



## Biologics & Biosimilars

EARN 1.5 AREAS OF PROFESSIONAL PRACTICE  
NY/NJ CLE CREDIT  
(for both newly admitted & experienced attorneys)

Wednesday, February 5<sup>th</sup>, 2025  
Orrick, Herrington & Sutcliffe LLP

**Mark with an X the appropriate boxes in rating the following aspects of the program facilities.**

	Excellent	Good	Fair	Poor
Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refreshment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Mark with an X the appropriate boxes in rating the following aspects of the program.**

	Excellent	Good	Fair	Poor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eric Choi, MSN Pharmaceuticals Inc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Larry Coury, Regeneron	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Denise DeFranco, Johnson & Johnson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Dow, Boehringer Ingelheim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mira Mulvaney, Eli Lilly and Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colman Ragan, Teva Pharmaceuticals, USA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irena Royzman, Orrick ( <i>moderator</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Areas for improvement and additional comments.**

1. What segments of the program were of most value to you? \_\_\_\_\_
2. What segments of the program were of least value to you? \_\_\_\_\_
3. Comments: \_\_\_\_\_
4. How did you first learn about this program?

NYIPLA Website

E-mail

Social Media

Word of Mouth

Other: \_\_\_\_\_

**Attorney Name (Print Clearly)**

**Attorney Signature**

**Thank you for participating!  
PLEASE HAND IN COMPLETED EVALUATION FORM OR EMAIL TO [ADMIN@NYIPLA.ORG](mailto:ADMIN@NYIPLA.ORG).**