: 3/31/2020 8:00:00 AM
Show Time As: Busy
Recurrence: (none)

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

Follow up from 2 pm meeting re: (b) (5)

Hahn
Birx
Fauci
Giroir
Redfield
Verma
Grogan

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/30/2020 7:59:49 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]
Subject: Operational Check-in
Attachments: Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Operational Check-in ; Untitled Attachment; Untitled Attachment; Untitled Attachment; Operational Check-in
Location: Roosevelt Room
Start: 3/31/2020 2:30:00 PM
End: 3/31/2020 3:00:00 PM
Show Time As: Busy
Recurrence: Weekly
Occurs every weekday from 2:30 PM to 3:00 PM effective 3/31/2020.

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/9/2020 9:51:54 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Bruno, Grace A. EOP/OMB
[(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]] Williams,
James H. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO
[(b) (6)] who.eop.gov]; Merkel, Theo W. EOP/WHO [(b) (6)] who.eop.gov];
DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; McMillin, Virginia D. EOP/WHO
[(b) (6)] who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Williams, Michael B.
EOP/WHO [(b) (6)] who.eop.gov]; Giuliani, Andrew H. EOP/WHO [(b) (6)] who.eop.gov];
Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sugarman, AJ J.
EOP/WHO [(b) (6)] who.eop.gov]; Planning, David M. EOP/WHO [(b) (6)] who.eop.gov]; Riley,
Sean M. EOP/WHO [(b) (6)] who.eop.gov]
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: ALS Check-In
Location: Dial-in 202-395-6392; [(b) (6)]
Start: 4/9/2020 5:45:00 PM
End: 4/9/2020 6:15:00 PM
Show Time As: Busy
Recurrence: (none)

Participant Dial-In: (202) 395-6392
Participant Code: [(b) (6)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/13/2020 4:10:53 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]
Subject: FDA Briefing
Location: Roosevelt Room
Start: 2/19/2020 11:30:00 AM
End: 2/19/2020 12:30:00 PM
Show Time As: Busy
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints into the West Wing lobby. Please provide me with a list of all attending who will require a name tent.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/18/2020 1:52:45 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: FDA/DPC Meeting
Location: EEOB 176
Start: 2/21/2020 8:30:00 AM
End: 2/21/2020 9:00:00 AM
Show Time As: Busy
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints to room 176 of the EEOB.

Please call Ian DeValliere with any questions: 202-881-8007

From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 3/3/2020 9:08:40 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Williams, James H. EOP/WHO [(b) (6)] who.eop.gov]; Baehr, James S. EOP/WHO [James.S.Baehr@who.eop.gov]; DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)] who.eop.gov]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: Treatment Candidate for Coronavirus

We're on it.
Steve

Sent from my iPad

On Mar 3, 2020, at 7:57 AM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:

Thanks. James give them whatever they need. This company comes highly recommended — i.e., they aren't kooks. (b) (6)

Sent from my iPhone

On Mar 3, 2020, at 6:50 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

James,
We will look at it.

(b) (5)

Thanks.

Steve

Sent from my iPad

On Mar 2, 2020, at 7:22 PM, Williams, James H. EOP/WHO <(b) (6)] who.eop.gov> wrote:

Good evening Commissioner,

Well done at the press conference this evening.

Please see the attached document from Beyond Air, a company that produces a portable Nitric Oxide (NO) system. The company has already demonstrated safety for high levels of NO in a number of clinical settings. Given prior safety assessments, can this product be prioritized for consideration of approved testing and an open label trial with COVID-19 infected patients? Let us know if FDA would prefer an alternative approval process for this candidate product.

Thank you,

James H. Williams
Special Assistant to the President
Domestic Policy Council
The White House
Office: (202) 395-5812

AMERICAN
OVERSIGHT

MULTI-HHS-FDA-20-0771-A-000381

Cell: (202) 881-7443

<200226 Beyond Air COV-19 Background.pdf>

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/18/2020 1:52:45 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: FDA/DPC Meeting
Location: EEOB 176
Start: 2/21/2020 8:30:00 AM
End: 2/21/2020 9:00:00 AM
Show Time As: Tentative
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov/> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints to room 176 of the EEOB.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/13/2020 4:10:53 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]
Subject: FDA Briefing
Location: Roosevelt Room
Start: 2/19/2020 11:30:00 AM
End: 2/19/2020 12:00:00 PM
Show Time As: Tentative
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints into the West Wing lobby. Please provide me with a list of all attending who will require a name tent.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:54:30 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Phone Call: Joe/ Dr. Hahn
Location: Joe will call Dr. Hahn
Start: 3/24/2020 7:45:00 AM
End: 3/24/2020 8:00:00 AM
Show Time As: Tentative

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/23/2020 8:51:36 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Joe/Dr. Hahn Check-in
Location: WW217
Start: 3/23/2020 3:40:00 PM
End: 3/23/2020 4:00:00 PM
Show Time As: Tentative
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/20/2020 2:16:26 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Joe/ Dr. Hahn Connect
Location: WW217
Start: 3/21/2020 8:30:00 AM
End: 3/21/2020 9:00:00 AM
Show Time As: Tentative

Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 3/20/2020 2:12:30 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: DPC/FDA Connect
Location: EEOB 180A
Start: 3/21/2020 9:00:00 AM
End: 3/21/2020 10:00:00 AM
Show Time As: Tentative
Recurrence: (none)

From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 3/12/2020 6:28:56 AM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; McGowan, Robert K (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e6175b088b1d49a4bfa2de3862800d4a-HHS-omc2-cd]; Shah, Anand [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e2172ebbd96946c08e189fd612855f51-Anand.Shah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: The Reagents come from Germany

We are in constant contact in the manufacturers of reagents and while we have not had anyone reach out to us about this issue, we are looking into it. I've spoken to Jeff Shuren's team and they will specifically reach out about this.
Steve

Sent from my iPad

> On Mar 11, 2020, at 9:10 PM, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov> wrote:
>
> Guys, I'm being told that the reagents for the tests come from Germany and they have put export controls on everything covid-19. (b) (5)
>
> Sent from my iPhone

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/18/2020 1:52:45 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: FDA/DPC Meeting
Location: EEOB 176
Start: 2/21/2020 8:30:00 AM
End: 2/21/2020 9:00:00 AM
Show Time As: Busy
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints to room 176 of the EEOB.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/13/2020 4:10:53 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]
Subject: FDA Briefing
Location: Roosevelt Room
Start: 2/19/2020 11:30:00 AM
End: 2/19/2020 12:00:00 PM
Show Time As: Busy
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov/> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints into the West Wing lobby. Please provide me with a list of all attending who will require a name tent.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 2/13/2020 4:10:53 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Amin, Stacy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cb3764b7438648838c22881a06fc6afb-Stacy.Amin]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; DeValliere, Ian C. EOP/WHO [(b) (6)@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)@who.eop.gov]
Subject: FDA Briefing
Location: Roosevelt Room
Start: 2/19/2020 11:30:00 AM
End: 2/19/2020 12:30:00 PM
Show Time As: Busy
Recurrence: (none)

FDA WAVES link: <https://events.whitehouse.gov> (b) (6)

You will enter the complex at 17th and State Place NW- you will make your way through two security checkpoints into the West Wing lobby. Please provide me with a list of all attending who will require a name tent.

Please call Ian DeValliere with any questions: 202-881-8007

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 5/1/2020 5:31:38 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Williams, Michael B. EOP/WHO (b) (6) who.eop.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; Tignor, Beth (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44f3651e3b164ef786d33dc18b5112a4-HHS-Beth.Ti]; Liddell, Christopher P. EOP/WHO (b) (6) who.eop.gov; Riggs, Charlotte R. EOP/WHO (b) (6) who.eop.gov; Butterfield, Nicholas W. EOP/WHO (b) (6) who.eop.gov; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO (b) (6) who.eop.gov; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@ (b) (6)

Subject: (b) (5) Meeting
Location: WHSR Exec

Start: 5/4/2020 1:15:00 PM
End: 5/4/2020 2:15:00 PM
Show Time As: Busy

Recurrence: (none)

****There will be no dial-in option****

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/14/2020 9:16:43 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]

Subject: Confirmed: Follow up discussion
Location: 1-877-465-7975, (b) (6) // Dr. Birx office

Start: 5/14/2020 3:00:00 PM
End: 5/14/2020 4:00:00 PM
Show Time As: Tentative

Recurrence: (none)

Quick Dial: 1-877-465-7975, (b) (6) #

Agenda items for 5/14

(b) (5)

Attendees

Dr. Birx [in person]
Dr. Hahn
Dr. Fauci [in person]
Dr. Redfield [by phone]

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/14/2020 9:16:43 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)@ovp.eop.gov]
Subject: Follow up discussion
Location: [Dial in forthcoming]
Start: 5/14/2020 3:00:00 PM
End: 5/14/2020 4:00:00 PM
Show Time As: Tentative
Recurrence: (none)

Agenda items for 5/14

(b) (5)

Attendees

Dr. Birx [in person]
Dr. Hahn
Dr. Fauci
Dr. Redfield [by phone]

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 9:32:13 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)@ovp.eop.gov]
Subject: Confirmed - Follow up discussion
Location: 1-877-465-7975,, (b) (6) #
Start: 5/13/2020 1:30:00 PM
End: 5/13/2020 2:15:00 PM
Show Time As: Busy
Recurrence: (none)

Dial In: 1-877-465-7975,, (b) (6) #

Dr. Birx will convene a follow up discussion today with the doctors at 1:30pm.

Attendees:

Dr. Birx [in-person]
Dr. Hahn [in-person]
Dr. Fauci
Dr. Redfield [by phone]

Agenda:

TBD

From: (b) (6) ovp.eop.gov (b) (6) ovp.eop.gov]
Sent: 5/10/2020 7:35:59 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6) McGuffee, Tyler Ann A. EOP/OVP
[(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: HOLD - Follow up discussion with Dr. Birx

Attachments: FW: (b) (5)

Location: Dial-in forthcoming

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/8/2020 9:52:39 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Adams, Jerome (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; (b) (6) cms.hhs.gov'
[(b) (6)] cms.hhs.gov]
Subject: Follow up Discussion
Location: Ward Room
Start: 5/8/2020 3:00:00 PM
End: 5/8/2020 4:00:00 PM
Show Time As: Busy
Importance: High
Recurrence: (none)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma (by phone)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/10/2020 7:24:55 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]@ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: HOLD - Follow up discussion with Dr. Birx

Attachments: FW: (b) (5)

Location: Dial-in forthcoming

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Tentative

Recurrence: (none)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)



From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/10/2020 7:24:55 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: HOLD - Follow up discussion with Dr. Birx
Start: 5/11/2020 2:00:00 PM
End: 5/11/2020 2:30:00 PM
Show Time As: Tentative
Recurrence: (none)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/8/2020 9:52:39 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; (b) (6) cms.hhs.gov' [(b) (6) cms.hhs.gov]
CC: Anderson-Villaluz, Dennis (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fba1863bf2d44fada3b3c8ee83cc63dc-HHS-Dennis.]
Subject: Follow up Discussion
Location: Dial In Only: (b) (6)
Start: 5/8/2020 3:00:00 PM
End: 5/8/2020 4:00:00 PM
Show Time As: Busy
Importance: High
Recurrence: (none)

Attendees:
Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma (by phone)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/8/2020 9:52:39 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; (b) (6) cms.hhs.gov' [(b) (6) cms.hhs.gov]
Subject: Follow up Discussion
Location: Ward Room
Start: 5/8/2020 3:00:00 PM
End: 5/8/2020 4:00:00 PM
Show Time As: Busy
Importance: High
Recurrence: (none)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/8/2020 9:52:39 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Adams, Jerome (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; (b) (6) cms.hhs.gov'
(b) (6) cms.hhs.gov]
CC: Anderson-Villaluz, Dennis (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=fba1863bf2d44fada3b3c8ee83cc63dc-HHS-Dennis.]
Subject: Follow up Discussion
Location: Ward Room; 1-877-465-7975,, (b) (6) #
Start: 5/8/2020 3:00:00 PM
End: 5/8/2020 4:00:00 PM
Show Time As: Busy
Importance: High
Recurrence: (none)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma (by phone)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 9:32:13 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: HOLD - Follow up discussion
Location: Dr. Birx office or Dial In: (forthcoming)
Start: 5/13/2020 1:30:00 PM
End: 5/13/2020 2:15:00 PM
Show Time As: Busy
Recurrence: (none)

Dr. Birx will convene a follow up discussion today with the doctors at 1:30pm.

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield

Agenda:

TBD

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 9:32:13 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: TIME CHANGE 2PM - Follow up discussion
Location: 1-877-465-7975,,, (b) (6) #
Start: 5/13/2020 2:00:00 PM
End: 5/13/2020 2:20:00 PM
Show Time As: Tentative

Recurrence: (none)

FLAGGING -- Dr. Birx is with the VP until 2pm

Dial In: 1-877-465-7975,,, (b) (6) #

Dr. Birx will convene a follow up discussion today with the doctors at ~~2:00pm~~1:30pm.

Attendees:

Dr. Birx [in-person]
Dr. Hahn [in-person]
Dr. Fauci
Dr. Redfield [by phone]

Agenda:

TBD

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 9:32:13 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: Confirmed - Follow up discussion
Location: 1-877-465-7975,,, (b) (6)
Start: 5/13/2020 1:45:00 PM
End: 5/13/2020 2:20:00 PM
Show Time As: Busy
Recurrence: (none)

Dial In: 1-877-465-7975,,, (b) (6)
Dr. Birx will convene a follow up discussion today with the doctors at 1:30pm.

