Milla Lintunen
University of Helsinki

Tracking child allergies

Project work, part 3

Design iterations

Problem and user requirements

Allergies can be tested with skin tests and from blood but unfortunately especially child's allergies are not usually found on allergy tests and if test shows no reaction it does not guarantee that child is not allergic to the item. The only way to find allergies is to avoid certain foods and ingredients and then test what symptoms each of them end up causing. Many people end up keeping food diaries, some on paper and some on computer (for example in Excel) and some in existing applications. Symptoms might range from rash to gastrointestinal tract and have long delays sometimes before appearing. As a whole there are many factors affecting solving causes of allergies and forgetting some things might mess up the whole investigation and cause misunderstanding the patterns of allergies.

Researching how different situations and features of child's allergies affect when making documentation, was found out that recordings and documentations differ quite much depending on situation. Some children have more difficult or complex allergies that require documentation really detailed. Some people only need to document by and large eaten food items as others need to record every ingredient and spices. When breastfeeding, mother needs to record her own eaten ingredients and after baby starts to eat solid food there might be need for two separate listings as well as some needed recordings of medications and needed vitamins. Many participants were missing clear lists for allergy doctor on eaten ingredients and symptoms that would keep updated. Many were missing summaries of eaten ingredients and symptoms inside certain time range. Prediction if something seems to be causing symptoms regularly seems to be problem and very onerous task.

Finding out why tracking allergies are sometimes taking long period of time, it turned out that forgetting to document all relevant factors due to missing paper or booklet at that time for example is a major reason for failing tracking the allergies. Also people struggle finding out connection between ingredient and symptoms. One really challenging factor tracking the allergies and why people feel failing it is amounts of foods. Some children had suitable ingredients in small amounts and not too often but bigger quantity caused symptoms.

When looking at the time range, where people are investigating some food ingredient to cause allergies or symptoms it varies from few hours to weeks. Some people also are needing to see some listings a year back and they will get lost easily if recordings are only on paper. It is important to be able to check and notice individual time in which symptoms might appear from having certain food.

When someone is making observations of what might cause allergies to their child, factors and details relevant investigating the cause are found to be sometimes also in the amounts of food. For some children small amount was suitable but with bigger portions of food, they would not tolerate it anymore. Storing images is relevant to be able to show rash at the time to the doctor or compare images between some days. Some certain symptoms were repeatedly occurring but it was child dependent what symptoms those were. Few symptoms like rash, stomach ache and loose stools were common and needed to be documented most often. One important thing is the ability to add items that need documentation regularly to listings fast and easy.

Interactive system design and starting point

Application at this point will be designed as mobile app by appearance of the prototypes. There could be also future implementation of the web application which would be quite similar according to layout

(functionalities the same) but when tracking allergies, mainly used application type would be mobile as mobile phone would be easily available and carried everywhere so documenting symptoms, ingredients and possible medications or notes could be done immediately and would not be that easily forgotten. Sketches, wireframes and interactive prototype are made in Finnish so that users interviewed can observe them with their own language and with the language that this app is meant to implement. There are more English apps and not Finnish allergy tracking apps so language choice of the application was clear also in a sense that it would serve Finnish parents better.

Design iteration 1

Goal of this design iteration is mainly to set basic frame and to find out how the basic functionality would be good to implement and design what possible choices there should be made in setup. Goal is to find out functioning structure of an application. It is beneficial to find out and design hierarchical model of the application and to see how options could be handled.

Research questions to be asked are “Is there all the functionalities and views needed so it would work listing and trying to track allergies?” and “How much of a customization would be needed?”. Also one important question is “What all features and options would be there by default and what would be added and modified after if needed?”. Answering these questions will guide starting point and with main setup of the application. Also answers will provide information of the complexity of the application so that it would suite for various needs. At this stage focus was a bit but not that much on the event flow.

Two different (some differences) sketches were made of main functionalities. Quite complex ideas and functionalities with different options are hard to articulate only with words but at first there should not be spent too much time presenting the basic idea. That is why quite quick sketch might suite best for the iteration 1. Being fast to implement with the sketch in iteration 1 also offered the possibility to make 2 sketches differing a bit taken into account time limitations. Sketch prototype has the main functionalities and options drawn. Some of the setup options and locations of the functions differ a little. This sets a good starting point also for conversation and new ideas while discussing with users. Sketches can be seen in attachment 1.

Method used in iteration 1 was focus group. Focus group had 3 participants with different kind of situations (for example one with really allergic child, one with child not that severe allergies). Meeting was carried out with a short online video meeting and pictures of the sketches were sent to participants. Reason for this type of meeting instead of meeting live was the current Covid-19 pandemic situation. Reason for choosing focus group with the sketch is that using both images and words to ask questions and discuss about them allow better understanding of user expectations and also what user would prefer. This way it was possible to share information and see options and also enable better discussion and deeper understanding of the necessary actions and options. With focus group many different kind of point of views were provided and discussion of the possibilities were carried out.

In the focus group discussions, it turned out that all participants needed to list symptoms and also at least some medication. One participant listed only new food items when they tested it but needed still list of suitable ingredients for the child. Other participant listed all the foods eaten each day and with quite specific information. She needed to list all the ingredients extra carefully and her lists of certain food items were sometimes repeated often so she definitely preferred sketch 1 option to record static food items with lists to choose quickly. Other participants thought that it would be good feature and maybe would not bother being in the application when adding foods to lists even if not using it. All the participants still thought that they would use it with quite big probability. Only one participant needed to list for her eatings too because of breastfeeding and others felt like it would bother a bit if application would have that kind of list as a default.

