Mr. Sainath Suryanarayanan, PhD
U.S. Right to Know
4096 Piedmont Ave. #963
Oakland, CA 94611

Dear Mr. Suryanarayanan:

As noted in our letter dated May 30, 2023, we are processing your request under the Freedom of Information Act (“FOIA”), 5 U.S.C. § 552. Thus far, the Department of State (“Department”) has located eight responsive records subject to the FOIA. Upon review, we have determined six records may be released in part and two records must be withheld in their entirety.

An enclosure explains the FOIA exemptions and other grounds for withholding material. Where we have made redactions, the applicable FOIA exemptions are marked on each record. The records that were withheld in full are exempt from release pursuant to FOIA Exemption 5, 5 U.S.C. § 552(b)(5). The document identification numbers for the records withheld in full are A-00000574644 and A-00000574561. Where applicable, the Department has considered the foreseeable harm standard when reviewing these records and applying FOIA exemptions. All non-exempt material that is reasonably segregable from the exempt material has been released and is enclosed.
We will keep you informed as your case progresses. If you have any questions, your attorney may contact Savith Iyengar, Assistant U.S. Attorney, at savith.iyengar@usdoj.gov. Please refer to the case number, FL-2022-00076, and the civil action number, 22-cv-04359, in all correspondence about this case.

Sincerely,

[Signature]

Diamonece Hickson
Chief, Litigation and Appeals Branch
Office of Information Programs and Services

Enclosures: As stated.
The Freedom of Information Act (5 USC 552)

FOIA Exemptions

(b)(1) Information specifically authorized by an executive order to be kept secret in the interest of national defense or foreign policy. Executive Order 13526 includes the following classification categories:

- 1.4(a) Military plans, systems, or operations
- 1.4(b) Foreign government information
- 1.4(c) Intelligence activities, sources or methods, or cryptology
- 1.4(d) Foreign relations or foreign activities of the US, including confidential sources
- 1.4(e) Scientific, technological, or economic matters relating to national security, including defense against transnational terrorism
- 1.4(f) U.S. Government programs for safeguarding nuclear materials or facilities
- 1.4(g) Vulnerabilities or capabilities of systems, installations, infrastructures, projects, plans, or protection services relating to US national security, including defense against transnational terrorism
- 1.4(h) Weapons of mass destruction

(b)(2) Related solely to the internal personnel rules and practices of an agency

(b)(3) Specifically exempted from disclosure by statute (other than 5 USC 552), for example:

- ARMSEXP Arms Export Control Act, 50a USC 2411(c)
- CIA PERS/ORG Central Intelligence Agency Act of 1949, 50 USC 403(g)
- EXPORT CONTROL Export Administration Act of 1979, 50 USC App. Sec. 2411(c)
- FS ACT Foreign Service Act of 1980, 22 USC 4004
- INA Immigration and Nationality Act, 8 USC 1202(f), Sec. 222(f)
- IRAN Iran Claims Settlement Act, Public Law 99-99, Sec. 505

(b)(4) Trade secrets and confidential commercial or financial information

(b)(5) Interagency or intra-agency communications forming part of the deliberative process, attorney-client privilege, or attorney work product

(b)(6) Personal privacy information

(b)(7) Law enforcement information whose disclosure would:
  (A) interfere with enforcement proceedings
  (B) deprive a person of a fair trial
  (C) constitute an unwarranted invasion of personal privacy
  (D) disclose confidential sources
  (E) disclose investigation techniques
  (F) endanger life or physical safety of an individual

(b)(8) Prepared by or for a government agency regulating or supervising financial institutions

(b)(9) Geological and geophysical information and data, including maps, concerning wells

Other Grounds for Withholding

NR Material not responsive to a FOIA request excised with the agreement of the requester
Maybe I am missing something but the hi-lighted section implies that if RaTG13 and the Pangolin spike segment are the closest matches that we can find to Covid-19, then traces of that "natural" progression should be obvious from samples taken over the last "50 to 100 years."

Senior Adviser AVC SSD/AVC

Disturbing and telling indeed. Great rundown of the fallacies.

You mention that he doesn’t consider or refer to modern genetic engineering technologies. This part jumped out in particular, starting at the 8:43 mark:

“She looked and found just a handful, sounds like a couple of dozen, of mutations between the pangolin virus and the early ones in people. That’s only true if you look at just the right part of the genome, just a little tiny smidge of the genome, like maybe a little part of the spike gene, like the receptor binding domain maybe. Because the pangolin sequences are several thousands of nucleotides different from the ones in humans, and the nearest bat strain is still about a thousand nucleotides different from the one that’s in humans. You just can’t make a thousand changes in a virus. That takes years and years and years of natural selection, maybe something like 50 or 100 years’ worth. So this is not what happened.”

