Q: Does ASHRAE’s guidance agree with guidance from WHO and CDC?

A: ASHRAE’s guidance does not conflict with guidance from WHO and CDC.

**The CDC’s position currently is:**

*The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet).*

COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in many affected geographic areas. Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

**The WHO’s position currently is:**

*People can catch COVID-19 from others who have the virus. The disease spreads primarily from person to person through small droplets from the nose or mouth, which are expelled when a person with COVID-19 coughs, sneezes, or speaks. These droplets are relatively heavy, do not travel far and quickly sink to the ground. People can catch COVID-19 if they breathe in these droplets from a person infected with the virus. This is why it is important to stay at least 1 metre (3 feet) away from others....

WHO is assessing ongoing research on the ways that COVID-19 is spread and will continue to share updated findings.*

**ASHRAE’s position is:**

*Transmission of SARS-CoV-2 through the air is sufficiently likely that airborne exposure to the virus should be controlled. Changes to building operations, including the operation of heating, ventilating, and air-conditioning systems, can reduce airborne exposures.*

Neither WHO nor CDC rule out the possibility of aerosol transmission under some circumstances and both recommend the use of engineering controls in some cases and cannot explain all incidents of community spread of COVID-19. ASHRAE’s position that engineering controls to reduce airborne concentrations of viral particles or droplets are warranted to mitigate this risk is not in conflict with WHO and CDC’s positions.