Attendees:

Dr. Birx [in-person]
Dr. Hahn [in-person]
Dr. Fauci
Dr. Redfield [by phone]

Agenda:

TBD

From: (b) (6) ovp.eop.gov (b) (6) ovp.eop.gov]
Sent: 5/10/2020 7:35:59 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6) McGuffee, Tyler Ann A. EOP/OVP
[(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: Confirmed - Follow up discussion with Dr. Birx

Attachments: FW (b) (5)

Location: 202-395-6392;; (b) (6)

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/6/2020 6:05:11 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov'
(b) (6) cms.hhs.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Confirmed - Discussion: (b) (5)
Location: Ward Room
Start: 5/7/2020 4:00:00 PM
End: 5/7/2020 5:00:00 PM
Show Time As: Busy
Recurrence: (none)

5/7 Agenda

(b) (5)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Redfield
Dr. Fauci
Administrator Verma

From: (b) (6) ovp.eop.gov (b) (6) ovp.eop.gov]
Sent: 5/10/2020 7:35:59 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6) McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: UPDATED DIAL IN Confirmed - Follow up discussion with Dr. Birx

Attachments: FW: (b) (5)

Location: 1-866-617-3597;; Participant Passcode: (b) (6)

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Dial-In Information
Toll-Free #1-866-617-3597
Participant Passcode: (b) (6)
Leader Passcode: (b) (6)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)

From: (b) (6) ovp.eop.gov (b) (6) ovp.eop.gov]
Sent: 5/10/2020 7:35:59 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) McGuffee, Tyler Ann A. EOP/OVP (b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: Confirmed - Follow up discussion with Dr. Birx

Attachments: FW: (b) (5)

Location: 202-395-6392;; (b) (6)

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Participant Dial-In: (202) 395-6392

Participant Code: (b) (6)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/19/2020 4:31:22 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]@ovp.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Olivarria, Frank [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c180721db774423f99990dd86e67057c-Frank.Oliva]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]
Subject: Confirmed -- Dr. Birx follow up discussion
Location: Dr. Birx office // Dial In: 1-877-465-7975,,, (b) (6)
Start: 5/20/2020 10:15:00 AM
End: 5/20/2020 11:00:00 AM
Show Time As: Tentative
Recurrence: (none)

Quick dial: 1-877-465-7975,,, (b) (6)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/19/2020 4:29:15 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Emilio Emini [Emilio.Emini@gatesfoundation.org]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Olivarria, Frank [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c180721db774423f99990dd86e67057c-Frank.Oliva]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: Confirmed - Video Conference Call w/ Emilio Emini
Location: EEOB 176 / Video Meeting link: <https://fda1.webex.com/fda1/j.php?MTID=m2037415d800f23d93894e9ea3268001a>
Start: 5/20/2020 11:00:00 AM
End: 5/20/2020 11:45:00 AM
Show Time As: Tentative
Recurrence: (none)

Attendees:

- Dr. Deborah Birx [White House]
- Dr. Stephen Hahn [FDA]
- Dr. Peter Marks [FDA]
- Dr. Emilio Emini [Director, TB and HIV Program, Bill & Melinda Gates Foundation]

Video Meeting link: <https://fda1.webex.com/fda1/j.php?MTID=m2037415d800f23d93894e9ea3268001a>

Video Conference with Drs. Birx & Hahn

Wednesday, May 20, 2020 | 11:00 am Eastern Daylight Time (GMT-04:00) | 1 hour 0 minutes | Not started

Meeting link: [\(b\) \(6\)](https://fda1.webex.com/ (b) (6))

Meeting number:

(b) (6)

Meeting password:

(b) (6)

Audio connection:

+1-877-465-7975 US Toll Free

Global call-in numbers

Show toll-free dialing restrictions

Access code: (b) (6)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 10:52:54 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; [(b) (6)] cms.hhs.gov [(b) (6)] cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: Confirmed - Dr. Birx call w/ ACOG/AAP Leadership
Location: Dr. Birx office; 877-628-4681; (b) (6)

Start: 4/30/2020 2:15:00 PM
End: 4/30/2020 2:30:00 PM
Show Time As: Tentative

Recurrence: (none)

Dial In: 877-628-4681

Participant: (b) (6)

ACOG participants:

Maureen Phipps, MD, MPH, FACOG – CEO
Skye Perryman, JD – Chief Legal Officer and General Counsel
Rachel Tetlow, Federal Affairs Director

AAP participants:

Mark DelMonte, CEO
Tamar Haro, Senior Director, Federal and State Advocacy

ACOG/AAP Agenda:

- Opening and thanks (*Mark and Maureen*)
- HHS funding for physicians and hospitals – concerns with distribution (*Mark and Maureen*)
- Immunization rates (*Mark*)
- Continued concerns regarding home birth/birth settings (*Maureen and Mark*)
- Opportunity to partner in the lead up to Mother's Day (*Maureen*)
- PPE & Testing shortages (*Maureen and Mark*)
- Prioritization of L&D for rapid response testing
-

From: (b) (6) ovp.eop.gov (b) (6) ovp.eop.gov]
Sent: 5/10/2020 7:35:59 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6) McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: HOLD - Follow up discussion with Dr. Birx

Attachments: FW: (b) (5)

Location: Dial-in forthcoming

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Tentative

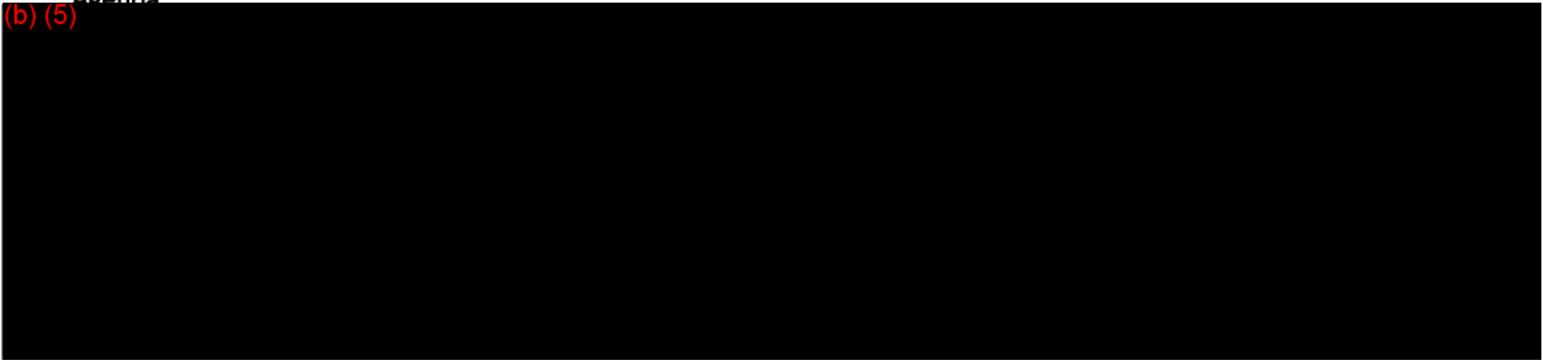
Recurrence: (none)

Attendees:

Dr. Birx
Dr. Fauci
Dr. Hahn
Dr. Redfield

Agenda:

(b) (5)



From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 9:32:13 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: HOLD - Follow up discussion
Location: Dr. Birx office or Dial In: (forthcoming)
Start: 5/13/2020 1:30:00 PM
End: 5/13/2020 2:15:00 PM
Show Time As: Tentative

Recurrence: (none)

Dr. Birx will convene a follow up discussion today with the doctors at 1:30pm.

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield

Agenda:

TBD

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/8/2020 9:52:39 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Adams, Jerome (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=302991451fc341bf9a7ffa53eba3f81c-HHS-Jerome.]; (b) (6) cms.hhs.gov' [(b) (6) cms.hhs.gov]
Subject: Follow up Discussion
Location: Ward Room
Start: 5/8/2020 3:00:00 PM
End: 5/8/2020 4:00:00 PM
Show Time As: Tentative
Importance: High
Recurrence: (none)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/6/2020 6:05:11 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov'
(b) (6) cms.hhs.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: TIME CHANGE: - Discussion: (b) (5)
Location: Ward Room
Start: 5/7/2020 3:30:00 PM
End: 5/7/2020 4:30:00 PM
Show Time As: Tentative
Recurrence: (none)

5/7 Agenda

(b) (5)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Redfield
Dr. Fauci
Administrator Verma

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/6/2020 6:05:11 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: HOLD - Discussion: (b) (5)
Location: Ward Room
Start: 5/7/2020 4:00:00 PM
End: 5/7/2020 5:00:00 PM
Show Time As: Tentative
Recurrence: (none)

5/7 Agenda

TBD

Attendees:

Dr. Birx
Dr. Hahn
Dr. Redfield
Dr. Fauci
Administrator Verma

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [(b) (6)] [(b) (6)] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]
CC: Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]
Subject: Canceled: HOLD [(b) (5)]
Location: WHSR
Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Free
Importance: High

Will be combined with the Wednesday Briefing

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/26/2020 4:54:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] [ovp.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]
Subject: Confirmed - Follow up discussion
Location: Dr. Birx office
Start: 5/27/2020 3:30:00 PM
End: 5/27/2020 5:00:00 PM
Show Time As: Tentative

Recurrence: (none)

Attendees:

Dr. Birx [confirmed in-person]
Dr. Redfield [confirmed in-person]
Dr. Hahn [confirmed in-person]
Dr. Fauci [confirmed in-person]

From: SH1@fda.hhs.gov [SH1@fda.hhs.gov]
Sent: 5/16/2020 10:28:23 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: PPV

Absolutely correct

Sent from my iPhone

On May 16, 2020, at 6:48 AM, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> wrote:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/19/2020 4:29:15 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Emilio Emini [Emilio.Emini@gatesfoundation.org]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Olivarria, Frank [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c180721db774423f99990dd86e67057c-Frank.Oliva]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: Confirmed - Video Conference Call w/ Emilio Emini
Location: EEOB 176 / Video Meeting link: <https://fda1.webex.com/fda1/j.php?MTID=m2037415d800f23d93894e9ea3268001a>
Start: 5/20/2020 11:00:00 AM
End: 5/20/2020 11:45:00 AM
Show Time As: Busy
Recurrence: (none)

Attendees:

- Dr. Deborah Birx [White House]
- Dr. Stephen Hahn [FDA]
- Dr. Peter Marks [FDA]
- Dr. Emilio Emini [Director, TB and HIV Program, Bill & Melinda Gates Foundation]

Video Meeting link: <https://fda1.webex.com/fda1/j.php?MTID=m2037415d800f23d93894e9ea3268001a>

Video Conference with Drs. Birx & Hahn

Wednesday, May 20, 2020 | 11:00 am Eastern Daylight Time (GMT-04:00) | 1 hour 0 minutes | Not started

Meeting link: [\(b\) \(6\)](https://fda1.webex.com/fda1 (b) (6))

Meeting number:

(b) (6)

Meeting password:

(b) (6)

Audio connection:

+1-877-465-7975 US Toll Free

Global call-in numbers

Show toll-free dialing restrictions

Access (b) (6)

From: (b) (6) ovp.eop.gov [(b) (6)] ovp.eop.gov]
Sent: 5/11/2020 2:07:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP; Hahn, Stephen; Redfield, Robert R (CDC); Fauci, Anthony S (NIH); Rom, Colin

Subject: UPDATED DIAL IN Confirmed - Follow up discussion with Dr. Birx

Attachments: FW: testing, testing, testing

Location: 1-866-617-3597;; Participant Passcode: (b) (6)

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Dial-In Information

Toll-Free #1-866-617-3597

Participant Passcode: (b) (6)

Leader Passcode: (b) (6)

Attendees:

Dr. Birx

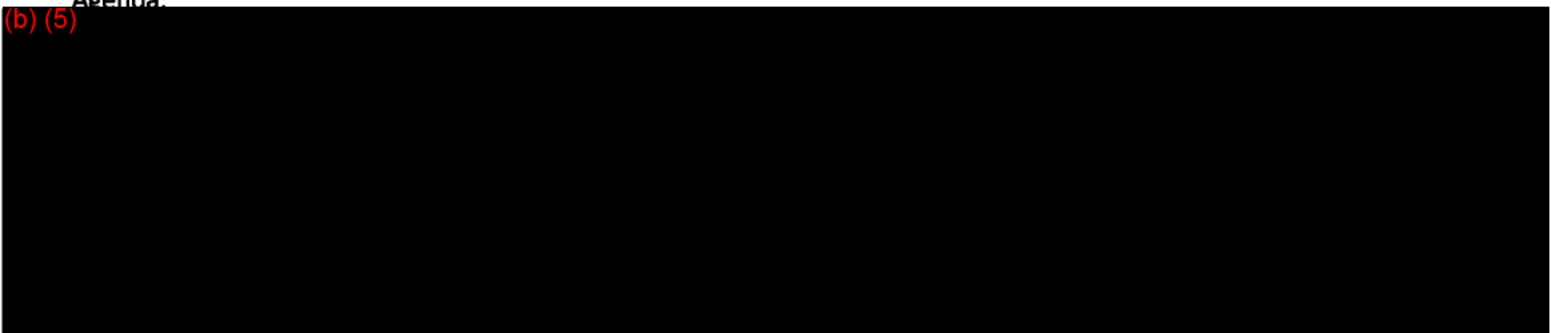
Dr. Fauci

Dr. Hahn

Dr. Redfield

Agenda:

(b) (5)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/27/2020 11:32:32 AM
To: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Subject: Re: Testing Strategy

Thanks

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 27, 2020 at 10:39:39 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Testing Strategy

CDC ayes.

Sent from my iPhone

On Apr 27, 2020, at 10:22 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Hi Katie,

Our logo can be used. (b) (5)

Steve

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 27, 2020 at 8:25:21 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: Testing Strategy

(b) (5)

Thanks!

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/5/2020 3:12:12 PM
To: McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@[(b) (6)]]
Subject: Re: Operational Check-in

Absolutely
Deb, let me know how you want to proceed

From: McGuffee, Tyler Ann A. EOP/OVP <[(b) (6)] ovp.eop.gov>
Date: May 5, 2020 at 3:11:27 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@[(b) (6)]> Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FW: Operational Check-in

Do you both want to take over hosting this daily operations meeting? See below.

