

Appendix A – Informed consent form

Usability Testing – Informed consent form

I undersigned _____, to authorize, in date _____, the gentlemen present here, to be able to use the data provided by me (e.g., gender, age, etc...), the recording of my voice and the written notes taken, in order to contribute to a complete conduct of the tests, necessary to make future improvements to the prototype: Medical Reality.

Full Printed Name: _____

Home university: _____

Gender: _____

Age: _____

Year of the course of study: _____

Signature: _____

Date: _____