That lead to conversation that all kinds of lists would not be in the application by default but list could be added by the need. Lists that all would use with high probability could be there by default. It turned out that all wanted adding new symptom and food options to be directly available and preferred the sketch 1 option that it would be easier to add new lists from current listings than searching the option from the settings.

All participants felt like there seemed to be all the main functions needed to keep really basic documentation and seeing listed items. Most important thing is to be able to add often occurring items fast and directly from main view. Adding lists to suite for each individual needs like in sketch 2 and not all being default like in sketch 2 was preferred. Option that lists should be seen separately but also all together for some day was important. So with the question “What all features and options would be there by default and what would be added and modified after if needed?” and “How much of a customization would be needed?” were quite clear that the more that could be customized would be good as some might be bothered if there is already breastfeeding list as a default for a mother. By default listings of food, symptoms and medication were felt like needed always and thought that at least could not bother anyone being there by default. Still it was agreed that deleting option for any list would be good to have. On summary view one participant pointed out that they do not have ‘not suitable list’ as they have only approximately 15 suitable ingredients so they would not do anything with that kind of listing and would need summaries and list rather on foods that are’ only suitable’. Customization and saving food items that would include list of ingredients so that those would not have to be listed separately every time but would still be found in the listings of eaten ingredients would be probably needed with many users but if the option would not be centered of the system or mandatory to use this functionality would not bother anyone.

Design iteration 2

Goal for this design iteration is to find out with a bit more detailed how is it possible to carry out design that would fit varying needs. Goal is to investigate is the application effortless and easy enough to use daily and what options are clear and easy enough and user-friendly. One challenge it that there are many different things to consider tracking allergies but the application should be simple and not having too many steps so that documentation would be easy during all the routines and everyday life tasks with children. One research question is “Is all needed features for documenting fast and easy enough to use in daily life?”. One thing that was not focused on iteration 1 and now wanted to be answered is “How is the event flow and should some features or moving in the application be located differently?”. This iteration focuses a bit more on details and how it might be possible to design application to fit various needs as much as possible.

Prototyping technique of this iteration was wireframe. It was chosen for easy and clear presentation of the interface and for the event flow and possible options before designing them further. It shows planned content and intended actions, available features and transitions between views giving more clear idea of these. With wireframes, point is not to design colors of images but rather functional features and aspects like text inputs, selection fields and adding options. Decision based on iteration 1 was made that by default there would be 3 lists (symptoms, food items and medication) and other lists could be added from current listings view. Also based on discussion after login there would be directly possible to add either symptoms, ingredients or medications to their own lists. On listing view there is possibility to select listings individually or together based on day. On the settings view it was added the option that instead of ‘not suitable foods that cause symptoms’ list one could use ‘only suitable’ listing as it was situation with one participant as discussed in iteration 1. This selection also serves more people with different situations without adding too much complexity to the application. Wireframe design is visible as an attachment 2.

Method for this iteration was semi-structured interview (3 people). Two of the interviewed participants were the same as in iteration 1. There were few reasons for choosing some same people to be interviewed; one was

the availability of them and willingness to participate, other one being convenience of arranging the interview and last one being that people were already familiar with the subject and application start point of view. One interview was carried out online and picture of the wireframes were sent directly to the participant to be examined. One interview was fulfilled live and one was implemented with chat and participant answered questions and follow up questions through chat messages. Reason method being interview was that many different point of views were wanted and that follow up questions would be possible. Also involving few different people could provide new point of views and different opinions. Each interview could be arranged at the time that is suitable for each participant and not having to search common time slot for all at the same time like in focus group.

First in interview there were quick introduction of all the frames and intended functions in them. It was explained that some parts like creating reports is not complete. Participants were asked to think about main functionalities and would it be easy to do daily required tasks and was some things not clear or maybe missing. With question 'Is there some things that are not clear?' one participant mentioned, that round buttons with multiple choices in wireframes bothered her as they should be square. One participant thought that when adding symptom, food or medication it was a bit unclear what was the point of the empty box after the dropdown (where user should have inputted new items not in dropdown). When asked was that 'Would you explain in your own words is there some functionalities that you would miss or seem to be missing?' one thing mentioned was that listing and directions of lists were wanted to give for example grandmother when she comes babysitting. It was mentioned by one participant that when making custom listings of the food item, one might need also list the 'might include' food item lists. It might be good extra option and that those 'might include' ingredients could not be added to normal listings. Also was thought, that medication now seem to able to add quite easily and adding them to dropdown list helps but participants mentioned that most of the vitamins or medication should be given daily so static listing of them and even more easy marking that those medication is given would made use easier.

One thing monitored and would liked to have as an option was that one could see if child has been in daycare. One participant though it might bother as an default option when she was asked about this in other interview. With question "Do you think that when thinking of usability some functions would be in the wrong place?" was found out that notes and not suitable food items and medications listings together caused bit confusion. Available space of listings and options in main menu and also when adding own notes was wondered that there would be good having scrolling options. (Those were planned but not included in wireframes). Also when there is need to add new list in addition to food, symptoms and medication, was thought that it is not needed often (maybe once or twice) and seeing it directly as an option in lists was bit confusing and it might be just added as a link. With question "Do you feel it is easy to add symptoms or foods the way wireframes suggesting?" was found out that it does not have too many steps and all of those are needed. Basic functionalities seemed good for all participants.

So for research question "Is all needed features for documenting fast and easy enough to use in daily life?' there were some additional functionalities (daycare day, might include list, listings for babysitters, easy adding of daily medications) that was needed and could be added for iteration 3 design. With the question "How is the event flow and should some features or moving in the application be located differently?" seems that most of the basic functionalities are quite well located and some listings (like notes and not suitable food item -lists) could be just separated so more views should be added.