From: Campana, Alexandra D. EOP/WHO <[(b) (6)] who.eop.gov>
Sent: Tuesday, May 5, 2020 3:03 PM
To: McGuffee, Tyler Ann A. EOP/OVP <[(b) (6)] ovp.eop.gov>; Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Cc: DeValliere, Ian C. EOP/WHO <[(b) (6)] who.eop.gov>
Subject: RE: Operational Check-in

Would you guys mind hosting the meeting? We will largely defer to you moving forward

From: McGuffee, Tyler Ann A. EOP/OVP <[(b) (6)] ovp.eop.gov>
Sent: Tuesday, May 5, 2020 3:01 PM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Cc: Campana, Alexandra D. EOP/WHO <[(b) (6)] who.eop.gov>; DeValliere, Ian C. EOP/WHO <[(b) (6)] who.eop.gov>
Subject: RE: Operational Check-in

Any chance to reschedule? I know Dr. Birx and Dr. Hahn want to have the check in tomorrow

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: [(b) (6)] [no text]
Email: [(b) (6)] ovp.eop.gov

From: McGuffee, Tyler Ann A. EOP/OVP <[(b) (6)] ovp.eop.gov>
Sent: Tuesday, May 5, 2020 2:57 PM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>

Cc: Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>; DeValiere, Ian C. EOP/WHO <(b) (6) who.eop.gov>
Subject: RE: Operational Check-in

Joe – quickly flagging that Dr. Birx is with POTUS tomorrow from 2-3pm.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: (b) (6) [no text]
Email: Tyler.A.McGuffee2@ovp.eop.gov

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Sunday, March 29, 2020 3:10 PM
To: Grogan, Joseph J. EOP/WHO; Giroir, Brett (HHS/OASH); Birx, Deborah L. EOP/NSC; Redfield, Robert R. (CDC/OD); (b) (6) cms.hhs.gov; Fauci, Anthony (NIH/NIAID) [E]; SH1@fda.hhs.gov; Good-Cohn, Meredith (CMS/OA)
Subject: Operational Check-in
When: Wednesday, May 6, 2020 2:30 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).
Where: Roosevelt Room

If you are unable to join in the Roosevelt room, please use the below dial-in:

Participant Dial-In: (202) 395-6392
Participant Code: (b) (6)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/1/2020 6:48:53 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
CC: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6)] who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: two meetings monday

Joe
That's a good plan. Will your office coordinate?
Steve

(b) (5)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/29/2020 8:50:22 PM
To: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Subject: Re: Question

(b) (5)

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 29, 2020 at 5:57:30 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Question

(b) (5)

Sent from my iPhone

On Apr 29, 2020, at 5:27 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Legit. This could work. It'll be interesting to see the results of their study

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 29, 2020 at 5:11:54 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Question

Is this legit?

><https://nationalpost.com/news/world/canine-surveillance-how-labrador-retrievers-are-being-trained-to-sniff-out-coronavirus-cases><

Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/4/2020 4:05:31 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Campana, Alexandra D. EOP/WHO [(b) (6) who.eop.gov]; Williams, Michael B. EOP/WHO [(b) (6) who.eop.gov]
CC: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) ovp.eop.gov] McGuffee, Tyler Ann A. EOP/OVP
Subject: Re: Have to cancel fda briefings today. My apologies

No worries, Joe.

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Date: May 4, 2020 at 2:07:33 PM EDT
To: Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>, Williams, Michael B. EOP/WHO <(b) (6) who.eop.gov>, Hahn, Stephen (b) (6) @fda.hhs.gov>
Cc: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6) ovp.eop.gov> McGuffee, Tyler Ann A. EOP/OVP
Subject: Have to cancel fda briefings today. My apologies

Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/6/2020 7:16:42 PM
To: McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] <ovp.eop.gov>; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: Task Force mtg is now at 5pm tomorrow

4pm is best and more convenient for everyone, I think.
Steve

From: McGuffee, Tyler Ann A. EOP/OVP <Tyler.A.McGuffee2@ovp.eop.gov>
Date: May 6, 2020 at 5:59:40 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Subject: FW: Task Force mtg is now at 5pm tomorrow
Importance: High

FYSA – Task Force mtg is now at 5pm tomorrow
do you want to move operations to 4pm?
Or leave at 12pm?

Also, who are the attendees for tomorrows operations meeting?

From: Troye, Olivia EOP/NSC <Olivia.Troye@ (b) (6)>
Sent: Wednesday, May 6, 2020 5:58 PM
To: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)] <ovp.eop.gov>
Subject: Task Force mtg is now at 5pm tomorrow
Importance: High

FYI- Just moved from 1pm.

Olivia Troye
Special Advisor to the Vice President for
Homeland Security, Counterterrorism, and North America
Office of the Vice President, National Security Affairs
White House Coronavirus Task Force
O: (202) 456-2641 | M: (b) (6) (Does not receive texts)
(b) (6) (b) (6)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/6/2020 7:59:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; CMS (b) (6) (b) (6) cms.hhs.gov]
CC: Campana, Alexandra D. EOP/WHO (b) (6) who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP (b) (6) ovp.eop.gov]
Subject: Re: Operational Check-In

Thanks, Deb. We will appropriately rename the meeting.
Steve

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: May 6, 2020 at 7:58:49 PM EDT
To: Rom, Colin <Colin.Rom@fda.hhs.gov>, Fauci, Anthony S (NIH) <(b) (6) niaid.nih.gov>, Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>, CMS SV1 <sv1@cms.hhs.gov>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Campana, Alexandra D. EOP/WHO <(b) (6) who.eop.gov>, McGuffee, Tyler Ann A. EOP/OVP <(b) (6) ovp.eop.gov>
Subject: Re: Operational Check-In

This is not a reoccurrence of the operational meeting but (b) (5) Deb

From: "Rom, Colin" <Colin.Rom@fda.hhs.gov>
Date: Wednesday, May 6, 2020 at 7:31 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Fauci, Anthony S (NIH)" <(b) (6) niaid.nih.gov>, "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>, "Redfield, Robert R (CDC)" <(b) (6) cdc.gov>, CMS (b) (6) (b) (6) cms.hhs.gov
Cc: "Hahn, Stephen" <SH1@fda.hhs.gov>, "Campana, Alexandra D. EOP/WHO" <(b) (6) who.eop.gov>, "McGuffee, Tyler Ann A. EOP/OVP" <(b) (6) ovp.eop.gov>
Subject: Operational Check-In

All—

The Operational Check-In meeting will start back up tomorrow, one hour before the task force meeting. Tyler Ann will be sending out the invite shortly. Please send agenda items for the next three days so we can prioritize. For tomorrow, the following items will be discussed:

(b) (5)

Thank you!

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/30/2020 7:44:50 PM
To: O'Brien, Robert C. EOP/WHO [rco84@who.eop.gov]
Subject: Re: Vaccines

Hi Ambassador,
I had a call today with the Ambassador today. Could we touch base tomorrow?
Thanks
Steve

From: O'Brien, Robert C. EOP/WHO <rco84@who.eop.gov>
Date: April 29, 2020 at 2:32:35 PM EDT
To: BONNE Emmanuel <emmanuel.bonne@elysee.fr>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Vaccines

Emmanuel,

Per our conversation on vaccines, please have your team reach out to Dr. Stephen M. Hahn, Commissioner of the Food and Drug Administration. Stephen is standing by to hear from your colleagues and is copied on this Email. Stephen's personal Email is (b) (6)

Stephen,

Ambassador Bonne is the French National Security Advisor.

Best,
RCO

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/21/2020 2:29:26 PM
To: Joe Grogan [Joseph.J.Grogan@who.eop.gov]
Subject: Fwd: POTUS comment for today

From: Hahn, Stephen <SH1@fda.hhs.gov>
Date: April 21, 2020 at 2:29:14 PM EDT
To: Rom, Colin <Colin.Rom@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>, Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: POTUS comment for today

Some edits. Will forward to Joe.
S

From: Rom, Colin <Colin.Rom@fda.hhs.gov>
Date: April 21, 2020 at 2:25:33 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: FW: POTUS comment for today
Importance: High

Suggested edits

(b) (5)

(b) (5)

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>

Sent: Tuesday, April 21, 2020 1:32 PM

To: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>; Rom, Colin <Colin.Rom@fda.hhs.gov>; Hahn, Stephen <SH1@fda.hhs.gov>

Subject: POTUS comment for today

Importance: High

Guy, in the next 45 minutes, can you get me more than what I have below? For POTUS to say.

(b) (5)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/21/2020 1:51:34 PM
To: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: Follow Up - White House Correspondence

Katie,

(b) (4)

On the FDA website they can go to our CTAP inbox and send us a message. We'll follow up when they do.
Steve

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 21, 2020 at 11:50:54 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: Follow Up - White House Correspondence

Can you please check into the below

Sent from my iPhone

Begin forwarded message:

From: "Hicks, Hope C. EOP/WHO" <Hope@who.eop.gov>
Date: April 21, 2020 at 11:19:55 AM EDT
To: "Miller, Katie R. EOP/OVP" <Katie.R.Miller@ovp.eop.gov>
Subject: FW: Follow Up - White House Correspondence

See attached from a doctor I know in California. Should I forward directly to Hahn or someone else?

From: David C. Socol MD <David@SocolMD.com>
Sent: Tuesday, April 21, 2020 3:17 AM
To: Hicks, Hope C. EOP/WHO <Hope@who.eop.gov>
Cc: Chanda Zaveri <zaveri.chanda@yahoo.com>; dfinklestein@gmail.com
Subject: [EXTERNAL] Follow Up - White House Correspondence

To Whom It May Concern,

Our group forwarded correspondence to White House Physician Dr. Sean Conley on March 30, 2020 through the offices of Dr. Sharon Hausman-Cohen regarding Cell Armour, a product which is demonstrating notable efficacy against SARS-CoV-2. Cell Armour prevents people from getting sick, makes sick people better faster, confers immunity, and achieves all of the above without the risk of cardiac toxicity.

We received a notice of receipt from the White House Coronavirus Response Team on April 8, 2020 regarding our initial forward, stating a member of that team would reach out to our group within 48 hours. To our knowledge, that outreach did not occur.

On April 15, 2020, we forwarded the attached high-level correspondence to the Coronavirus Response Team to alert the team to additional findings and applications, absent any acknowledgement to date.

While we appreciate the tremendous burden that the White House team is under, Cell Armour is currently being evaluated by the Republic of India as a prophylactic and treatment alternative to COVID-19 given information that has been provided to date. Local clinicians are also scheduled to run a clinical trial to validate our real-world findings in Hong Kong, China, South Korea and Singapore, among others. We are also preparing to start additional trials with emergency department physicians in the United States momentarily.

Given these rapidly advancing discussions in India, our offices are of the mindset that we would be remiss not to alert your offices of our progress to date and Cell Armour's strong potential to change the trajectory of the COVID-19 pandemic given our current fund of knowledge. We also believe that the White House should be appraised of our progress, learn about the science of Cell Armour, and what it can accomplish in order to explore an expedited path to widespread provision of Cell Armour to the American people.

Wishing you all the best at this challenging time.

Respectfully,
David

David C. Socol | **Physician**
8383 Wilshire Boulevard, Suite 610
Beverly Hills, CA 90211
Direct **310-561-4021**
Office 323-951-0200
Facsimile 310-388-0782

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/20/2020 1:54:44 PM
To: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Subject: Re: clinical trials

Let's talk

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 20, 2020 at 1:16:54 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: clinical trials

(b) (5)

Sent from my iPhone

Begin forwarded message:

From: "Hicks, Hope C. EOP/WHO" <Hope@who.eop.gov>
Date: April 20, 2020 at 1:15:53 PM EDT
To: "Farah, Alyssa A. EOP/WHO" <Alyssa.A.Farah@who.eop.gov>, "Gilmartin, Kayleigh M. EOP/WHO" <Kayleigh.McEnany@who.eop.gov>, "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>, "Miller, Katie R. EOP/OVP" <Katie.R.Miller@ovp.eop.gov>
Subject: clinical trials

(b) (5)

Cuomo said today, over 20 hospitals conducted hydroxychloroquine trials, report of results will go to the FDA and CDC today.

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/21/2020 9:13:20 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@(b) (6)]
Subject: Re: Follow up from yesterday's therapeutics discussion

Thanks

(b) (5)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/23/2020 9:56:36 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Call with Dr. Hahn tomorrow

Ok thanks

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: April 23, 2020 at 9:53:58 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Call with Dr. Hahn tomorrow

Some of this is in the plan.

Sent from my iPhone

On Apr 23, 2020, at 7:22 AM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Thoughts?

From: Gross, Karas <Karas.Gross@fda.hhs.gov>
Date: April 22, 2020 at 8:59:07 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FW: Call with Dr. Hahn tomorrow

Hi Dr. Hahn-

Sharing the attached from Alexander's staff in lead up to the call tomorrow. We've asked CDRH for any info, but haven't head back yet.

Have a good night!
Karas

From: Coulter, Margaret (HELP Committee) <Margaret_Coulter@help.senate.gov>
Sent: Wednesday, April 22, 2020 5:38 PM
To: Gross, Karas <Karas.Gross@fda.hhs.gov>
Cc: Tantillo, Andrew <Andrew.Tantillo@fda.hhs.gov>
Subject: Call with Dr. Hahn tomorrow

Hi Karas and Andy,

I wanted to share the attached memo with you that Sen. Alexander received from Andy Slavitt so that you have this information if helpful. Senator Alexander may ask Dr. Hahn tomorrow morning about screening tests.

We are not certain exactly what is meant by a "screening test" so any thoughts from Dr. Hahn would be most welcome.

Happy to chat if I can be helpful in advance of tomorrow's call. Hope you're both doing well and staying healthy!

Best,
Margaret

<Testing for America - Scaling screening tests to re-open America.docx>

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 4/20/2020 12:50:00 PM
To: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
CC: O'Malley, Devin M. EOP/OVP [Devin.M.O'Malley@ovp.eop.gov]
Subject: Re: Presse today

Yes, for sure. Expected timing?

