Structured phone interview schedule for Stage 2 App testing

Modified System Usability Scale

1. Would you like to use the app more often?
   Yes   No   Maybe
   Comments

2. Did you find the app hard to use?
   Yes   No   Maybe
   Comments

3. Were there easy parts to using the app?
   Yes   No   Maybe
   Comments

4. Did you need help to use the app?
   Yes   No   Maybe
   Comments

5. Do you think the different screens worked well together?
   Yes   No   Maybe
   Comments

6. Do you think the app would be easy for anyone to use?
   Yes   No   Maybe
   Comments

7. Did the app take a lot of you time?
   Yes   No   Maybe
   Comments

8. Did you feel confident using the app?
   Yes   No   Maybe
   Comments

9. Do you feel you need to learn more information before using this app again?
   Yes   No   Maybe
Multimedia Appendix 3

Comments

Additional questions

10. Do you think you would use the app?
   Yes   No   Maybe

11. Did you have problems with any of the screens?
   Yes   No   Maybe

12. Did you think the app looked good?
   Yes   No   Maybe

12. What did you like least about the App?
   
   1.
   
   2.
   
   3.

13. What did you like best about the App?
   
   1.
   
   2.
   
   3.

14. Do you have any other comments about the App?
   
   1.
   
   2.
Thank you for your time.