Appendix B: Demographic Questionnaire

PIN: _______________________
Date: ______________________
Interviewer: ______________________________

<table>
<thead>
<tr>
<th>No.</th>
<th>Question</th>
<th>Answer</th>
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| 1.  | Which best describes the type of organization with which you are currently affiliated?  
  [Read aloud responses] Select only one                                      | ☐ Pharmaceutical industry  
                                      ☐ Biotechnology industry  
                                      ☐ Other (please specify): __________ |
| 2.  | What type of product or products does your company develop?  
  [Read aloud responses] Select all that apply                                | ☐ Drugs, either therapeutic or preventive  
                                      ☐ Vaccines  
                                      ☐ Devices  
                                      ☐ Biologics  
                                      ☐ Combination products (e.g., drug-devices)  
                                      ☐ Other (please specify): __________ |
| 3.  | What is your current role in clinical research and development?           |                                                                                          |
| 4.  | How many years have you been in this role?                               | |__________|                                                                                     |
| 5.  | How many years have you been engaged in clinical research that was conducted remotely in some way? | |__________|                                                                                     |
| 6.  | How many years in total have you been engaged in clinical research?       | |__________|                                                                                     |