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 20, 2020 at 12:36:37 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: O'Malley, Devin M. EOP/OVP <Devin.M.O'Malley@ovp.eop.gov>
Subject: Presse today

Can you join to go over antibody testing please

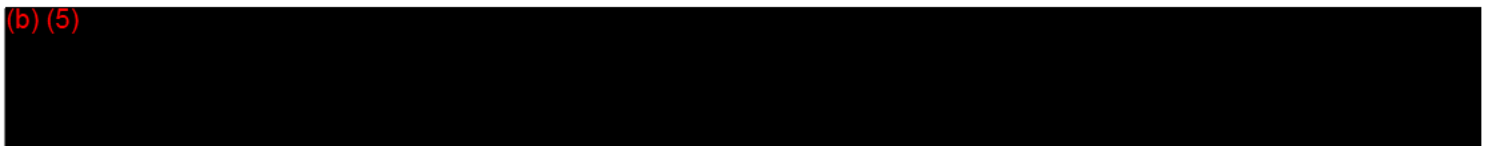
Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/12/2020 8:22:14 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=Of1ab650905f424381ffbdd983419fcd-HHS-olx1-cd];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]
Subject: Re: CDC Guidelines

I agree with Bob. I'll be following the critical infrastructure guidance.
S

From: Debi Birx <Deborah.L.Birx@ (b) (6)>
Date: Tuesday, May 12, 2020 at 8:21 AM
To: Stephen Hahn <SH1@fda.hhs.gov>, Robert Redfield <(b) (6)@cdc.gov>, Tony Fauci <(b) (6)@niaid.nih.gov>
Subject: Re: CDC Guidelines

(b) (5)



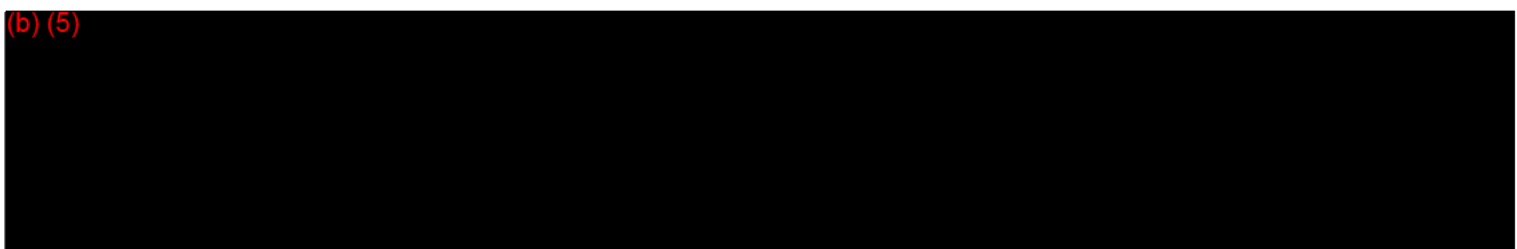
From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Tuesday, May 12, 2020 at 8:14 AM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Redfield, Robert R (CDC)" <(b) (6)@cdc.gov>, "Fauci, Anthony S (NIH)" <(b) (6)@niaid.nih.gov>
Subject: Re: CDC Guidelines

Thanks, Deb. These are guidelines for docs and nurses who are involved in patient care, right? I think we have reasonable wording for our response which is shown below.



From: Debi Birx <Deborah.L.Birx@ (b) (6)>
Date: Tuesday, May 12, 2020 at 8:09 AM
To: Stephen Hahn <SH1@fda.hhs.gov>, Robert Redfield <(b) (6)@cdc.gov>, Tony Fauci <(b) (6)@niaid.nih.gov>
Subject: CDC Guidelines

(b) (5)



From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/9/2020 10:03:27 AM
To: McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]<ovp.eop.gov>; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@[(b) (6)]]
CC: Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: Re: Agenda items for Monday's doctors meeting

I spoke to Bob this morning and I believe that he, Tony and I will be attending any meetings by phone for the next 10-14 days.

Thanks
Steve

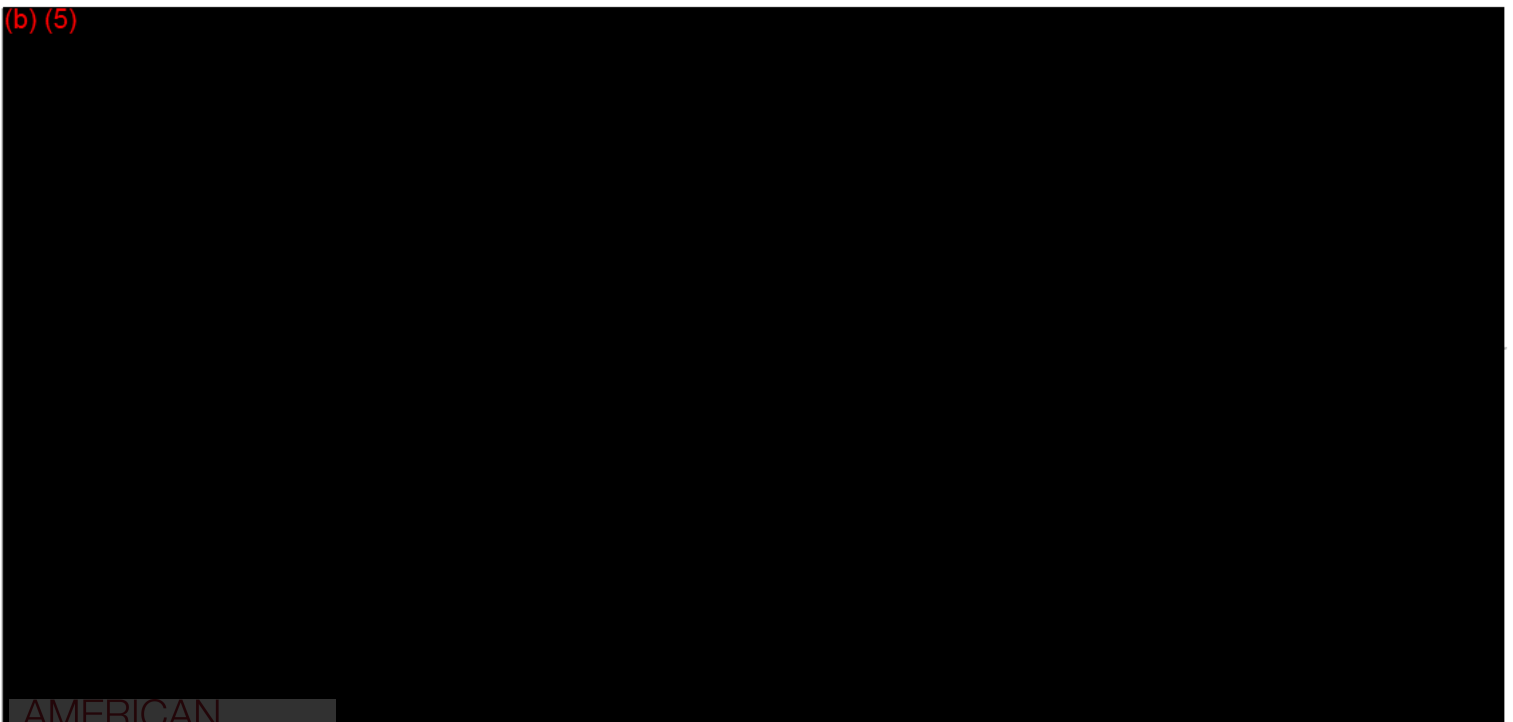
From: McGuffee, Tyler Ann A. EOP/OVP <[(b) (6)]>ovp.eop.gov>
Date: May 9, 2020 at 10:01:30 AM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@[(b) (6)]>
Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>
Subject: Re: Agenda items for Monday's doctors meeting

Will set up the meeting for Monday and include a dial in for those not coming to campus.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: [(b) (6)] [no text]
Email: [(b) (6)]<ovp.eop.gov>

(b) (5)





From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/8/2020 12:47:21 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) ovp.eop.gov] McGuffee, Tyler Ann A. EOP/OVP
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]
Subject: Re: Follow up discussion (5/8) 3:00pm Ward Room

Oh ok.

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6) ovp.eop.gov>
Date: May 8, 2020 at 12:46:27 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, McGuffee, Tyler Ann A. EOP/OVP <Tyler.A.McGuffee2@ovp.eop.gov>
Cc: Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: Re: Follow up discussion (5/8) 3:00pm Ward Room

This was just to give us cover for the (b) (5) discussion. Deb

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Friday, May 8, 2020 at 12:42 PM
To: "McGuffee, Tyler Ann A. EOP/OVP" <(b) (6) ovp.eop.gov>
Cc: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6) ovp.eop.gov>, "Lenihan, Keagan" <Keagan.Lenihan@fda.hhs.gov>
Subject: Re: Follow up discussion (5/8) 3:00pm Ward Room

(b) (5)

Steve

From: McGuffee, Tyler Ann A. EOP/OVP <(b) (6) ovp.eop.gov>
Date: May 8, 2020 at 12:38:31 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Cc: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6) ovp.eop.gov>, Lenihan, Keagan <Keagan.Lenihan@fda.hhs.gov>
Subject: Re: Follow up discussion (5/8) 3:00pm Ward Room

Correct, helpful context. We will have a dial in for Dr. Woodcock.

Sincerely,
TAM

Tyler Ann McGuffee
Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President
Office: (202) 456-5984 | Mobile: (b) (6) [no text]
Email: (b) (6) ovp.eop.gov

On May 8, 2020, at 12:36 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Just saw this. Deb, should I (b) (5) for early next week or this weekend?
Steve

From: McGuffee, Tyler Ann A. EOP/OVP <(b) (6)@ovp.eop.gov>

Date: May 8, 2020 at 9:57:36 AM EDT

To: Sheehy, Janice <Janice.Sheehy@fda.hhs.gov>, Rom, Colin <Colin.Rom@fda.hhs.gov>, Conrad, Patricia L (NIH) <conradpa@niaid.nih.gov>, Knotts, Ashley (CDC) <vqf0@cdc.gov>, Good-Cohn, Meredith (CMS) <Meredith.Good-Cohn@cms.hhs.gov>, Sherman, Jennifer (OS) <Jennifer.Sherman@hhs.gov>

Cc: Hahn, Stephen <SH1@fda.hhs.gov>, Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>, Redfield, Robert R (CDC) <olx1@cdc.gov>, (b) (6)@cms.hhs.gov' <(b) (6)@cms.hhs.gov>, Adams, Jerome (OS) <Jerome.Adams@hhs.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>

Subject: Follow up discussion (5/8) 3:00pm Ward Room

Dr. Birx is requesting to convene a follow up discussion with principals in the Ward Room today at 3:00pm. Please let me know if your principal is able to attend. Thank you.

Attendees:

Dr. Birx
Dr. Hahn
Dr. Fauci
Dr. Redfield
Dr. Adams
Administrator Verma

Sincerely,
TAM

Tyler Ann McGuffee

Assistant to Ambassador Birx, M.D. | Office of the White House Coronavirus Response Coordinator
Associate Advisor | Office of the Vice President

Office: (202) 456-5984 | Mobile: (b) (6) [no text]

Email: Tyler.A.McGuffee2@ovp.eop.gov

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/15/2020 6:01:46 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: (b) (5)

We put out additional information/guidance. Abbott did as well. We alerted the WH

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: May 14, 2020 at 8:22:43 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: (b) (5)

Sent from my iPhone

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/14/2020 5:00:19 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Clarification

Ok. I'm on a BARDA call until 6. Let me know what works for you.
S

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: May 14, 2020 at 4:51:10 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Re: Clarification

I will call you

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Thursday, May 14, 2020 at 4:43 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Subject: Clarification

Deb,
(b) (5) I couldn't hear very well so I wanted to make sure we delivered on your request. Can you clarify?
thanks
Steve

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/13/2020 7:58:27 PM
To: Michael, Molly A. EOP/WHO [Molly.A.Michael@who.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]
Subject: Re: From POTUS

thanks, Molly

From: Michael, Molly A. EOP/WHO <Molly.A.Michael@who.eop.gov>
Date: May 13, 2020 at 6:35:37 PM EDT
To: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)> Fauci, Anthony S (NIH) <(b) (6)@niaid.nih.gov>, Hahn, Stephen <SH1@fda.hhs.gov>
Subject: From POTUS

Hi Dr. Birx, Dr. Fauci, and Dr. Hahn,

(b) (5)

Thank you!

Molly Michael
Executive Assistant to the President
202-456-3570 (office)
(b) (6) (cell)

From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFACOCFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/11/2020 4:57:14 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]
Subject: Re: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

Thanks, Joe. Copying Peter
Steve

From: Joe Grogan <Joseph.J.Grogan@who.eop.gov>
Date: Monday, May 11, 2020 at 10:39 AM
To: Stephen Hahn <SH1@fda.hhs.gov>, Janet Woodcock <Janet.Woodcock@fda.hhs.gov>, Robert Redfield <(b) (6)@cdc.gov>
Subject: Fwd: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

I sent this to Debi but you should have it to incorporate into your thinking. For some reason I didn't have Peter's email.
Thanks, Joe

Sent from my iPhone

Begin forwarded message:

From: "Perlmutter, Roger M" (b) (6)
Date: May 8, 2020 at 6:02:27 PM EDT
To: "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>
Subject: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

CONFIDENTIAL

Joe:

Attached is the proposal for BARDA that I promised to send when we last spoke. My colleagues and I have tried to outline a comprehensive approach to address the need for enhanced biological manufacturing capabilities in the United States, both with specific reference to the COVID-19 pandemic, and as well taking into account the broader need for pandemic preparedness.

I wish also to take this opportunity to wish you well in whatever future endeavors you undertake. Please let me know if I can help in any way.

