

## Appendix A – Informed consent form

### Usability Testing – Informed consent form

I undersigned Delia Bellino, to authorize, in date 07/02/2023, 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.

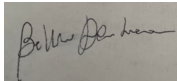
Full Printed Name: Delia Bellino

Home university: Università di Torino

Gender: Female

Age: 23

Year of the course of study: 4th

Signature: 

Date: 07/02/2023