May be interesting to put this to Dr. Quay and others for a fisking.
I found a disturbing video by what appears to be a prominent senior scientist publicly attacking Dr Alina Chan, as well as attacking any consideration of the lab origin hypothesis. Of note, this video seems to capture all the logical fallacies we've seen from scientists and others who don't want to consider any unnatural zoonotic origin:

https://www.youtube.com/watch?v=L-OffPFCS94

Traits I noticed in the video that we've seen before:

- **Dismissing the lab hypothesis as absurd without providing any evidence for its absurdity**
- **No consideration of, or reference to, modern genetic engineering technologies** (or the assumption that such technologies could not have engineered SARs-CoV-2 without it being readily apparent somehow)
- **Gaslighting** (conspiracy theory - "we have some conspiracy mongering", "the usual goofy stuff", we should be focusing on the crisis not trying to start a war by inquiring about the origin...)
- **Incurious** - nothing unusual here with COVID-19, perfectly natural, happens every day...nothing to be gained by finding an origin.
- **No apparent concern for lab safety** or acknowledgement that it should a big concern, once admitting the possibility of a lab leak but immediately moving back to this had to be natural.
- **Appeal to authority** ("she's just a postdoc"..."doesn't know what she's doing" [I have been at this for 24 years])
- **Ad hominem** ("I was not aware of this goofball")
  - **Passive aggressive** ("everyone's entitled to their opinion no matter how wrong" "some [postdocs] are a little rough around the edges ...yeah, I think that's the case here...")

- **Straw man** (using a story by a reporter about Chan, vice one of her papers, to attack Chan for not providing sufficient evidence in the reporter's story)
- **Red herring** (rate of mutation same as annual flu virus - missing the point that if it was a truly natural spillover there should have been a more dramatic rate of mutation!)
- **Still positng the market hypothesis** that even the PRC has abandoned months ago "I guess it could have come from a lab but the initial cases were from the seafood market..."

The last part of the video is particularly telling with regard to what may be motivating this attitude. The speaker implies we should not focus on the origin because:

1. We already/just know the origin has to be completely natural, don't waste time.
2. People are dumb and get mad and it could start a war if we do.
3. We need to focus on other things [even if it came from the lab].
Behind "Dr. Ben's" laughs I sense fear. I have sensed this fear before.
<table>
<thead>
<tr>
<th>From:</th>
<th>(b)(6)@state.gov</th>
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<tbody>
<tr>
<td>To:</td>
<td>Stilwell, David <a href="mailto:R@state.gov">R@state.gov</a>; Feith, <a href="mailto:David@state.gov">David@state.gov</a>; Ortagus, Morgan <a href="mailto:D@state.gov">D@state.gov</a></td>
</tr>
<tr>
<td></td>
<td>Buangan, Richard <a href="mailto:L@state.gov">L@state.gov</a>; (b)(6)@state.gov; (b)(6)@state.gov; Yu, <a href="mailto:Miles@state.gov">Miles@state.gov</a>; (b)(6)@state.gov</td>
</tr>
<tr>
<td>CC:</td>
<td>(b)(6)@state.gov; (b)(6)@state.gov;</td>
</tr>
<tr>
<td>Subject:</td>
<td>RE: Tweet by Chinese Embassy in US on Twitter</td>
</tr>
<tr>
<td>Date:</td>
<td>Sun, 5 Apr 2020 22:56:43 +0000</td>
</tr>
</tbody>
</table>

Sir,
The tweet is still live. Please see screen grab below.

(b)(6)
Subject: RE: Tweet by Chinese Embassy in US on Twitter

I just checked the linked Tweet; can’t see it from my work computer. Can someone check from your phone? If they did pull it down, then what?

From: Feith, David  @state.gov
Sent: Sunday, April 5, 2020 12:33 PM
Timeline elements that we could depict visually:

I’d think all of these could be depicted in single-slide infographics with the right design.

Many more options too.

On April 5, 2020 at 10:35:57 AM EDT, @state.gov wrote:
Stilwell should be looped in. I’m with Richard FWIW — this is a clear violation.

Sent from my iPhone

On Apr 5, 2020, at 9:55 AM, Ortagus, Morgan D@state.gov wrote:
They’ve clearly broken the truce. Reporters will start writing about it soon. I will flag for S
Sent from an iPhone

From: Buangan, Richard L  
Sent: Sunday, April 5, 2020 9:53:59 AM  
To: Ortagus, Morgan D; Stilwell, David R  
Cc: Feith, David; (Beijing); (Beijing); Yu, Miles  
Subject: Tweet by Chinese Embassy in US on Twitter

flagging below which was tweeted out about 40min ago. defer to you Morgan and  if you want to flag for S. I suggest we not let this go unanswered. If we can’t respond from a USG twitter handle, we should ask a reporter or a thought leader to retweet a response using data from Faith’s timeline.