With all best wishes,

RMP

*Roger M. Perlmutter, MD, PhD
President, Merck Research Laboratories
K1-4009
2000 Galloping Hill Road*

Kenilworth, NJ 07033

Office: 908-740-1107

Mobile: (b) (6)

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From: Hahn, Stephen [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A0AFAC0CFA3C4B98913833E38A036E9F-STEPHEN.HAH]
Sent: 5/8/2020 12:55:30 PM
To: Short, Marc T. EOP/OVP [(b) (6)] ovp.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Subject: Re: Abbott ID Now Test

Thanks, Marc.
Steve

From: Short, Marc T. EOP/OVP [(b) (6)] ovp.eop.gov>
Date: May 7, 2020 at 7:00:12 PM EDT
To: Fauci, Anthony S (NIH) < (b) (6) niaid.nih.gov>, Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6) >, Hahn, Stephen <SH1@fda.hhs.gov>
Subject: FW: Abbott ID Now Test

FYSA

From: Foltz, Nicole <nicole.foltz@abbott.com>
Sent: Thursday, May 7, 2020 6:23 PM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>; Short, Marc T. EOP/OVP < (b) (6) ovp.eop.gov>; Hodgson, Christopher M. EOP/OVP < (b) (6) ovp.eop.gov>
Subject: [EXTERNAL] Abbott ID Now Test

Hi there,

Wanted to flag something for you after the Senate HELP BARDA/NIH hearing today. This is likely going to come up in the news, and at the hearing next week.

The NIH director mentioned that IDNow has a false negative rate of around 15%. The study to which he is referring had some issues in how the samples were handled (more specifics on that below).

We have already worked with the FDA to further advise providers on how to administer the test and transport the sample properly. If it is used as intended, we are confident in its accuracy.

This is a news article about a study the Detroit Mayor did on our machine with his state public health lab where they used the proper sample collection method:

<https://www.freep.com/story/news/local/michigan/detroit/2020/05/06/duggan-update-coronavirus/5175923002/>

Wanted you to be aware that we have already gotten some media inquiries about this. Happy to jump on the phone and explain if easier.

Nicole

(b) (6)

Study referred to by NIH Director Collins:

The Cleveland Clinic study used viral transport media. When we identified that viral transport media could be diluting samples several weeks ago, we immediately communicated with our customers that they should use the direct swab method. When the direct swab method is used, the test is performing as expected and we are confident in its performance.

We communicated with our customers and posted this to our website on April 15th. Our statement from Apr 15 2020: Abbott is providing additional information and direction for clinicians, laboratory professionals, and our customers on our ID NOW COVID-19 rapid test.

Some of our hospital and academic laboratory users have been validating our ID NOW COVID-19 rapid test (part of a lab's normal process) with the use of viral transport media (VTM) samples. VTM is a liquid solution used to store, preserve, and transport a virus sample. This method can reduce the sensitivity of the test through dilution, which can potentially lead to false negative results.

ID NOW is designed for – and typically used within – urgent care clinics, physicians' office labs, emergency departments, and retail settings. This means that patient samples (swabs) are collected and tested directly on the ID NOW instrument, near the patient and without the use of VTM.

In consultation with the FDA, we have instructed our customers not to use VTM for the ID NOW COVID-19 rapid test. The sample (swab) should be placed directly in the instrument for testing and not placed in any other media. We have updated our product information and are directly communicating with our customers.

When a direct swab is used, the test is performing as expected and we have confidence in the performance of the test. For more information about Abbott's work on COVID-19 testing, visit: <https://www.abbott.com/IDNOW.html>.



Abbott

Nicole Foltz

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M: (b) (6)

nicole.foltz@abbott.com

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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/18/2020 5:17:17 PM
To: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@**(b) (6)**]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]
Subject: COVID19 stability on surfaces.pdf
Attachments: COVID19 stability on surfaces.pdf; ATT00001.txt

FYI

From: Grogan, Joseph J. EOP/WHO [(b) (6)] who.eop.gov]
Sent: 4/17/2020 7:50:39 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]
Subject: FW: CORONAVIRUS FLAG: Anti-viral drug shows promise in fighting coronavirus in leaked clinical trial results

From: News Alerts <NewsAlerts@WHO.eop.gov>
Sent: Thursday, April 16, 2020 6:21 PM
Subject: CORONAVIRUS FLAG: Anti-viral drug shows promise in fighting coronavirus in leaked clinical trial results

Early peek at data on Gilead coronavirus drug suggests patients are responding to treatment

Stat
Adam Feuerstein and Matthew Herper
April 16, 2020
<https://www.statnews.com/2020/04/16/early-peek-at-data-on-gilead-coronavirus-drug-suggests-patients-are-responding-to-treatment/>

A Chicago hospital treating severe Covid-19 patients with Gilead Sciences' antiviral medicine remdesivir in a closely watched clinical trial is seeing rapid recoveries in fever and respiratory symptoms, with nearly all patients discharged in less than a week, STAT has learned.

Remdesivir was one of the first medicines identified as having the potential to impact SARS-CoV-2, the novel coronavirus that causes Covid-19, in lab tests. The entire world has been waiting for results from Gilead's clinical trials, and positive results would likely lead to fast approvals by the Food and Drug Administration and other regulatory agencies. If safe and effective, it could become the first approved treatment against the disease.

The University of Chicago Medicine recruited 125 people with Covid-19 into Gilead's two Phase 3 clinical trials. Of those people, 113 had severe disease. All the patients have been treated with daily infusions of remdesivir.

"The best news is that most of our patients have already been discharged, which is great. We've only had two patients perish," said Kathleen Mullane, the University of Chicago infectious disease specialist overseeing the remdesivir studies for the hospital.

Her comments were made this week during a video discussion about the trial results with other University of Chicago faculty members. The discussion was recorded and STAT obtained a copy of the video.

The outcomes offer only a snapshot of remdesivir's effectiveness. The same trials are being run concurrently at other institutions, and it's impossible to determine the full study results with any certainty. Still, no other clinical data from the Gilead studies have been released to date, and excitement is high. Last month, President Trump touted the potential for remdesivir — as he has for many still-unproven treatments — and said it "seems to have a very good result."

In a statement Thursday, Gilead said: "What we can say at this stage is that we look forward to data from ongoing studies becoming available."

Gilead had said to expect results for its trial involving severe cases in April. Mullane said during her presentation that data for the first 400 patients in the study would be "locked" by Gilead Thursday, meaning that results could come any day.

Mullane, while encouraged by the University of Chicago data, made clear her own hesitancy about drawing too many conclusions.

"It's always hard," she said, because the severe trial doesn't include a placebo group for comparison. "But certainly when we start [the] drug, we see fever curves falling," she said. "Fever is now not a requirement for people to go on trial, we do see when patients do come in with high fevers, they do [reduce] quite quickly. We have seen people come off ventilators a day after starting therapy. So, in that realm, overall our patients have done very well."

She added: "Most of our patients are severe and most of them are leaving at six days, so that tells us duration of therapy doesn't have to be 10 days. We have very few that went out to 10 days, maybe three," she said.

Reached by STAT, Mullane confirmed the authenticity of the footage but declined to comment further.

Asked about the data, Eric Topol, director of the Scripps Research Translational Institute, described them as "encouraging."

"The severely hit patients are at such high-risk of fatality. So if it's true that many of the 113 patients were in this category and were discharged, it's another positive signal that the drug has efficacy," he said, adding that it will be important to see more data from randomized controlled studies.

Gilead's severe Covid-19 study includes 2,400 participants from 152 different clinical trial sites all over the world. Its moderate Covid-19 study includes 1,600 patients in 169 different centers, also all over the world.

The trial is investigating five- and 10-day treatment courses of remdesivir. The primary goal is a statistical comparison of patient improvement between the two treatment arms. Improvement is measured using a seven-point numerical scale that encompasses death (at worst) and discharge from hospital (best outcome), with various degrees of supplemental oxygen and intubation in between.

The lack of a control arm in the study could make interpreting the results more challenging.

A lack of data has led to yo-yoing expectations for the drug. Two studies in China had enrollment suspended partway through because there were not enough patients available. A recent report of patients given the drug under a special program to make it available to those who are very ill generated both excitement and skepticism.

In scientific terms, all the data are anecdotal until the full trial reads out, meaning that they should not be used to draw final conclusions. But some of the anecdotes are dramatic.

Slawomir Michalak, a 57-year-old factory worker from a suburb west of Chicago, was among the participants in the Chicago study. One of his daughters started feeling ill in late March and was later diagnosed with mild Covid-19. Michalak, by contrast, came down with a high fever and reported shortness of breath and severe pain in his back.

"It felt like someone was punching me in the lungs," he told STAT.

At his wife's urging, Michalak went to the University of Chicago Medicine hospital on Friday, April 3. His fever had spiked to 104 and he was struggling to breathe. At the hospital, he was given supplemental oxygen. He also agreed to participate in Gilead's severe Covid-19 clinical trial.

His first infusion of remdesivir was on Saturday, April 4. "My fever dropped almost immediately and I started to feel better," he said.

By his second dose on Sunday, Michalak said he was being weaned off oxygen. He received two more daily infusions of remdesivir and recovered enough to be discharged from the hospital on Tuesday, April 7.

“Remdesivir was a miracle,” he said.

The world is waiting to find out if it is really so.

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/20/2020 3:27:51 PM
To: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]
Subject: FW: Sending this
Attachments: pressfinal19may.pptx; Data20May2020.pptx

In case any are doing media or the CNN townhall

From: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>
Date: Wednesday, May 20, 2020 at 1:33 PM
To: "Adams, Jerome (HHS/OASH)" <Jerome.Adams@hhs.gov>
Subject: Sending this

Most recent data

New hospitalizations down 50% from first week of April and first week of May. Mortality down 15% from week over week.

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/7/2020 9:28:16 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Did you find it. Is it there?

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 7:38:00 AM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: (b) (6)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/28/2020 6:35:08 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: You ok?

Of course.

Sent from my iPhone

On Apr 28, 2020, at 6:34 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

I'm ok. You?
May I call you to touch base when I land?

From: Birx, Deborah L. EOP/NSC <Deborah.L.Birx@ (b) (6)>
Date: April 28, 2020 at 6:29:21 PM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: You ok?

(b) (5)

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/21/2020 8:53:38 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]
Subject: Re: (b) (5)

Thank you Steve.

Sent from my iPhone

> On Apr 21, 2020, at 8:52 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/19/2020 6:58:09 PM
To: Ford, Robert B [Robert.Ford@abbott.com]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Shuren, Jeff [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44335a0c2f834535bc8713dfd643905e-Jeff.Shuren]; Stenzel, Timothy [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e181c337cf1d429bae363600706a5fc4-Timothy.Ste]; Haddad, Carla (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8627be6986b64424883e696551c54187-HHS-Carla.H]
Subject: Re: [EXTERNAL] Re: Abbott's Covid Data

Thank you

From: "Ford, Robert B" <Robert.Ford@abbott.com>
Date: Sunday, April 19, 2020 at 6:03 PM
To: "Giroir, Brett (HHS/OASH)" <Brett.Giroir@hhs.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>, "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)>, "Shuren, Jeff (FDA/CDRH)" <Jeff.Shuren@fda.hhs.gov>, "Stenzel, Timothy (FDA/CDRH)" <Timothy.Stenzel@fda.hhs.gov>, "Haddad, Carla (HHS/OASH)" <Carla.Haddad@hhs.gov>
Subject: [EXTERNAL] Re: Abbott's Covid Data

Dear All,
I wanted to make sure I made this comment regarding utilization of the automated antibody test.

As you can see we made a commitment to ship (b) (4) tests between Thur, Fri and Saturday. (b) (4)

[REDACTED]

[REDACTED]

You will see that the column on tests performed is zero. I will expect that column to start to get populated by Monday/Tuesday. The reason for this is:

- A) These are shipments; so many of these accounts have not even received them yet, although we are expediting them.
- B) The lab will need to run calibrations and controls so they can validate the test per their internal protocols. Some labs are faster than others. But this system is much easier to use vs the m2000 RNA test, so I believe it will be done faster.
- B) The pre-test process requires the doctor prescription and obviously the sample collection process.

Best,

Robert B. Ford

On Apr 19, 2020, at 4:37 PM, Wainer, Andrea F <andrea.wainer@abbott.com> wrote:

Good evening,

Please find attached Abbott's data as of April 18 for (1) m2000; (2) ID NOW; and (3) ARCHITECT testing platforms.

For m2000 test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week (Sunday to Saturday shipments).
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. We only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).
 - b. For those customers with the remote data link, we are providing raw data that has the number of tests run and the number of positives. Customers run their own required protocols to validate the accuracy of a test when a new test first becomes available. Those validation processes include negative and positive samples. The raw data we get from data link of the instrument cannot distinguish between validation samples and patient samples.
3. We do not have data regarding inventory at the labs.

For ID NOW test data:

1. We are reporting names, addresses, total cumulative tests shipped, and total tests shipped this week (Monday to Sunday shipments).
2. Unlike the m2000 instrument, we do not have any data on tests performed from the ID NOW instruments.

For ARCHITECT test data, there are two types of data we have:

1. Information in our control such as the names and addresses of our customers and the number of tests we shipped to them cumulatively and this week (Sunday to Saturday shipments).
2. Raw data we receive from a remote data link that is sent from the instruments at the customers to Abbott.
 - a. We only receive the remote data link from certain customers (on the spreadsheet, the customers we don't receive data from are in gray).
 - b. For those customers with the remote data link, we will be providing raw data that has the number of tests run and the number of positives.
3. We do not have data regarding inventory at the labs.

Best regards,

Andrea

<image001.jpg>

Andrea Wainer
Executive Vice President
Rapid & Molecular Diagnostics

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andrea.wainer@abbott.com

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<Abbott m2000 COVID19 Testing Sites as of 4-18-20 (4-19-20 Report).xlsx>

<Abbott ID NOW COVID19 Testing Sites as of 4-18-20 (4-19-20 Report).xlsx>

<Abbott ARCHITECT COVID19 Testing Sites as of 4-18-20 (4-19-20 Report).xlsx>

From: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Sent: 4/21/2020 12:32:17 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: Follow Up - White House Correspondence

Probably the dummy inbox we set up

Sent from my iPhone

On Apr 21, 2020, at 12:25 PM, Hahn, Stephen (b) (6) @fda.hhs.gov> wrote:

Will do. Do you know who received the April 8 outreach?
Steve

From: Miller, Katie R. EOP/OVP <Katie.R.Miller@ovp.eop.gov>
Date: April 21, 2020 at 11:50:54 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>
Subject: Fwd: Follow Up - White House Correspondence

Can you please check into the below

Sent from my iPhone

Begin forwarded message:

From: "Hicks, Hope C. EOP/WHO" <Hope@who.eop.gov>
Date: April 21, 2020 at 11:19:55 AM EDT
To: "Miller, Katie R. EOP/OVP" <Katie.R.Miller@ovp.eop.gov>
Subject: FW: Follow Up - White House Correspondence

See attached from a doctor I know in California. Should I forward directly to Hahn or someone else?