Design iteration 3

Goal of this design iteration is to find even more specific details and functionalities needed and most importantly find out is it easy and clear for user to navigate in the application and what is causing problems

or confusion. One goal is to see if added adjustments and clarifications seem to work when users actually use the application and have more realistic experience of the functions. In this iteration one research question was ”Is there all needed operations and functions that the application would be useful for the user in their everyday life?”. Other research question “Is application easy enough to use having all needed directions so that functionalities can be find easily?”.

Prototyping technique of this iteration was interactive prototype which was implemented with Proto.io. Reason for choosing this was that users could test the application usability and get quite realistic idea of the system. This way important information would be gotten from user interaction and how they act in demonstrated scenarios. Interactive prototype was implemented with more details and some changes and also with new functions which most of them was discussed in iteration 2. Notes were separated as their own views after discussion and also daily repeated medications were added that could be set to the list and then just with few clicks mark as taken for that day. There is now included possibility to customize this option to be added to main view. There was also addition that made adding medication, symptom or ingredient more clear, that before dropdown or text input box, there is little instruction given. Also addition that you can modify and delete saved food listings was made and it can be navigated also straight beside the dropdown. Notes and not suitable food items adding possibility was added to main view. Change to the starting view was made that login is possible first and below there is information and button that enables registering if not done yet.

Option to the settings where user can select does user want to monitor weather child has had daycare day or not was added. If it would be checked, there would be option to be seen in reports and documenting daycare/ home days could be done easily. Also some information labels were added to the prototype. For example interactive prototype announces when addition of medication or symptom has been made and that they have been successful. Adding a new list option (for example for mother when breastfeeding to keep record of her eaten food items) was moved to settings and there was added ‘controlling list’ link in the listings view. Example video of the interactive prototype is attached separately. It is also visible in GitHub (https://github.com/millalin/tracking-child-allergies-app-design-/blob/main/attachments/allergy_app_demo_video.mp4). Pictures of the interactive prototype views are also attached and can be found as an attachment 3.

Methods chosen for this iteration were heuristic evaluation and cognitive walkthrough containing afterwards interview questions. Reason for choosing cognitive walkthrough was that it reveals users ability to really navigate in the interactive system and to understand learnability of the system. It reveals how easy the interactive system is and gives the user and observer good understanding does the application have all needed directions for user to navigate easily and can the functionalities be found. Also it provides information is some manual needed or is everything clear by just looking through the application. Cognitive walkthrough provides good user perspective and possible answers to research questions. Heuristic evaluation was also chosen for looking at different point of view using a set of heuristics can help identifying other kinds of usability problems or what is still missing from the interactive system design. It was chosen to give additional information and to support findings found out with cognitive walkthrough.

There were 3 persons participating, two of them remotely. One person was given the interactive prototype link which could be opened with phone or computer (phone was used). Participant was asked to do tasks and actions were monitored. Participant was asked to tell what she sees and how and she would choose the things she does. After all the tasks participant was asked questions. There was possibility to get link of created interactive prototype so it could be sent to participants. 2 persons were given the link and they used the application interactive prototype remotely so direct observation was not possible. Participants were sent instructions and list of tasks (same as for participant doing them live) and asked to test the prototype. They were asked to comment each task. After they had had time to test prototype they were also sent the same questions than to the first participant. Tasks and the questions are available in attachment 4 (in Finnish in the same form as they were given to participants).

Most of the tested functionalities were easy to find and most tasks were executed successfully and participants reported not having any problems. One participant struggled to find a bit for the adding new list option. Some level of little delays were occurring in the prototype but was understood that it was part of it. All participants wondered about missing ‘save’ button in settings view so that should be definitely be added so that user feels sure his/her changes are being saved. Also some options that were in settings were a bit hard to find at first like changing to only suitable lists but was also felt like it still belongs to settings.

When creating new lists, some of the selection options were found odd (like slider option) so naming conventions might need some clarification in that screen. One important note that was missing from the prototype was that medications needs to be able to add with more specific amounts (like 2,5 ml). Also one participant needed to list food item amounts with more specific details and that could be added like in medication (like 120 ml of infant formula). Also it might be better for understanding to add some scale to the slider with the amounts like from 1 to 10. With the given tasks overall still all the basic functionalities and daily done tasks were found easy to find and good to execute.

With answering the questions, some answers were bit more related to prototype tool itself than the functionalities like delays when pressing the button and items not added to lists in the prototype. There were confusion with button naming, some being ‘add’ and others ‘save’ so that could be standardize. Missing things were mainly related to reporting view which only had selections and was not showing fully what all reports would include. Some other orderings of the functionalities was suggested to the main view and link to the screen where one can see today's added information was missed. In these also were suggestion of that daycare option would not be first in the main view but it was notable that participants had different opinions concerning the order of the main view items. When asked anything extra, participants found nothing special and changes requested included some links like from main view to listings directly and grouping options for the lists.

Heuristic evaluation can reveal small violations and lower the amount of usability issues. It was chosen to be made at this point because there are enough things on which to do validation with but early enough that things could be changed easily before writing any code and it was made myself concerning each checkpoint state that one should consider in the interactive system.