---

Check the timeline of both China’s and the United States’ response to #COVID19. It is very clear that China has been transparent in providing timely updates to the world.

pic.twitter.com/6kgQZ

4/5/20, 09:24

Download the Twitter app

Richard L. Buangan  
Deputy Assistant Secretary  
Bureau of East Asian and Pacific Affairs (EAP)  
U.S. Department of State  
Email:  

Sender:
Recipient:

Stilwell, David R[b](6)@state.gov;
Feith, David[b](6)@state.gov;
[(b)(6)]@state.gov;
Ortagus, Morgan D[b](6)@state.gov;
Buangan, Richard L[(b)(6)]@state.gov;
[(b)(6)]@state.gov;
[(b)(6)]@state.gov;
Yu, Miles[b](6)@state.gov;
[(b)(6)]@state.gov;
[(b)(6)]@state.gov;
[(b)(6)]@state.gov;
Close enough I suppose

On January 13, 2021 at 9:48:54 AM EST, [b](6|)@state.gov> wrote:
Secretary Michael R. Pompeo With Hugh Hewitt of The Hugh Hewitt Show
INTERVIEW VIA TELECONFERENCE
JANUARY 12, 2021
https://www.state.gov/secretary-michael-r-pompeo-with-hugh-hewitt-of-the-hugh-hewitt-show-
&

Excerpt:

**QUESTION:** Now, Mr. Secretary, I personally distrust everything the Chinese Communist Party says and does about the COVID virus that, as you noted, originated in Wuhan. A sidebar first: Do you personally believe it began in a lab there?

**SECRETARY POMPEO:** Still don’t know the answer. Chinese Communist Party has now for over a year refused to allow anybody to get access to the information they need to figure that out. It sounds like yesterday or the day before they may finally have let the World Health Organization enter. I hope, but I’m not optimistic, that they will actually let them do the work that needs to be done: see records, see the lab, see the original work that was done, see – talk to, interview all of the people, not with minders around, but in a situation where those people would be free to speak their mind. I hope that investigation can be thorough.

But I will add it is – I remember initially when I began to talk about the fact that this might well have come from the Wuhan Institute of Virology laboratory, it was ruled as impossible. It is not impossible that that is what happened, and the world must
continue to demand that we understand what took place here for a host of reasons, not the least of which, Hugh, is to make sure that something like this never happens again.

**QUESTION:** Many of our companies have allowed a Chinese information war to be carried on their platforms, attempting to shift the responsibility for the virus. Do you accept any other alternative explanation or are you certain it began in Wuhan?

**SECRETARY POMPEO:** The Chinese Communist Party has offered not one, not two, but at least three alternative theories for where this began. They continue to attempt to obfuscate. Everything that we have seen indicates that this began not only inside of China, but at Hubei province, Wuhan.

**QUESTION:** Does China owe the world reparations?

**SECRETARY POMPEO:** The reality is that the world has seen what authoritarian regimes do. They’ve seen the enormous death. They’ve seen the massive destruction of wealth. There will be hundreds and hundreds of thousands more people continue to live in poverty as a direct result of the economic challenges that the Wuhan virus has foisted upon the world. I think the world will respond to this in a way that recognizes what the Chinese Communist Party did by delaying their activation of the promises that they had made to the World Health Organization, and there will be costs that are attached to that as a direct result of the things that the Chinese Communist Party did.
<table>
<thead>
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<th>&quot;DiNanno, Thomas G&quot;</th>
<th>@state.gov</th>
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<td>(b)(6) @state.gov</td>
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Withheld pursuant to exemption

(b)(4) ; (b)(6)
MRN: 20 BEIJING 186
Date/DTG: Jan 22, 2020 / 221016Z JAN 20
From: AMEMBASSY BEIJING
Action: WASHDC, SECSTATE ROUTINE
E.O.: 13526
TAGS: ASEC, SHLH, CDC, HHS, NIH, CN, HK, PGOV, SENV, PREL, CASC
Captions: SENSITIVE
Reference: A) 20 Beijing 166
B) 20 Beijing 172
C) 20 Beijing 174
Subject: Beijing and Wuhan Core EAC Re Novel (2019-nCoV) Coronavirus - January 22, 2020

1. (Exempt) Summary
(b)(5)

2. (Exempt)(b)(5)
(b)(5)

3. (b)(5)

(b)(5)