From: David C. Socol MD <David@SocolMD.com>
Sent: Tuesday, April 21, 2020 3:17 AM
To: Hicks, Hope C. EOP/WHO <Hope@who.eop.gov>
Cc: Chanda Zaveri <zaveri.chanda@yahoo.com>; dfinklestein@gmail.com
Subject: [EXTERNAL] Follow Up - White House Correspondence

To Whom It May Concern,

Our group forwarded correspondence to White House Physician Dr. Sean Conley on March 30, 2020 through the offices of Dr. Sharon Hausman-Cohen regarding Cell Armour, a product which is demonstrating notable efficacy against SARS-CoV-2. Cell Armour prevents people from getting sick, makes sick people better faster, confers immunity, and achieves all of the above without the risk of cardiac toxicity.

We received a notice of receipt from the White House Coronavirus Response Team on April 8, 2020 regarding our initial forward, stating a member of that team would reach out to our group within 48 hours. To our knowledge, that outreach did not occur.

On April 15, 2020, we forwarded the attached high-level correspondence to the Coronavirus Response Team to alert the team to additional findings and applications, absent any acknowledgement to date.

While we appreciate the tremendous burden that the White House team is under, Cell Armour is currently being evaluated by the Republic of India as a prophylactic and treatment alternative to COVID-19 given information that has been provided to date. Local clinicians are also scheduled to run a clinical trial to validate our real-world findings in Hong Kong, China, South Korea and Singapore, among others. We are also preparing to start additional trials with emergency department physicians in the United States momentarily.

Given these rapidly advancing discussions in India, our offices are of the mindset that we would be remiss not to alert your offices of our progress to date and Cell Armour's strong potential to change the trajectory of the COVID-19 pandemic given our current fund of knowledge. We also believe that the White House should be appraised of our progress, learn about the science of Cell Armour, and what it can accomplish in order to explore an expedited path to widespread provision of Cell Armour to the American people.

Wishing you all the best at this challenging time.

Respectfully,
David

David C. Socol | **Physician**
8383 Wilshire Boulevard, Suite 610
Beverly Hills, CA 90211
Direct **310-561-4021**
Office 323-951-0200
Facsimile 310-388-0782

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From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/27/2020 1:25:02 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-afauci-]
Subject: Re: Bloomberg: Covid Patients Testing Positive After Recovery Aren't Infectious, Study Shows

Yes

Sent from my iPhone

On May 27, 2020, at 1:21 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

Are you all aware of this study?

From: Shah, Anand <Anand.Shah@fda.hhs.gov>
Date: May 20, 2020 at 10:16:18 AM EDT
To: Hahn, Stephen <SH1@fda.hhs.gov>, Shuren, Jeff <Jeff.Shuren@fda.hhs.gov>, Stenzel, Timothy <Timothy.Stenzel@fda.hhs.gov>
Subject: Bloomberg: Covid Patients Testing Positive After Recovery Aren't Infectious, Study Shows

><https://www.bloomberg.com/news/articles/2020-05-19/covid-patients-testing-positive-after-recovery-aren-t-infectious><

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/16/2020 2:40:08 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Olivarria, Frank [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c180721db774423f99990dd86e67057c-Frank.Oliva]
CC: Lenihan, Keagan [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee7320ee8c184d66bfd521b0105d17d2-Keagan.Leni]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]
Subject: Re: Call tomorrow 11am

I am free

From: "Hahn, Stephen" <SH1@fda.hhs.gov>
Date: Saturday, May 16, 2020 at 1:58 PM
To: "Olivarria, Frank" <Frank.Olivarria@fda.hhs.gov>
Cc: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Lenihan, Keagan" <Keagan.Lenihan@fda.hhs.gov>, "Marks, Peter" <Peter.Marks@fda.hhs.gov>
Subject: Call tomorrow 11am

Frank,
Could you arrange a call for Drs. Marks, Birx and me tomorrow at 11 am if everyone is free?
Thanks
Steve

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/21/2020 8:34:02 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: (b) (5)

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/20/2020 5:37:12 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: (b) (5)

Sent from my iPhone

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/13/2020 6:40:02 PM
To: Michael, Molly A. EOP/WHO [Molly.A.Michael@who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: From POTUS

Thank you

From: "Michael, Molly A. EOP/WHO" <Molly.A.Michael@who.eop.gov>
Date: Wednesday, May 13, 2020 at 6:35 PM
To: "Birx, Deborah L. EOP/NSC" <Deborah.L.Birx@ (b) (6)> "Fauci, Anthony (NIH/NIAID) [E]" <(b) (6)@niaid.nih.gov>, "Hahn, Stephen" <SH1@fda.hhs.gov>
Subject: From POTUS

Hi Dr. Birx, Dr. Fauci, and Dr. Hahn,

(b) (5)

Thank you!

Molly Michael
Executive Assistant to the President
202-456-3570 (office)
(b) (6) (cell)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/14/2020 6:06:08 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Re: I'm free now and rest of the evening

Call me. I tried your phone.

Sent from my iPhone

On May 14, 2020, at 5:46 PM, Hahn, Stephen <SH1@fda.hhs.gov> wrote:

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 5/11/2020 4:58:34 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: RE: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

Awesome.

From: Hahn, Stephen <SH1@fda.hhs.gov>
Sent: Monday, May 11, 2020 4:58 PM
To: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Subject: Re: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

BTW, Janet gave a great presentation on therapeutics to a small group led by Dr. Birx. It went well.
Steve

From: Joe Grogan <Joseph.J.Grogan@who.eop.gov>
Date: Monday, May 11, 2020 at 10:39 AM
To: Stephen Hahn <SH1@fda.hhs.gov>, Janet Woodcock <Janet.Woodcock@fda.hhs.gov>, Robert Redfield <(b) (6)@cdc.gov>
Subject: Fwd: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

I sent this to Debi but you should have it to incorporate into your thinking. For some reason I didn't have Peter's email.
Thanks, Joe

Sent from my iPhone

Begin forwarded message:

From: "Perlmutter, Roger M" (b) (6)
Date: May 8, 2020 at 6:02:27 PM EDT
To: "Grogan, Joseph J. EOP/WHO" <Joseph.J.Grogan@who.eop.gov>
Subject: [EXTERNAL] FW: BARDA Proposal - RMP v4.docx

CONFIDENTIAL

Joe:

Attached is the proposal for BARDA that I promised to send when we last spoke. My colleagues and I have tried to outline a comprehensive approach to address the need for enhanced biological manufacturing capabilities in the United States, both with specific reference to the COVID-19 pandemic, and as well taking into account the broader need for pandemic preparedness.

I wish also to take this opportunity to wish you well in whatever future endeavors you undertake. Please let me know if I can help in any way.

With all best wishes,

RMP

Roger M. Perlmutter, MD, PhD
President, Merck Research Laboratories

K1-4009
2000 Galloping Hill Road
Kenilworth, NJ 07033
Office: 908-740-1107
Mobile: (b) (6)

Notice: This e-mail message, together with any attachments, contains information of Merck & Co., Inc. (2000 Galloping Hill Road, Kenilworth, New Jersey, USA 07033), and/or its affiliates Direct contact information for affiliates is available at

>>[<<](http://www.merck.com/contact/contacts.html);) that may be confidential, proprietary copyrighted and/or legally privileged. It is intended solely for the use of the individual or entity named on this message. If you are not the intended recipient, and have received this message in error, please notify us immediately by reply e-mail and then delete it from your system.

From: Miller, Katie R. EOP/OVP [Katie.R.Miller@ovp.eop.gov]
Sent: 4/21/2020 1:11:30 PM
To: Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Fwd: [EXTERNAL] AP: More deaths, no benefit from malaria drug in VA virus study

Sent from my iPhone

Begin forwarded message:

From: Comms Alert <CommsAlert@GOP.COM>
Date: April 21, 2020 at 12:29:25 PM EDT
To: "COMMSALERT@L.GOP.COM" <COMMSALERT@L.GOP.COM>
Subject: [EXTERNAL] AP: More deaths, no benefit from malaria drug in VA virus study
Reply-To: <CommsAlert@GOP.COM>

More deaths, no benefit from malaria drug in VA virus study

Associated Press

Marilynn Marchione

April 21, 2020

<https://apnews.com/a5077c7227b8eb8b0dc23423c0bbe2b2c>

A malaria drug widely touted by President Donald Trump for treating the new coronavirus showed no benefit in a large analysis of its use in U.S. veterans hospitals. There were more deaths among those given hydroxychloroquine versus standard care, researchers reported.

The nationwide study was not a rigorous experiment. But with 368 patients, it's the largest look so far of hydroxychloroquine with or without the antibiotic azithromycin for COVID-19, which has killed more than 171,000 people as of Tuesday.

The study was posted on an online site for researchers and has been submitted to the New England Journal of Medicine, but has not been reviewed by other scientists. Grants from the National Institutes of Health and the University of Virginia paid for the work.

Researchers analyzed medical records of 368 male veterans hospitalized with confirmed coronavirus infection at Veterans Health Administration medical centers who died or were discharged by April 11.

About 28% who were given hydroxychloroquine plus usual care died, versus 11% of those getting routine care alone. About 22% of those getting the drug plus azithromycin died too, but the difference between that group and usual care was not considered large enough to rule out other factors that could have affected survival.

Hydroxychloroquine made no difference in the need for a breathing machine, either.

Researchers did not track side effects, but noted hints that hydroxychloroquine might have damaged other organs. The drug has long been known to have potentially serious side effects, including altering the heartbeat in a way that could lead to sudden death.

Earlier this month, scientists in Brazil stopped part of a hydroxychloroquine study after heart rhythm problems developed in one-quarter of people given the higher of two doses being tested.

Many doctors have been leery of the drug.

At the University of Wisconsin, Madison, “I think we’re all rather underwhelmed” at what’s been seen among the few patients there who’ve tried it, said Dr. Nasia Safdar, medical director of infection control and prevention.

Patients asked about it soon after Trump started promoting its use, “but now I think that people have realized we don’t know if it works or not” and needs more study, said Safdar, who had no role in the VA analysis.

The NIH and others have more rigorous tests underway.

To Unsubscribe Email COMMSALERT-signoff-request@L.GOP.COM

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/19/2020 4:31:22 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]@ovp.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Olivarria, Frank [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c180721db774423f99990dd86e67057c-Frank.Oliva]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]
Subject: Confirmed -- Dr. Birx follow up discussion
Location: Dr. Birx office // Dial In: 1-877-465-7975,,, (b) (6)
Start: 5/20/2020 10:15:00 AM
End: 5/20/2020 11:00:00 AM
Show Time As: Busy
Recurrence: (none)

Quick dial: 1-877-465-7975,,, (b) (6)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/6/2020 6:05:11 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
CC: Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9d983419fcd-HHS-olx1-cd] (b) (6) cms.hhs.gov'
(b) (6) cms.hhs.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: TIME CHANGE: - Discussion: (b) (5)

Location: Ward Room

Start: 5/7/2020 3:30:00 PM

End: 5/7/2020 4:30:00 PM

Show Time As: Busy

Recurrence: (none)

5/7 Agenda

(b) (5)

Attendees:

Dr. Birx
Dr. Hahn
Dr. Redfield
Dr. Fauci
Administrator Verma

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 4:31:01 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)@ovp.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Fleming, John C. Jr. EOP/WHO [John.C.Fleming@who.eop.gov]; Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Subject: Meeting w/ Dr. Birx
Location: Roosevelt Room
Start: 5/1/2020 1:00:00 PM
End: 5/1/2020 2:00:00 PM
Show Time As: Busy
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/17/2020 5:59:06 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T. EOP/NSC [Brandon.T.Holt@ (b) (6) who.eop.gov]; Pottinger, Matthew F. EOP/WHO [(b) (6) who.eop.gov]; Liddell, Christopher P. EOP/WHO [(b) (6) who.eop.gov]; Riggs, Charlotte R. EOP/WHO [(b) (6) who.eop.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; DeValliere, Ian C. EOP/WHO [(b) (6) who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6) ovp.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) who.eop.gov]
Subject: (b) (5) Update
Location: WHSR
Start: 4/20/2020 2:00:00 PM
End: 4/20/2020 2:30:00 PM
Show Time As: Busy
Recurrence: (none)

Attendees:

Dr. Hahn
Dr. Redfield
Dr. Birx
Matt Pottinger
Chris Liddell

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 10:52:54 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; [(b) (6)] cms.hhs.gov' [(b) (6)] cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: Confirmed - Dr. Birx call w/ ACOG/AAP Leadership
Location: Dr. Birx office; 877-628-4681; (b) (6)

Start: 4/30/2020 2:15:00 PM
End: 4/30/2020 2:30:00 PM
Show Time As: Busy

Recurrence: (none)

Dial In: 877-628-4681

Participant (b) (6)

American College of Obstetricians and Gynecologists (ACOG) participants:

Speaking: Maureen Phipps, MD, MPH, FACOG – CEO

Also on the line: Skye Perryman, JD – Chief Legal Officer and General Counsel
Rachel Tetlow, Federal Affairs Director

American Academy of Pediatrics AAP participants:

Speaking: Mark DelMonte, CEO

Also on the line: Tamar Haro, Senior Director, Federal and State Advocacy

ACOG/ AAP Agenda:

1. Opening and thanks
2. Healthy moms and babies
3. HHS funding for physicians
4. Conversation
5. Closing

From: (b) (6) ovp.eop.gov [(b) (6) ovp.eop.gov]
Sent: 5/11/2020 2:07:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Fauci, Anthony S (NIH)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Rom, Colin
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]

Subject: UPDATED DIAL IN Confirmed - Follow up discussion with Dr. Birx

Attachments: FW: testing, testing, testing

Location: 1-866-617-3597;; Participant Passcode: (b) (6)

