

OMB Control number 0910-0360
Expiration Date 10/31/2026

Paperwork Reduction Act Statement: The Paperwork Reduction Act of 1995 provides that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0910-0360. The time required to complete this information collection is estimated to average 5 minutes per response. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing burden to PRStaff@fda.hhs.gov.

The survey we are conducting is on behalf of the U.S. Food and Drug Administration (FDA).

CDER NextGen Portal Survey)

1. How frequently do you visit this site?

- ☐ This is my first time
- ☐ Daily
- ☐ Weekly
- ☐ Monthly
- ☐ A couple times a year
- ☐ About once a year

2. Which of the following roles best describe you?

- ☐ Regulated Industry or Business
- ☐ Patient or Patient's caregiver, family member, or friend
- ☐ Healthcare provider (includes physician, nurse, physician's assistance, nurse practitioner, or pharmacist)
- ☐ Public Health Professional
- ☐ Scientist, Researcher
- ☐ Educator, Professor, Teacher, or Student
- ☐ U.S. Agent or Consultant
- ☐ Other (Fillable text Box appears)

3. Did you find it easy to navigate this site?

- ☐ Scale from 1 – 5 (Strongly Disagree – Strongly Agree)
- ☐ If below 3 then provide text box to provide more input

4. Did you find the design of this site to be user-friendly?

- ☐ Scale from 1 – 5 (Strongly Disagree – Strongly Agree)
- ☐ If below 3 then provide text box to provide more input

5. Did you find this site visually appealing?

- ☐ Scale from 1 – 5 (Strongly Disagree – Strongly Agree)
- ☐ If below 3 then provide text box to provide more input

- 6. Did you find the navigation between pages of this site to be swift and efficient?**
- o Scale from 1 – 5 (Strongly Disagree – Strongly Agree)
 - o If below 3 then provide text box to provide more input
- 7. Did you experience any technical issues while using this site?**
- o Options: Yes (please specify), No
 - 1. Could you briefly describe the experience? (Fillable text box)
- 8. Was the technical issue reported?**
- o Options: Yes (please specify), No
 - 1. Was the technical issue resolved to your satisfaction?
 - Options: Yes, No (please specify)
 - Could you briefly describe the resolution concern? (Fillable Text Box)
- 9. Do you find this site comparable to other top-tier industry sites?**
- o Scale from 1 – 5 (Strongly Disagree – Strongly Agree)
- 10. What improvements or additional features would you suggest for this site?**
- o Open Ended Response
- 11. Any other feedback or comments to enhance your experience on this site?**
- o Open Ended Response