4. (b)(5)

(b)(5)
12. **(SBU)** Point of contact is RSO **(b)(6); (b)(7)(C)**

**Signature:**

<table>
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<tr>
<th>Drafted By:</th>
<th>RSO <strong>(b)(6); (b)(7)(C)</strong> (Beijing)</th>
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<td>Cleared By:</td>
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<td>MGT: Munchmeyer, Katherine A (Beijing)</td>
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<td>MGT/MED <strong>(b)(6)</strong> (Beijing)</td>
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<td>Approved By:</td>
<td>A/DCM: Klein, William H (Beijing)</td>
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<tr>
<td>Released By:</td>
<td>BEIJING <strong>(b)(6)</strong> (Beijing)</td>
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**Info:**

- SHANGHAI, AMCONSUL ROUTINE; SHENYANG, AMCONSUL ROUTINE; CHENGDU, AMCONSUL ROUTINE; WUHAN, AMCONSUL ROUTINE; GUANGZHOU, AMCONSUL ROUTINE; HONG KONG, AMCONSUL ROUTINE; TAIPEI, AIT ROUTINE; TOKYO, AMEMBASSY ROUTINE; SEOUL, AMEMBASSY ROUTINE; BANGKOK, AMEMBASSY ROUTINE; VLADIVOSTOK, AMCONSUL ROUTINE; CIA WASHINGTON DC ROUTINE; DIA WASHINGTON DC ROUTINE; FBI WASHINGTON DC ROUTINE; DEPT OF AGRICULTURE USD FAS WASHINGTON DC ROUTINE; DEPT OF AGRICULTURE WASHINGTON DC ROUTINE; DEPT OF COMMERCE WASHINGTON DC ROUTINE; DEPT OF ENERGY WASHINGTON DC ROUTINE; DEPT OF HHS WASHINGTON DC ROUTINE; JICPAC HONOLULU HI ROUTINE; ATLANTA GA, CDC ROUTINE; NATIONAL SECURITY COUNCIL WASHINGTON DC ROUTINE; DEPT OF HOMELAND SECURITY IP
MRN: 20 BEIJING 174
Date/DTG: Jan 21, 2020 / 211259Z JAN 20
From: AMEMBASSY BEIJING
Action: WASHDC, SECSTATE ROUTINE
E.O.: 13526
TAGS: SHIH, CDC, HHS, NIH, CN, PGOV, SENV, PREL, CASC, AMGT, AMED, KPAO, KMDR
Captions: SENSITIVE
Reference: A) 20 BEIJING 166
B) 20 BEIJING 172
C) 20 BEIJING 164
D) 20 BEIJING 142
E) 20 BEIJING 122
F) 20 BEIJING 108
G) 20 BEIJING 74
H) 20 BANGKOK 124
I) 20 BANGKOK 116
J) 20 BANGKOK 78
K) 19 WUHAN 112
L) 20 HONG KONG 50
M) 20 HONG KONG 28
Subject: China Novel Coronavirus: First Cases in Healthcare Workers Raise Concerns of Human-to-Human Transmission

1. (SDD) Summary and Comment: PRC health authorities January 20 announced human-to-human transmission of the novel coronavirus (2019-nCoV) and the first infections in healthcare workers. Officials January 21 also announced additional confirmed cases in Beijing, Shanghai, and Guangdong Province, as well as the first confirmed cases in children. Wuhan health officials announced January 21 that three additional infected patients have died, bringing the total number of deaths to six. China’s State Council announced Vice-Health Minister Li Bin will hold a press conference January 22. Taiwan announced its first confirmed case January 21 and Thailand plans to announce two additional confirmed cases January 22. Embassy Beijing delivered a DipNote to the Ministry of Foreign Affairs (MFA) requesting the PRC to provide all available outbreak information to the World Health Organization (WHO), and for the PRC to support the WHO to make the information available to all member states. Embassy Beijing and CG Wuhan convened a joint Emergency Action Committee (EAC) meeting January 21. Mission China issued an updated Management Notice January 21 and established core coverage responsibilities for the Lunar New Year holiday. Mission China will continue to report on the 2019-nCoV outbreak as it develops and additional information becomes available. End Summary and Comment.
China Expert Concludes Human-to-Human Transmission Occurred

2. (SDU) In a January 20 China CCTV interview with members of the High-level Experts Group of the China National Health Commission advising on the outbreak, Dr. Zhong Nanshan said human-to-human transmission of 2019-nCoV has been confirmed in cases in Guangdong Province (Note: Dr. Zhong is famous in China for being one of the leading medical figures during the 2003 SARS epidemic, when he spoke out against the Chinese government response at the time. CG Wuhan local staff employees note that many Chinese citizens trust Dr. Zhong more than they trust government reports. End note). Dr. Zhong confirmed that health care workers were among those infected. He also said that there is currently no specific antiviral treatment for the infection, but that he did not believe the outbreak is as serious as SARS. A video of Dr. Zhong’s interview was the second-most popular post on Weibo on Monday.