Start: 5/11/2020 2:00:00 PM

End: 5/11/2020 2:30:00 PM

Show Time As: Busy

Recurrence: (none)

Dial-In Information

Toll-Free #1-866-617-3597

Participant Passcode: (b) (6)

Leader Passcode: (b) (6)

Attendees:

Dr. Birx

Dr. Fauci

Dr. Hahn

Dr. Redfield

Agenda:

(b) (5)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 5/26/2020 4:54:34 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah];
Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS- (b) (6)]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] [ovp.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Gershman, Lynn E (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=466fe715fb22432e9dcf605736ded877-HHS-veu4-cd]
Subject: Confirmed - Follow up discussion
Location: Dr. Birx office
Start: 5/27/2020 3:30:00 PM
End: 5/27/2020 5:00:00 PM
Show Time As: Busy
Recurrence: (none)

Attendees:

Dr. Birx [confirmed in-person]
Dr. Redfield [confirmed in-person]
Dr. Hahn [confirmed in-person]
Dr. Fauci [confirmed in-person]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 5/1/2020 5:31:38 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Williams, Michael B. EOP/WHO [(b) (6) who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; Tignor, Beth (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44f3651e3b164ef786d33dc18b5112a4-HHS-Beth.Ti]; Liddell, Christopher P. EOP/WHO [(b) (6) who.eop.gov]; Riggs, Charlotte R. EOP/WHO [(b) (6) who.eop.gov]; Butterfield, Nicholas W. EOP/WHO [(b) (6) who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@ (b) (6) who.eop.gov]
Subject: (b) (5) Meeting
Location: WHSR JFK
Start: 5/4/2020 1:15:00 PM
End: 5/4/2020 2:15:00 PM
Show Time As: Tentative
Recurrence: (none)

****There will be no dial-in option****

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[REDACTED] Vought, Russell T. EOP/OMB [REDACTED] Bruno, Grace A.
EOP/OMB [REDACTED] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[REDACTED]
Cytryn, Jen B. EOP/WHO [REDACTED] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [REDACTED] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[REDACTED] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[REDACTED] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [REDACTED]
[REDACTED] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[REDACTED] Pottinger, Matthew F. EOP/WHO [REDACTED] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[REDACTED] Kellogg, Joseph Keith K. Jr. EOP/OVP [REDACTED] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [REDACTED] who.eop.gov]; DeValliere, Ian C. EOP/WHO [REDACTED] who.eop.gov];
Williams, Michael B. EOP/WHO [REDACTED] who.eop.gov]

Subject: HOLD [REDACTED]
Location: WHSR

Start: 4/29/2020 2:00:00 PM
End: 4/29/2020 2:50:00 PM
Show Time As: Tentative

Recurrence: (none)

[REDACTED]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[(b) (6)]] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]
Subject: HOLD [(b) (5)]
Location: WHSR
Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Tentative

(b) (5)

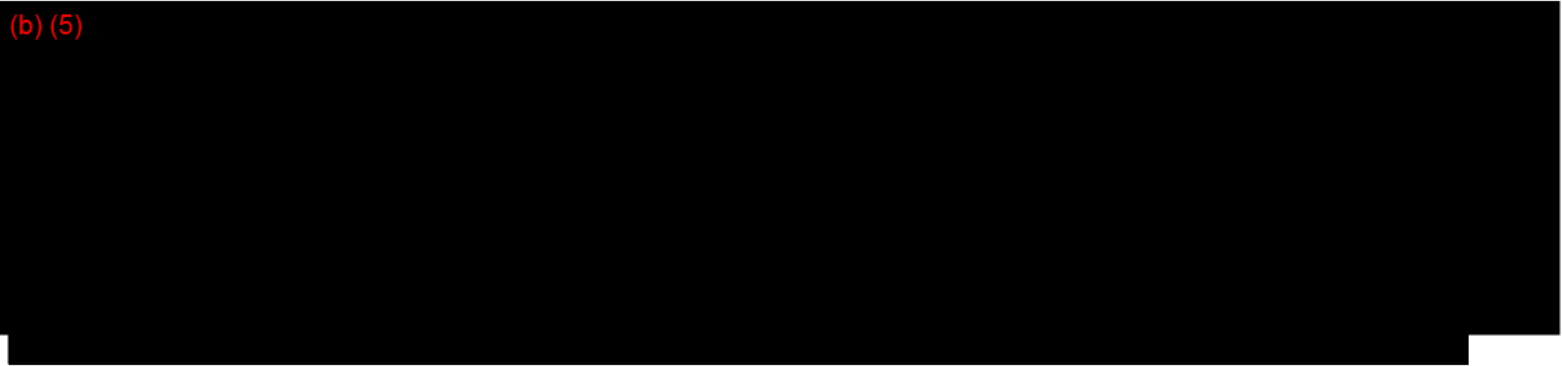
From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Conant, Ann M. EOP/OMB [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)] Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO [Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@[(b) (6)] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)] Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS[(b) (6)] [(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Holt, Brandon T. EOP/NSC [Brandon.T.Holt@[(b) (6)] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@[(b) (6)] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov]; Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D. EOP/WHO [(b) (6)] who.eop.gov]; DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]
Subject: HOLD [(b) (5)]
Location: WHSR
Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Tentative

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Friday, April 24, 2020 1:43 PM
To: Grogan, Joseph J. EOP/WHO; Conant, Ann M. EOP/OMB; Vought, Russell T. EOP/OMB; Bruno, Grace A. EOP/OMB; D'Angelo, Gregory B. EOP/OMB; Cytryn, Jen B. EOP/WHO; Miller, Stephen EOP/WHO; McGuffee, Tyler Ann A. EOP/OVP; Birx, Deborah L. EOP/NSC; Fauci, Anthony S (NIH); Conrad, Patricia L (NIH); Good-Cohn, Meredith (CMS); CMS[(b) (6)] Sheehy, Janice; Hahn, Stephen; Holt, Brandon T. EOP/NSC; Pottinger, Matthew F. EOP/WHO; Ferro, Phil J. EOP/NSC; Kellogg, Joseph Keith K. Jr. EOP/OVP; Williams, Teresa (CDC); Redfield, Robert R (CDC); Campana, Alexandra D. EOP/WHO; DeValliere, Ian C. EOP/WHO; Williams, Michael B. EOP/WHO
Subject: HOLD [(b) (5)]
When: Monday, April 27, 2020 2:00 PM-2:50 PM (UTC-05:00) Eastern Time (US & Canada).
Where: WHSR

(b) (5)

(b) (5)



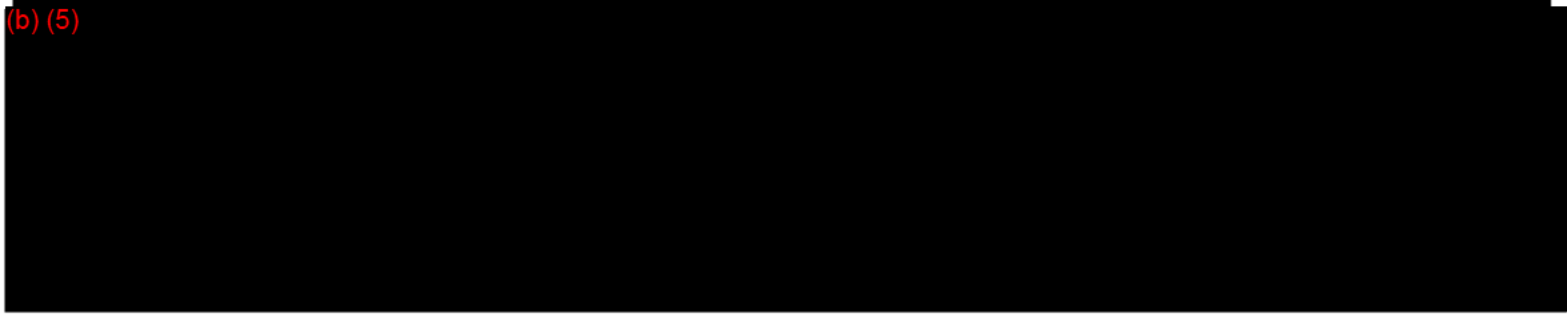
From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 4:31:01 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Meeting w/ Dr. Birx
Location: Dr. Birx suite
Start: 5/1/2020 1:00:00 PM
End: 5/1/2020 2:00:00 PM
Show Time As: Tentative
Recurrence: (none)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [(b) (6)] [(b) (6)] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; Mango, Paul (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=2fe1932caf0249d2a0c6af5fb82c9ec5-HHS-Paul.Ma]; Troye, Olivia EOP/NSC
[Olivia.Troye@[(b) (6)]]
CC: Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange
Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; [(b) (6)] (OS/IOS)
[(b) (6)] HHS.GOV]
Subject: [REDACTED]
Attachments: [(b) (5)] [REDACTED]
Location: WHSR JFK
Start: 4/29/2020 1:45:00 PM
End: 4/29/2020 2:30:00 PM
Show Time As: Tentative
Recurrence: (none)

Please note the new start time of 1:45 PM due to conflicts in the WHSR

[(b) (5)]

(b) (5)



From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/17/2020 5:59:06 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T. EOP/NSC [Brandon.T.Holt@ (b) (6)]; Pottinger, Matthew F. EOP/WHO [(b) (6) who.eop.gov]; Liddell, Christopher P. EOP/WHO [(b) (6) who.eop.gov]; Riggs, Charlotte R. EOP/WHO [(b) (6) who.eop.gov]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; DeValliere, Ian C. EOP/WHO [(b) (6) who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6) ovp.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]

Subject: (b) (5) Update
Location: WHSR

Start: 4/20/2020 2:00:00 PM
End: 4/20/2020 2:30:00 PM
Show Time As: Tentative

Recurrence: (none)

Attendees:

Dr. Hahn
Dr. Redfield
Dr. Birx
Matt Pottinger
Chris Liddell

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 10:52:54 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; [(b) (6)] cms.hhs.gov [(b) (6)] cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: Confirmed - Dr. Birx call w/ ACOG/AAP Leadership
Location: Dr. Birx office; 877-628-4681; (b) (6)

Start: 4/30/2020 2:15:00 PM
End: 4/30/2020 2:30:00 PM
Show Time As: Tentative

Recurrence: (none)

Dial In: 877-628-4681

Participant: (b) (6)

ACOG participants:

Maureen Phipps, MD, MPH, FACOG – CEO
Skye Perryman, JD – Chief Legal Officer and General Counsel
Rachel Tetlow, Federal Affairs Director

AAP participants:

Mark DelMonte, CEO
Tamar Haro, Senior Director, Federal and State Advocacy

ACOG/AAP Agenda:

- Opening and thanks (*Mark and Maureen*)
- HHS funding for physicians and hospitals – concerns with distribution (*Mark and Maureen*)
- Immunization rates (*Mark*)
- Continued concerns regarding home birth/birth settings (*Maureen and Mark*)
- Opportunity to partner in the lead up to Mother's Day (*Maureen*)
- PPE & Testing shortages (*Maureen and Mark*)
- Prioritization of L&D for rapid response testing
-

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 5/1/2020 5:31:38 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Giroir, Brett (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ee4c4234d3834c77a4a1a7b1a7c176a2-HHS-Brett.G]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6) Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; (b) (6) cms.hhs.gov; Williams, Michael B. EOP/WHO [(b) (6) who.eop.gov]; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6) Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredith]; Tignor, Beth (OS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=44f3651e3b164ef786d33dc18b5112a4-HHS-Beth.Ti]; Liddell, Christopher P. EOP/WHO [(b) (6) who.eop.gov]; Riggs, Charlotte R. EOP/WHO [(b) (6) who.eop.gov]; Butterfield, Nicholas W. EOP/WHO [(b) (6) who.eop.gov]; Rom, Colin [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f59636221f4340d697dbd43ee27255fb-Colin.Rom]; Bonner, Maria K. EOP/WHO [(b) (6) who.eop.gov]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@ (b) (6) who.eop.gov]
Subject: (b) (5) Meeting
Location: WHSR JFK
Start: 5/4/2020 1:15:00 PM
End: 5/4/2020 2:15:00 PM
Show Time As: Busy
Recurrence: (none)

****There will be no dial-in option****

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[(b) (6)]] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; Mango, Paul (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=2fe1932caf0249d2a0c6af5fb82c9ec5-HHS-Paul.Ma]

Subject: [(b) (5)]

Location: WHSR

Start: 4/29/2020 2:00:00 PM

End: 4/29/2020 2:50:00 PM

Show Time As: Busy

Recurrence: (none)

[(b) (5)]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[(b) (6)]] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
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(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
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(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]
Subject: HOLD [(b) (5)]
Location: WHSR
Start: 4/29/2020 2:00:00 PM
End: 4/29/2020 2:50:00 PM
Show Time As: Busy
Recurrence: (none)

(b) (5)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[REDACTED] Vought, Russell T. EOP/OMB [REDACTED] Bruno, Grace A.
EOP/OMB [REDACTED] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[REDACTED]
Cytryn, Jen B. EOP/WHO [REDACTED]who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [REDACTED]ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [REDACTED] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[REDACTED] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [REDACTED]
[REDACTED]cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[REDACTED] Pottinger, Matthew F. EOP/WHO [REDACTED]who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[REDACTED] Kellogg, Joseph Keith K. Jr. EOP/OVP [REDACTED]ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [REDACTED]who.eop.gov]; DeValliere, Ian C. EOP/WHO [REDACTED]who.eop.gov];
Williams, Michael B. EOP/WHO [REDACTED]who.eop.gov]

Subject: HOLD [REDACTED]
Location: WHSR

Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Busy

[REDACTED]

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Conant, Ann M. EOP/OMB [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] Bruno, Grace A. EOP/OMB [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)] Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO [Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah L. EOP/NSC [Deborah.L.Birx@[(b) (6)] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)] Conrad, Patricia L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith (CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Holt, Brandon T. EOP/NSC [Brandon.T.Holt@[(b) (6)] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J. EOP/NSC [Philip.J.Ferro@[(b) (6)] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov]; Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D. EOP/WHO [(b) (6)] who.eop.gov]; DeValliere, Ian C. EOP/WHO [(b) (6)] who.eop.gov]; Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]
Subject: HOLD [(b) (5)]
Location: WHSR
Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Busy