Concerning visibility of user status there is some information to the user for example when the addition of the medication is successful. These could be added more when the real implementation is made (not added more to the prototype due to schedule issues). Also information label could inform the item that was added (“Adding medication <medication_name> was added successfully”) so that confirmation that right thing was added would be visible to the user. Matching the system to the real world all topics seem to be quite basic language and there is no addition of too much medical words. For user controlling especially when deleting lists it is really important to make sure it is carefully informed and checked that it is really wanted and still in the end there is possibility to undo deletion. On the smaller things it is not that relevant and should be considered if one word deletion check would be bothered or not. That ‘undo’ option could be added also to some deletions like notes. There was missing save button from the settings that should be added. Concerning consistency and standards, all buttons could be labeled as ‘save’ and not use ‘add’ on some. There is no error prevention added to prototype if trying to save for example empty note. Of course when user is failing to log in there should be add pop up questions (“Not registered – register.” and “forgot username or password?”) and directions to follow through. Register button is clearly visible though below login.

Basic functions and adding buttons have been made available to the main view for easy and fast usage. Implementation allows user to check their added actions so that they don’t have to remember too much and can focus on just remembering to document. Option to the settings that would remind of some medication if user would want and could check them taken approving it would ease users life. Users can learn application by using it and not needing too much before information to remember. With the flexibility and efficiency of use users are able to customize some settings and features and create their own lists. Many basic functions are available right on main view and don’t need that much of a shortcuts. Added function daily reminded

medication (possibility as an option) could be one shortcut that they would be added taken just from reminder message.

Design manages to provide quite well minimalist and aesthetic design and many views are as simple as it was possible to implement. Some views were separated and that made things more clear. Thinking of help and documentation some users that are only starting their documentation with allergic child might need some guidance what and how it would be good to execute. The application itself could clarify some of the options that are available (like keeping list of daycare days or what would be effect of selecting hours when symptoms usually occur). Directions and documentation could be found on sliding menu. Still most of the functionalities are quite self explained and all users testing these (knowing already something about what they are needing to document their child's allergies) did not need additional documentation.

Discussion

Problem of tracking child allergies is hard to solve even with many kinds of help. This design manages to solve the problem of keeping clear listings and separate them and seeing them also together when tracking child's allergies. If selected, listings are able to see separately and by date. Also it solves the problem of having lists at the same place and with easy adding functionalities it helps to remember keeping the records and also not loosing them. Addition of symptom of food item is fast and can be done with just few clicks. When customization is in use and done, most used symptoms and food ingredients are really fast to add to records. One can click daily used medications as taken and can use those list also for example during antibiotics (customizing the list) keeping note that the medication is taken that day.

There are some functionalities that does not seem to be in other applications. One difference with the existing solutions is the ability to customization of the lists and adapting to users specific needs. For example there is possibility to list mom diet separately when ingredients transferring through breastfeed has to be monitored or create separate sleeping monitoring list. At the same time in the listings of ingredients one can add repeatedly added foods to dropdown to fasten the listing process and also add whole food items with name and ingredient listings (also including ‘might include’ ingredients) and then after creating food item listing all the ingredients easily each day its needed. This way when comprehensive listing of ingredients eaten is needed, all of them are listed and available for observing and trying to solve the cause of symptoms.

Application and design would still need some improvements on AI and suggesting repeating food-symptom combinations. It now has the basic setting that user can define in that time symptoms appear. It could also be improved by adding options to remind of medications and needed recordings if wanted. Also adding the images is not fully designed and categorization of images and connecting them to symptoms needs enchantment. In addition to these, findings from iteration 3 should be added or changed. Supporting many users similarly so that for example mother and father can observe and add items to lists similarly is important as well as saving all the information ensuring it has backups and documentation not only stored locally.

Biggest learning on the process is the importance of iterations and designing before any coding as prototyping is more effortless way of finding usability issues more detailed before investing a lot of time in software development. One really important new field to be tested was interactive prototyping tools and how much of a help those are observing the user experience and getting important information before you have to write any code. Users also have tendency to have a bit of disagreements and different opinion so it is challenging but important to find those things that need to be implemented and on what aspect you will design details. Still having many iterations, observations and points of views the design will become more clear when time passes. Finding out and understanding user requirements and focusing also on usability has a big role on succeeding in designing interactive systems.

References:

Interactive prototype: https://proto.io/

Heuristics: https://www.nngroup.com/articles/ten-usability-heuristics/

University of Helsinki, course Human computer interaction slides and lectures

www.allergia.fi

Discussions with child allergy doctors

www.allergialapset.fi

Attachments:

Attachment 1:

Iteration 1 sketch 1 and sketch 2

Attachment 2:

Iteration 2 wireframes

Attachment 3:

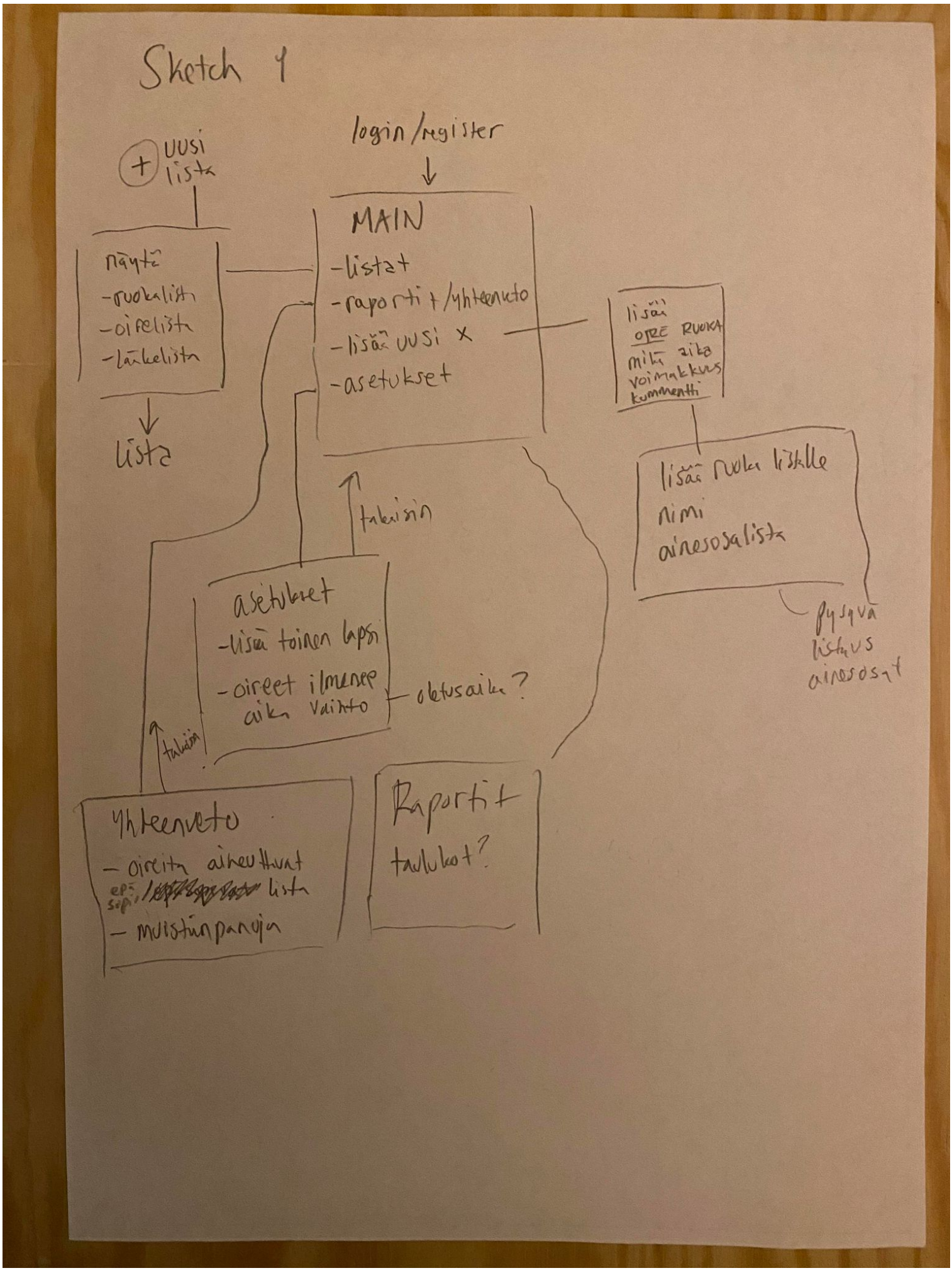
Iteration 3: Interactive prototype screens

Attachment 4:

Iteration 3: Cognitive walkthrough tasks and questions afterwards

Attachment 5:

Separately attached introduction video of interactive prototype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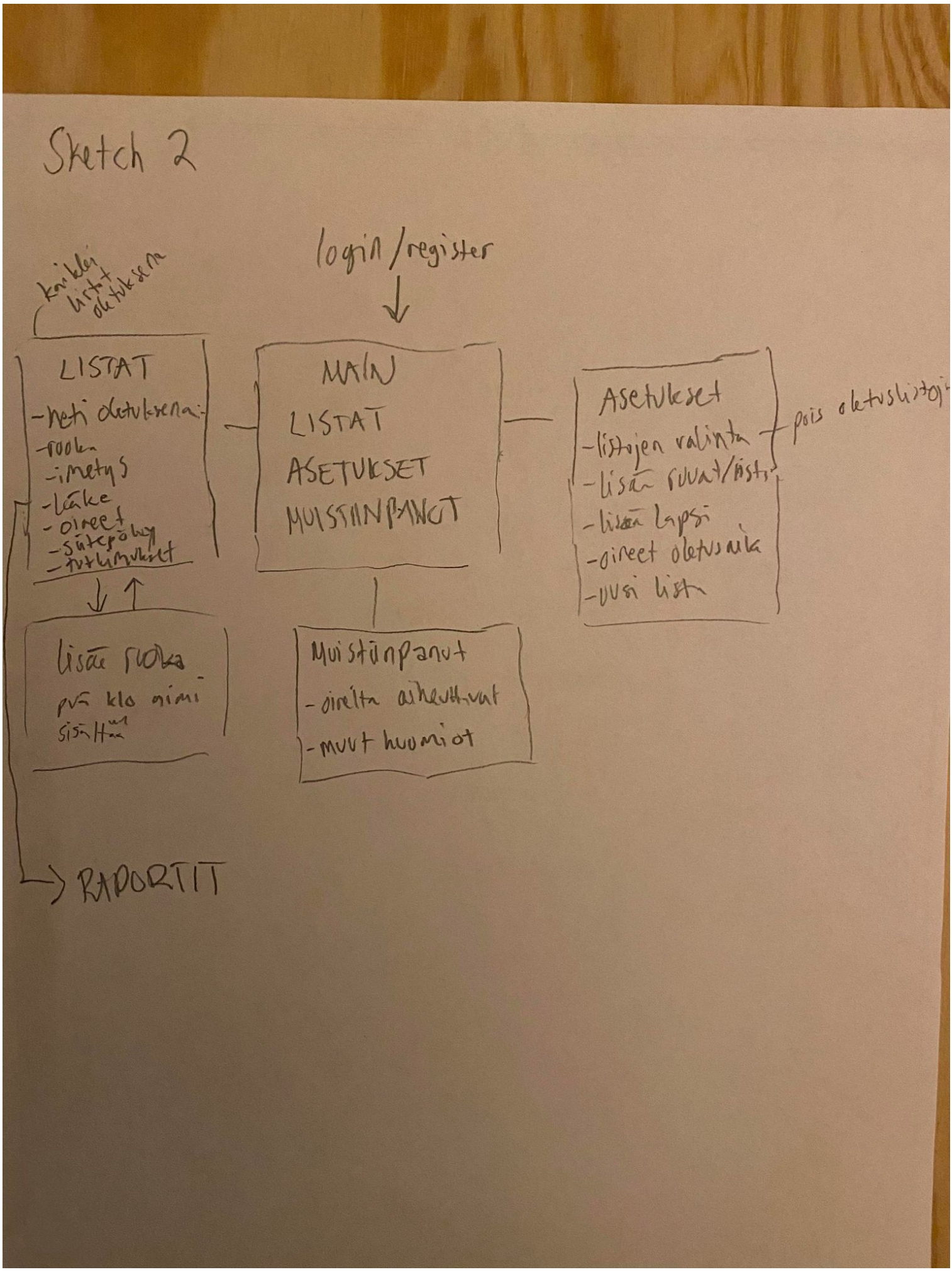
Sketch 2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