60 New Wuhan Cases; Three Additional Patients Die

3. (SDU) The Wuhan Municipal Health Commission January 21 announced (link, in Chinese) 60 new confirmed cases had been identified in the city since Post’s January 20 cable (ref A). Of the 60 new patients, 33 were male and 27 female, with ages ranged 15 to 88 years old. Among the 60 new cases, 17 patients were severely ill and three critically ill.

4. (SDU) The Wuhan Municipal Health Commission reported one patient who died January 19 had been admitted to the hospital January 18 for severe breathing problems. The 89-year-old male patient had reported underlying conditions, including hypertension, diabetes, and coronary heart disease. Two additional patients died on January 20: a 66-year-old man who had been admitted to the hospital January 16 and had underlying diseases, including hypertension, diabetes, and chronic renal problems; and a 48-year-old woman who had fallen ill December 20, 2019. She had reported underlying conditions, including diabetes, cerebral infarction, and gallstones.

5. (SDU) In total, the Wuhan Municipal Health Commission has to-date reported 258 cases diagnosed with the novel coronavirus. Six patients have died, and 227 patients remain in the hospital, with 12 critically ill, and 51 in serious condition. 25 cases have been discharged from the hospital. The Wuhan Municipal Health Commission also released a list January 21 of designated medical hospitals and outpatient facilities (link, in Chinese).

6. (SDU) China’s State Council announced Vice-Health Minister Li Bin will hold a press conference January 22 on the 2019-nCoV outbreak.

Confirmed Cases Outside Wuhan Increase; First Confirmed Child Cases

7. (SDU) Guangdong Province’s Health Commission January 19 announced 14 new confirmed cases identified in the province (link, in Chinese). The Guangdong Province Foreign Affairs Office also delivered a DipNote to Consulate Guangzhou confirming the 14 cases and providing a list of designated treatment hospitals. Guangdong Province’s Health Commission reported it had confirmed a 10-year-old child had been infected, which, along with the 15-year-old patient
in Wuhan, represent the first reported confirmed cases of children with the virus [link, in Chinese]. Three new cases in Beijing (for a total of five), and one in Shanghai (for a total of two) were announced by the respective health commissions. The National Health Commission January 21 announced 291 confirmed cases in four provinces (270 cases in Hubei Province, five cases in Beijing, 14 cases in Guangdong Province, and two cases in Shanghai), along with 54 suspected cases reported in 14 provinces.

8. (b)(5)

Taiwan CDC January 21 announced a 50-year-old woman who works in Wuhan tested positive for the novel coronavirus in Taiwan [link].

Embassy Beijing DipNote Emphasizes Releasing Data to WHO, Member States

9. (b)(5)

Wuhan Residents’ Concern Grows; Increased Health Screening, Exit Controls

10. [b] CG Wuhan reported the video of Dr. Zhong discussing the human-to-human transmissions had gone viral in the city and caused a much higher level of concern among the population. CG Wuhan personnel observed significantly higher percentages of travelers on the metro wearing masks after the video’s release. Universities in Wuhan began January 20 sending out English language guides to students on how to avoid contracting the virus. Prices of n95 masks in the city have risen 500 percent over normal prices since the outbreak began.

11. [b] MFA Spokesperson Geng Shuang said January 21 that the, “Wuhan government has taken measures to control the flow of people leaving the city.” The Wuhan Municipal Health Commission published an order January 21 announcing that Wuhan city will bar group tours from travelling outside of Wuhan. The Public Security Traffic Management Department will conduct random checks on private vehicles entering and leaving Wuhan to check whether the vehicles are carrying live birds or wild animals.

12. [b] CG Wuhan reported Consulate LE staff went to Wuhan Station (the largest high-speed train station in Wuhan) January 21 and noted several temperature-check stations just prior to the security scanners (figures 1-2). CG Wuhan direct-hire American staff traveling January 21 on domestic flights noted no visual indication of temperatures checks, though there were signs saying that temperature checks were being done. All check-in staff and security staff wore masks.
Figure 1: Health screening personnel at Wuhan Station
Figure 2: Health screening personnel at Wuhan Station
Xi Jinping Comments and Media/Social Media Coverage