-----Original Appointment-----

From: Grogan, Joseph J. EOP/WHO <Joseph.J.Grogan@who.eop.gov>
Sent: Friday, April 24, 2020 1:43 PM
To: Grogan, Joseph J. EOP/WHO; Conant, Ann M. EOP/OMB; Vought, Russell T. EOP/OMB; Bruno, Grace A. EOP/OMB; D'Angelo, Gregory B. EOP/OMB; Cytryn, Jen B. EOP/WHO; Miller, Stephen EOP/WHO; McGuffee, Tyler Ann A. EOP/OVP; Birx, Deborah L. EOP/NSC; Fauci, Anthony S (NIH); Conrad, Patricia L (NIH); Good-Cohn, Meredith (CMS); CMS [(b) (6)] Sheehy, Janice; Hahn, Stephen; Holt, Brandon T. EOP/NSC; Pottinger, Matthew F. EOP/WHO; Ferro, Phil J. EOP/NSC; Kellogg, Joseph Keith K. Jr. EOP/OVP; Williams, Teresa (CDC); Redfield, Robert R (CDC); Campana, Alexandra D. EOP/WHO; DeValliere, Ian C. EOP/WHO; Williams, Michael B. EOP/WHO
Subject: HOLD [(b) (5)]
When: Monday, April 27, 2020 2:00 PM-2:50 PM (UTC-05:00) Eastern Time (US & Canada).
Where: WHSR

(b) (5)

(b) (5)



From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[(b) (6)]] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]

Subject: HOLD [(b) (5)]
Location: WHSR

Start: 4/29/2020 2:00:00 PM
End: 4/29/2020 2:50:00 PM
Show Time As: Tentative

Recurrence: (none)

(b) (5)

From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[(b) (6)]] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; Mango, Paul (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=2fe1932caf0249d2a0c6af5fb82c9ec5-HHS-Paul.Ma]; Troye, Olivia EOP/NSC
[(b) (6)] [(b) (6)]
CC: Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange
Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; [(b) (6)] (OS/IOS)
[(b) (6)] HHS.GOV]
Subject: [(b) (5)]
Location: WHSR JFK
Start: 4/29/2020 1:45:00 PM
End: 4/29/2020 2:30:00 PM
Show Time As: Tentative
Recurrence: (none)

(b) (5)

(b) (5)



From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 1:43:09 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[REDACTED] Vought, Russell T. EOP/OMB [REDACTED] Bruno, Grace A.
EOP/OMB [REDACTED] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[REDACTED]
Cytryn, Jen B. EOP/WHO [REDACTED]who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [REDACTED]ovp.eop.gov]; Birx, Deborah
L. EOP/NSC [Deborah.L.Birx@[REDACTED] Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative
Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[REDACTED] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [REDACTED]
[REDACTED]cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[REDACTED] Pottinger, Matthew F. EOP/WHO [REDACTED]who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[REDACTED] Kellogg, Joseph Keith K. Jr. EOP/OVP [REDACTED]ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffb9dd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [REDACTED]who.eop.gov]; DeValliere, Ian C. EOP/WHO [REDACTED]who.eop.gov];
Williams, Michael B. EOP/WHO [REDACTED]who.eop.gov]

Subject: HOLD [REDACTED]
Location: WHSR

Start: 4/27/2020 2:00:00 PM
End: 4/27/2020 2:50:00 PM
Show Time As: Tentative

Recurrence: (none)

[REDACTED]

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 10:52:54 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)]<ovp.eop.gov>; [(b) (6)]<cms.hhs.gov>; [(b) (6)]<cms.hhs.gov>; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)]<Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]>; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: Confirmed - Dr. Birx call w/ ACOG/AAP Leadership
Location: Dr. Birx office; 877-628-4681; (b) (6)

Start: 4/30/2020 2:15:00 PM
End: 4/30/2020 2:30:00 PM
Show Time As: Tentative

Recurrence: (none)

Dial In: 877-628-4681

Participant: (b) (6)

ACOG participants:

Maureen Phipps, MD, MPH, FACOG – CEO
Skye Perryman, JD – Chief Legal Officer and General Counsel
Rachel Tetlow, Federal Affairs Director

AAP participants:

Mark DelMonte, CEO
Tamar Haro, Senior Director, Federal and State Advocacy

ACOG/AAP Agenda:

- Opening and thanks (*Mark and Maureen*)
- HHS funding for physicians and hospitals – concerns with distribution (*Mark and Maureen*)
- Immunization rates (*Mark*)
- Continued concerns regarding home birth/birth settings (*Maureen and Mark*)
- Opportunity to partner in the lead up to Mother's Day (*Maureen*)
- PPE & Testing shortages (*Maureen and Mark*)
- Prioritization of L&D for rapid response testing
-

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 4:31:01 PM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)] McGuffee, Tyler Ann A. EOP/OVP
(b) (6) ovp.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]
Subject: Meeting w/ Dr. Birx
Location: Dr. Birx suite
Start: 5/1/2020 1:00:00 PM
End: 5/1/2020 2:00:00 PM
Show Time As: Busy
Recurrence: (none)

From: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]
Sent: 4/30/2020 10:52:54 AM
To: Birx, Deborah L. EOP/NSC [Deborah.L.Birx@ (b) (6)]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov; [(b) (6)] cms.hhs.gov [(b) (6)] cms.hhs.gov; Fauci, Anthony S (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-(b) (6)] Redfield, Robert R (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Hahn, Stephen [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]

Subject: Confirmed - Dr. Birx call w/ ACOG/AAP Leadership
Location: Dr. Birx office; 877-628-4681; (b) (6)

Start: 4/30/2020 2:15:00 PM
End: 4/30/2020 2:30:00 PM
Show Time As: Busy

Recurrence: (none)

Dial In: 877-628-4681

Participant: (b) (6)

ACOG participants:

Maureen Phipps, MD, MPH, FACOG – CEO
Skye Perryman, JD – Chief Legal Officer and General Counsel
Rachel Tetlow, Federal Affairs Director

AAP participants:

Mark DelMonte, CEO
Tamar Haro, Senior Director, Federal and State Advocacy

ACOG/AAP Agenda:

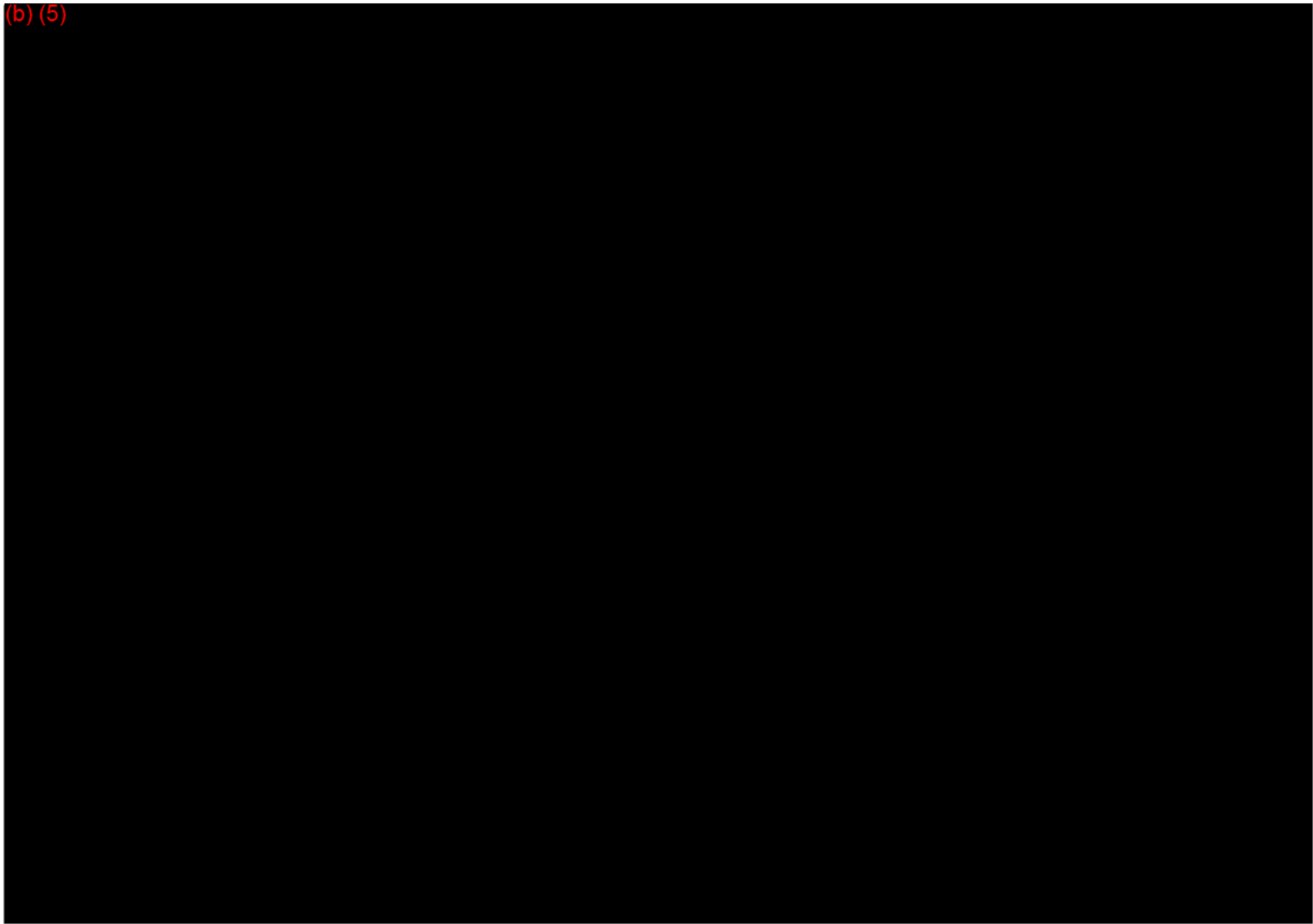
- Opening and thanks (*Mark and Maureen*)
- HHS funding for physicians and hospitals – concerns with distribution (*Mark and Maureen*)
- Immunization rates (*Mark*)
- Continued concerns regarding home birth/birth settings (*Maureen and Mark*)
- Opportunity to partner in the lead up to Mother's Day (*Maureen*)
- PPE & Testing shortages (*Maureen and Mark*)
- Prioritization of L&D for rapid response testing
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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
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L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
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[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
EOP/NSC [Philip.J.Ferro@[(b) (6)]] Kellogg, Joseph Keith K. Jr. EOP/OVP [(b) (6)] ovp.eop.gov];
Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
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Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; Mango, Paul (OS)
[/o=ExchangeLabs/ou=Exchange Administrative Group
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[(b) (6)] [(b) (6)] Kushner, Jared C. EOP/WHO [jck@who.eop.gov]; Boyd, Charlton J. EOP/WHO
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CC: Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange
Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; [(b) (6)] (OS/IOS)
[(b) (6)] HHS.GOV]; Jon Woolfolk [gjonwoolfolk@yahoo.com]; DL OVP NSA EXECSEC
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Fisher, Garrett C. EOP/OVP [(b) (6)] ovp.eop.gov]
Subject: [REDACTED]
Attachments: [(b) (5)] [REDACTED]
Location: WHSR JFK
Start: 4/29/2020 1:45:00 PM
End: 4/29/2020 2:30:00 PM
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Recurrence: (none)

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From: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]
Sent: 4/24/2020 3:10:17 PM
To: Grogan, Joseph J. EOP/WHO [Joseph.J.Grogan@who.eop.gov]; Conant, Ann M. EOP/OMB
[(b) (6)] [(b) (6)] Vought, Russell T. EOP/OMB [(b) (6)] [(b) (6)] Bruno, Grace A.
EOP/OMB [(b) (6)] [(b) (6)] D'Angelo, Gregory B. EOP/OMB [Gregory.B.D'Angelo@[(b) (6)]]
Cytryn, Jen B. EOP/WHO [(b) (6)] who.eop.gov]; Miller, Stephen EOP/WHO
[Stephen.Miller@who.eop.gov]; McGuffee, Tyler Ann A. EOP/OVP [(b) (6)] ovp.eop.gov]; Birx, Deborah
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Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=759a71a9291b47a2bf83b77989d40cc3-HHS-[(b) (6)]] Conrad, Patricia
L (NIH) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=e30cd6224aeb49c795844f43fd78a049-HHS-conradp]; Good-Cohn, Meredith
(CMS) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5e06154b83bb4cb8a7b01816905e1300-HHS-Meredit]; CMS [(b) (6)]
[(b) (6)] cms.hhs.gov]; Sheehy, Janice [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=f45a6c96f5274724a1be5970eb648ff7-JSheehy]; Hahn, Stephen
[/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a0afac0cfa3c4b98913833e38a036e9f-Stephen.Hah]; Holt, Brandon T.
EOP/NSC [Brandon.T.Holt@[(b) (6)]] Pottinger, Matthew F. EOP/WHO [(b) (6)] who.eop.gov]; Ferro, Phil J.
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Williams, Teresa (CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=c32e463e6c48413a9e21cb26fea9251b-HHS-coo4-cd]; Redfield, Robert R
(CDC) [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f1ab650905f424381ffbdd983419fcd-HHS-olx1-cd]; Campana, Alexandra D.
EOP/WHO [(b) (6)] who.eop.gov]; DeValiere, Ian C. EOP/WHO [(b) (6)] who.eop.gov];
Williams, Michael B. EOP/WHO [(b) (6)] who.eop.gov]; Mango, Paul (OS)
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[(b) (6)] [(b) (6)]
CC: Bonner, Maria K. EOP/WHO [(b) (6)] who.eop.gov]; Marks, Peter [/o=ExchangeLabs/ou=Exchange
Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dfbb2b5bd38445cb9c9adca3f72df53a-MarksP];
Woodcock, Janet [/o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7b0453354a9a427db0a66a86c7a36f3d-Janet.Woodc]; [(b) (6)] (OS/IOS)
[(b) (6)] HHS.GOV]
Subject: [REDACTED]
Attachments: [(b) (5)] [REDACTED]
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