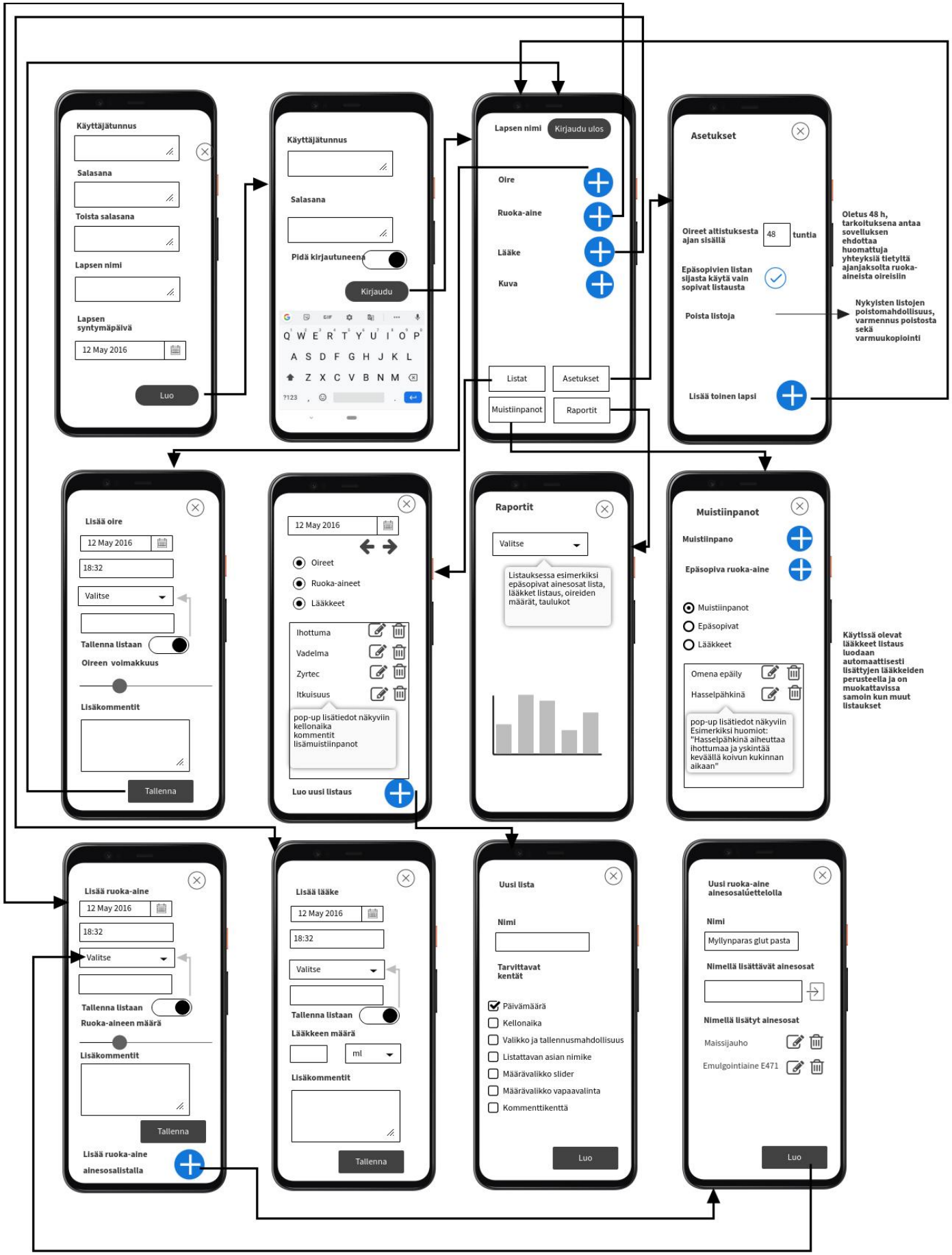
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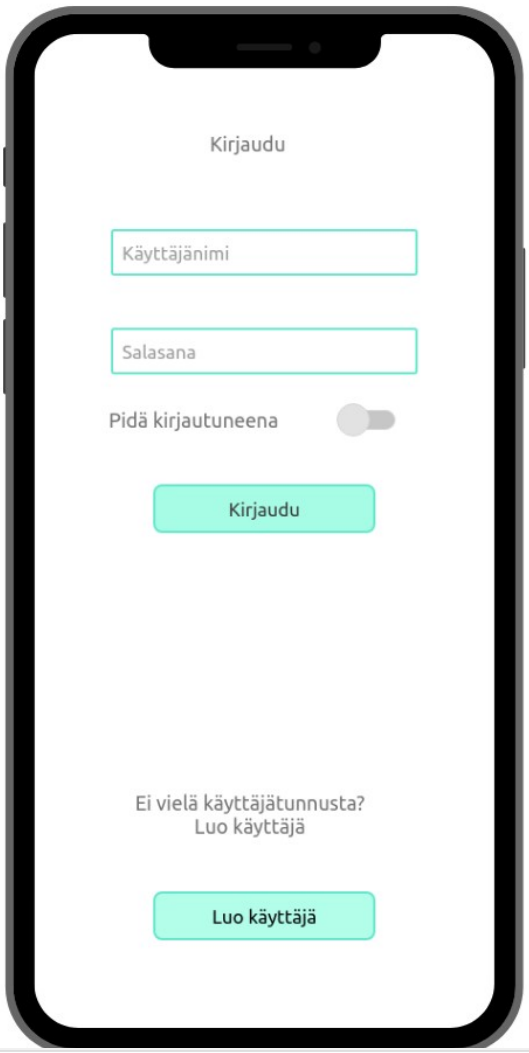
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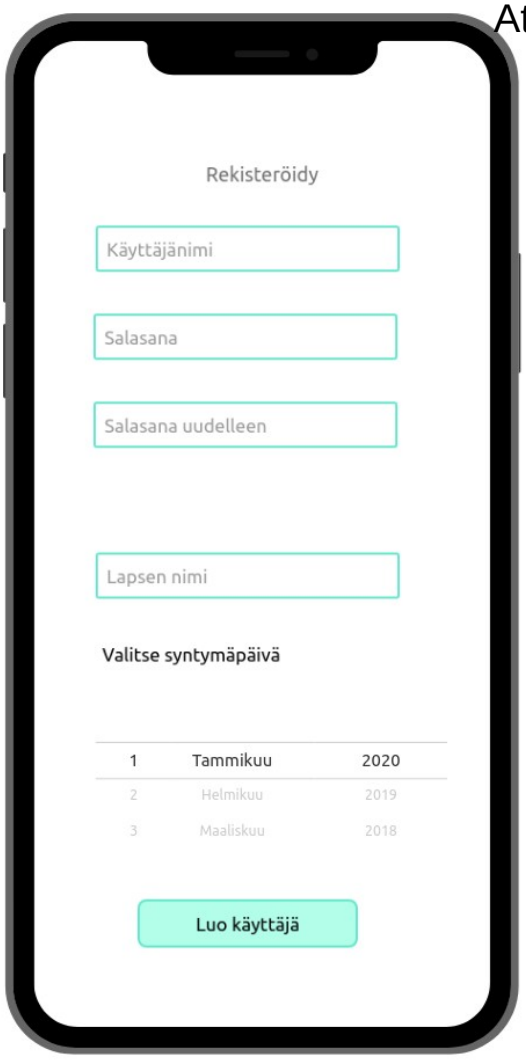