13. (SBU) Over the weekend, Xinhua reported that President Xi Jinping ordered resolute efforts to curb the spread of 2019-nCoV. Xi stressed that people’s safety and health is the top priority. He ordered heightened attention and all-out prevention and control efforts to be deployed. China Daily reported that Premier Li Keqiang issued instructions on Monday urging local governments to identify, report, isolate, and treat patients in a timely manner and to promptly and objectively release information about disease prevention and control. Responding to a question about the outbreak on Monday, Foreign Ministry spokesman Geng Shuang said that China had informed the WHO and organizations in relevant countries and regions about the disease in a timely manner and had been in close communication with them. Medical expert Zeng Guang, speaking after Zhong Nanshan at the widely-covered press conference, reminded the public not to go to work or to travel while ill and not to spread rumors. He noted that it was “not only possible but unavoidable” for the number of cases to rise during the Spring Festival period with so many people traveling.

14. (SBU) Additional reporting in Chinese media followed cases that were reported in Guangdong, South Korea, Beijing, and also reported on the fourth deaths (now six) related to the virus. Steps take to prevent the virus from entering Hong Kong were also reported. Media also reported about the eight task forces set up in Wuhan, pledging that the city would promptly and objectively release information about disease prevention and control. Renmin Daily reported that additional suspected cases were reported in Sichuan, Yunnan, Shanghai, Guangxi, and Shandong. In opinion pieces, China Daily voiced some concerns about how the virus had been handled to date and called for full information sharing on the part of health authorities to avoid a repeat of SARS. Global Times promised that the Chinese government will react to this outbreak in a more timely manner than it did with SARS, and advised the Chinese public to look to Chinese media sources—and avoid getting caught up in foreign media sources’ hyperbole. On social media, it appeared that censorship controls placed on topics related to the virus were lifted on Sina Weibo, and three of the top five topics on the Weibo Hot Topics page were related to the Wuhan Coronavirus. In total, the three topics generated 145 million views and 362,000 conversations. Comments on social media conveyed concern about the new coronavirus and appealed to others to practice safe habits and to protect themselves and others.

Mission China Operating Procedures, Awareness Raising, and Preparedness

15. (SBU) Embassy Beijing and CG Wuhan convened a joint EAC January 21 (ref B) to review decision points given the increase in reported cases including those identified outside of Wuhan. The EAC determined that thus far no decision points have been crossed. EAC members concurred that the coronavirus situation is fluid and likely to keep changing. The EAC agreed to continue monitoring the situation and reconvene as needed.

16. (SBU) The Wuhan Consul General held a whole-Consulate town hall on the coronavirus January 21. CG Wuhan has also scheduled a town hall for all family members January 22. The Embassy Beijing Health Unit, and Embassy Beijing HHS and CDC officers are participating in the town halls.
17. Embassy Beijing Management sent an updated Management Notice January 21 to the Mission China community to reflect the most recent CDC guidance. Mission China will continue to coordinate with CDC to issue MASCOT messages to the general public as guidance is updated. The messages mirror CDC guidance on prevention and actions to take if someone has symptoms and/or has been in direct contact with an infected person. The MASCOT message has also been posted on the Mission website. There have been no reports of affected U.S. citizens.

18. The Beijing Health Unit has disseminated information on the coronavirus cases to Mission China regional RMOs/MPs and on January 10 implemented new PCR-based respiratory disease screening capabilities in Beijing. DC MED Director of Infectious Diseases has been in contact with Beijing MED. The Beijing Health Unit also notified Consulates January 21 that Beijing’s new RMO/P is available for mental health support during the outbreak.

19. Embassy Beijing’s Health Working Group continues coordination and management of reporting, outreach, and response on the outbreak. Embassy Beijing HHS and CDC maintain daily contact with the PRC’s NHC and CDC, and with WHO. The Beijing Health Unit coordinates with Mission China regional RMOs/MPs on dissemination of health information and protocols for the clinical management of Mission personnel that develop respiratory symptoms. CG Wuhan and other consulates report on-the-ground developments. The Beijing Press Office coordinates press inquiries to Mission China on the outbreak and ensures all public messaging is consistent with CDC guidance. On messaging to U.S. citizens, Consular manages issuance of MASCOT messages to the general public and ensures messaging is aligned with CDC guidance, while RSO coordinates responses to inquiries from Overseas Security Advisory Council (OSAC) members. Embassy Beijing Management is coordinating with Mission China Consulates to review facility and medical procedures and to be alert for any coronavirus cases. All information collected by the Mission on the outbreak is directed to Beijing ESTH, which disseminates information via front channel cables.

20. Mission China will be officially closed January 24-29 for Lunar New Year. Embassy Beijing has established points of responsibility within the Mission to continue coordination of Mission China’s response during the holiday.
MRN: 20 BEIJING 108
Date/DTG: Jan 10, 2020 / 101052Z JAN 20
From: AMEMBASSY BEIJING
Action: WASHDC, SECSTATE ROUTINE
E.O.: 13526
TAGS: SHLH, KPAO, KMDR, CDC, HHS, NIH, CN, PGOV, SENV, PREL
Captions: SENSITIVE
Reference: 20 BEIJING 74
Subject: As New Virus Identified in China Pneumonia Cases, PRC Urged to Share Data

1. *(SBU)* Summary and Comment: The World Health Organization (WHO) announced January 9 *(link)* that PRC health authorities have made a preliminary determination of a novel coronavirus from a person in the Wuhan pneumonia outbreak *(ref A)*. While WHO congratulated the PRC for identifying a novel virus in a short period of time, international experts are still waiting for PRC health officials to release key data on the outbreak in a timely and comprehensive manner. The PRC’s willingness to release gene sequencing, epidemiological data, and zoonotic findings will test whether the country’s data transparency has matured in step with its virologic research and public health response capabilities. A prolonged delay in releasing data will hinder U.S. and global health officials’ ability to establish diagnostic tools and risk assessments necessary for preparedness activities for a novel pathogen. Based on the data currently available to the public, there are challenges with determining whether the outbreak is ongoing or contained, just as China is on the cusp of the significant holiday travel period around the Lunar New Year. On-the-ground observations indicate Wuhan transportation hubs have not implemented health screening, while local medical contacts report PRC authorities continue to forbid them from providing information about the outbreak. U.S. CDC and Mission China maintain regular communication with WHO, and Embassy Beijing HHS has requested data on the cases and new virus from PRC health and quarantine authorities. Mission China will continue to report on the Wuhan pneumonia outbreak as it develops and additional information becomes available. *End Summary and Comment.*

New Coronavirus Identified

2. *(SBU)* A January 9 WHO statement *(link)* marked the first official confirmation that PRC authorities had preliminarily identified a novel coronavirus as the cause of the pneumonia outbreak in Wuhan *(ref A)*. Chinese investigators conducted gene sequencing of the virus, using an isolate from one positive patient sample. China CDC’s official website linked to a
CCTV article (link) which reported that 15 cases tested positive via RT-PCR (reverse transcription polymerase chain reaction) testing for the novel coronavirus. As of close of business in Beijing, January 10, no additional official statements related to the outbreak have been issued by the Wuhan Health Commission since January 5, nor by the National Health Commission. The three official statements issued to-date by PRC authorities have all come from the Wuhan Health Commission (ref A).

**PRC Urged to Release Data**

3. *(SBU)* The WHO statement lauded China’s capabilities in identifying the new virus, along with its strong public health capacities and resources to respond to and manage the outbreak. However, Embassy Beijing discussions with WHO contacts in Beijing indicate that while the statement highlighted the PRC’s information sharing, only the limited epidemiological information already released publicly in the Wuhan Health Commission statements was likely shared. Contacts added that WHO has also pressed PRC authorities in private meetings to release the genetic sequence data into a publicly available genetic sequence database (e.g. GenBank) as soon as possible, and also release other comprehensive epidemiological information over the next weeks in order to allow for better assessment of the clinical situation and current status of the outbreak. WHO guidance under the International Health Regulations (IHR) for events that may constitute a public health emergency of international concern require WHO Member States to make timely and transparent notifications and provide information, but does not refer to an exact timeline.

4. *(b)(5)*

5. *(SBU)* International virologic experts have also called publicly on PRC health authorities to quickly share data, including in a January 9 article in the influential magazine *Science*. As of close of business in Beijing, January 10, *China CDC Weekly* had yet to publish a report on the new virus. *(b)(5)* informed a U.S. CDC officer earlier this week that an investigator had been assigned to write a report on the outbreak (ref A). Such a report could include epidemiologic data that would be useful for global public health officials. However, it is possible that Chinese scientists will preferentially publish an article including data on the outbreak in a high impact factor peer-reviewed scientific journal.

**PRC Should Release Three Types of Data**

6. *(SBU)* Global health officials broadly agree that three areas of information are key to establishing diagnostic tools and risk assessments for the new virus: 1) Gene sequence data will permit countries and health officials to create diagnostic tools to identify (and rule out) cases; 2) Epidemiological data is necessary to understand the risk of human-to-human transmission, associated exposure risks, and a possible zoonotic source. At minimum, updated onset dates will allow determinations of whether the outbreak has been contained or is ongoing; 3) Animal data, given that the new virus is likely transmitted from an animal to humans, such as
identifying the suspect species, where the animals were sourced, and other places at risk, can help prevent and/or contain further outbreak.

China CDC Senior Expert Heads Laboratory Investigation

7. (b)(5); (b)(6) PRC media reports indicate that Xu Jianguo is leading the laboratory investigation. Mr. Xu is currently an academician of the Chinese Academy of Engineering and was the former Director of the State Key Laboratory for Infectious Disease Prevention and Control in the National Institute for Communicable Disease Control and Prevention of China CDC. He continues to serve as a senior expert for the National Health Commission and China CDC.

No Illness Screening at Wuhan Airport, Train Stations; Medical Contacts Tight-lipped

8. (b)(5); (b)(6) CG Wuhan personnel visited Wuhan’s airport and its three passenger train stations on January 9. They did not observe any type of exit screening (e.g., fever checks) beyond the normal security screening measures (x-ray, metal detector, and manual pat-down for all departing passengers).

(b)(5); (b)(6) confirmed on January 10 that screening procedures at the airport for departing passengers continued as normal, with no augmented check for illness. Consulate personnel arriving via train and plane on January 8 and 9 did not observe any additional screening for arriving passengers and the airport’s permanent temperature screening devices were not in service.

9. (b)(6) said PRC authorities forbade them from providing any information on the outbreak, telling Consulate personnel to “watch the news for updates.”

Huanan Market Closed, Nothing Remarkable at Additional Markets, Locals Unconcerned

10. (b)(6) CG Wuhan personnel visited the Huanan market and confirmed it remained closed. The only people present were private security guards, all wearing surgical masks. Locals speculated the market would remain closed at least until after the upcoming Lunar New Year holiday, which ends in February.

11. (b)(6) Consulate personnel also visited three additional markets where live animals are at least occasionally sold. While vendors at these markets were evasive when asked what they thought happened to the products for sale in the Huanan market, Consulate personnel did not observe any live animals for sale other than fish and one cage of snakes. A vendor at the largest market said some wild-caught fowl and goats were normally available at the market but that authorities had prohibited those sales following the pneumonia outbreak. At a different market, a large section normally reserved for pork sales was nearly vacant. One of the few remaining vendors said there was a lack of customers, so the other vendors had departed, suggesting no pork from the closed Huanan market had been diverted to that market.
12. **(SBU)** CG Wuhan personnel observed that vendors, shoppers, and taxi drivers all said they were not worried about the outbreak. Consulate personnel did not observe anyone wearing surgical masks other than the guards at the closed Huanan market.

**Local Media Reaction and Social Media Discussion**

13. **(SBU)** A *Caixin* article released January 9, but removed from *Caixin*’s website on January 10, reported medical personnel told the family of a confirmed case that “the government is paying for treating this disease.” The same article reported that a clinic had transferred a patient with similar symptoms, but no connection to the Huanan market, to the Jinyintan Hospital handling the outbreak. It is unknown why the article was removed from circulation. No other media reported on new potential cases. The official Weibo account of the Wuhan Internet Information Office released an interview with a medical expert relaying that most of the patients presented a mild to moderate illness, that patients’ conditions were being controlled through treatment, and that some patients had recovered and were discharged from the hospital. Additional media reports reassured the public that transportation networks were prepared for an influx of travelers expected at the start of the Lunar New Year holiday and recommended the public to avoid wild and exotic animal meat.

14. **(SBU)** Chinese social media continues to talk about the pneumonia outbreak, with views of the hashtag *#A new coronavirus caused the mysterious pneumonia outbreak in Wuhan* reaching 360 million and generating 17,000 online discussions. Most comments praise medical researchers: “Compared to SARS, the open, transparent and efficient response is impressive,” read one widely shared comment. Others asked that the Chinese government punish those who spread rumors that the pneumonia was SARS. Additionally, concerns about the disease’s modes of transmission began to dominate comments.

**CDC Strengthens U.S. Domestic Preparedness**

15. **(SBU)** On January 7, CDC headquarters established an incident management structure to prepare for potential U.S. cases and to support the investigation in China or other countries if requested. On January 9, CDC disseminated a Health Alert Notice for clinicians, state and local health departments, and other partners.

**Map of Key Sites**

16. **(SBU)** Map showing Wuhan market sites, infectious disease hospital, and Consulate:
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UNCLASSIFIED
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Withheld pursuant to exemption

(b)(5); (b)(6)
Subject: RE: Tweet by Chinese Embassy in US on Twitter

Sir,

The tweet is still live. Please see screen grab below.

Alys

Check the timeline of both China's and the United States' response to #COVID19. It is very clear that China has been transparent and provided timely updates to the world.

Sent via the Samsung Galaxy S8, an AT&T 4G LTE smartphone