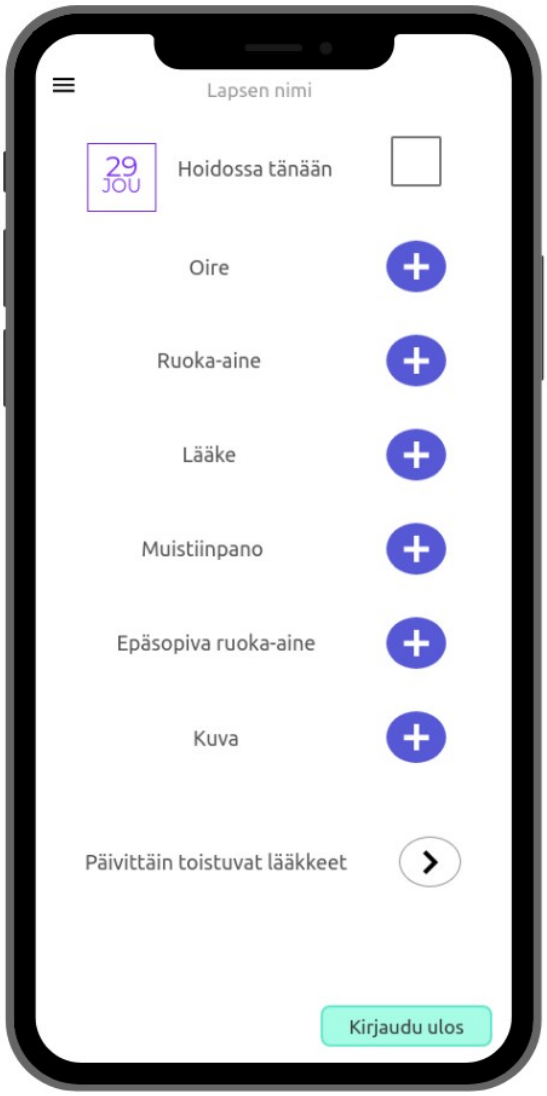
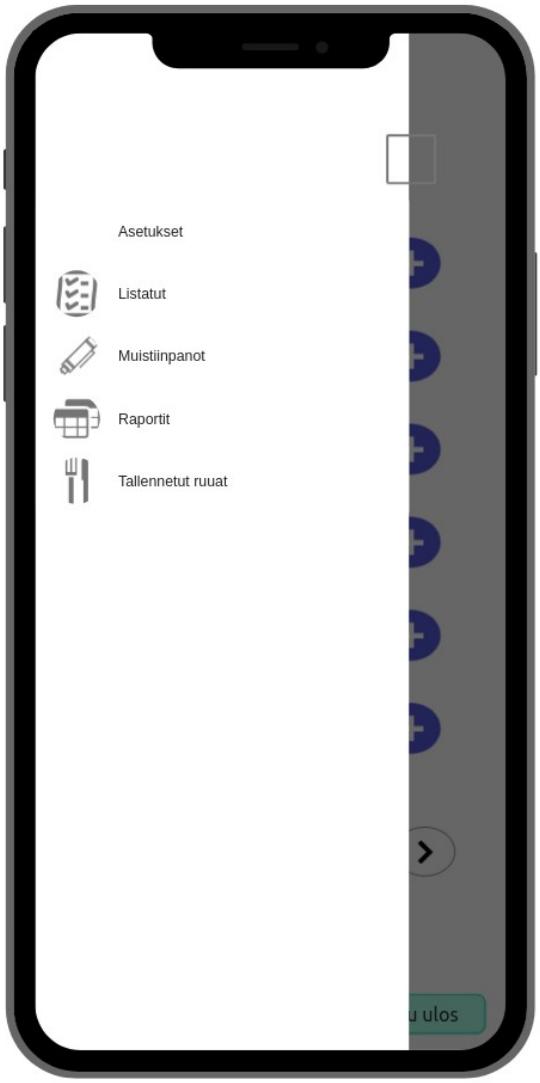
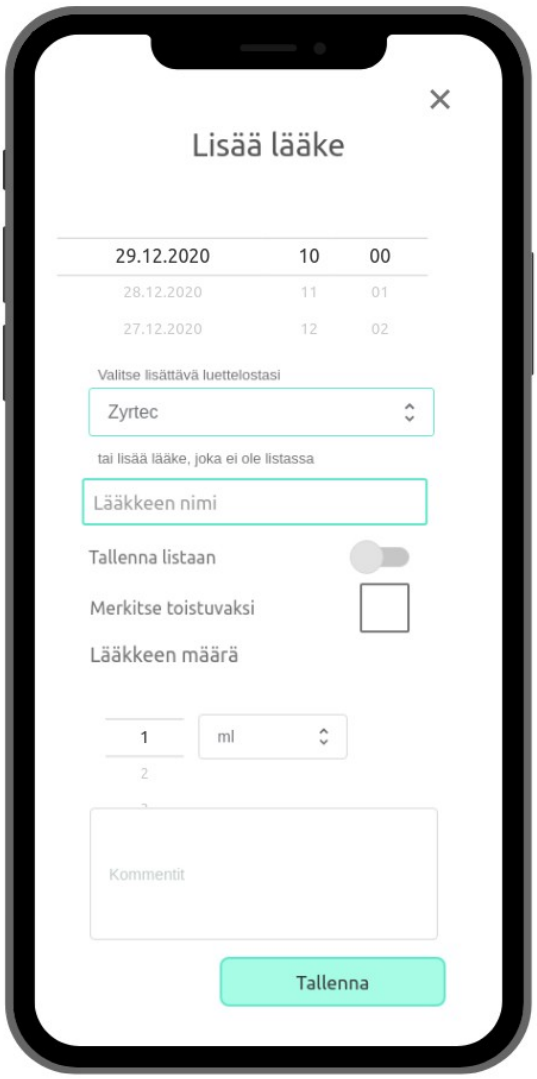
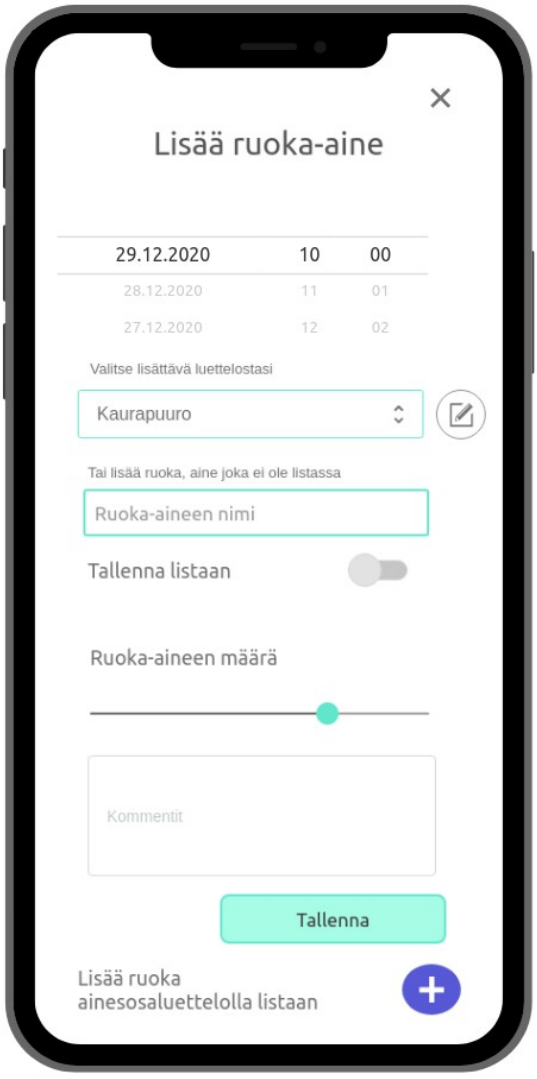
Luo käyttäjä
Luo käyttäjä

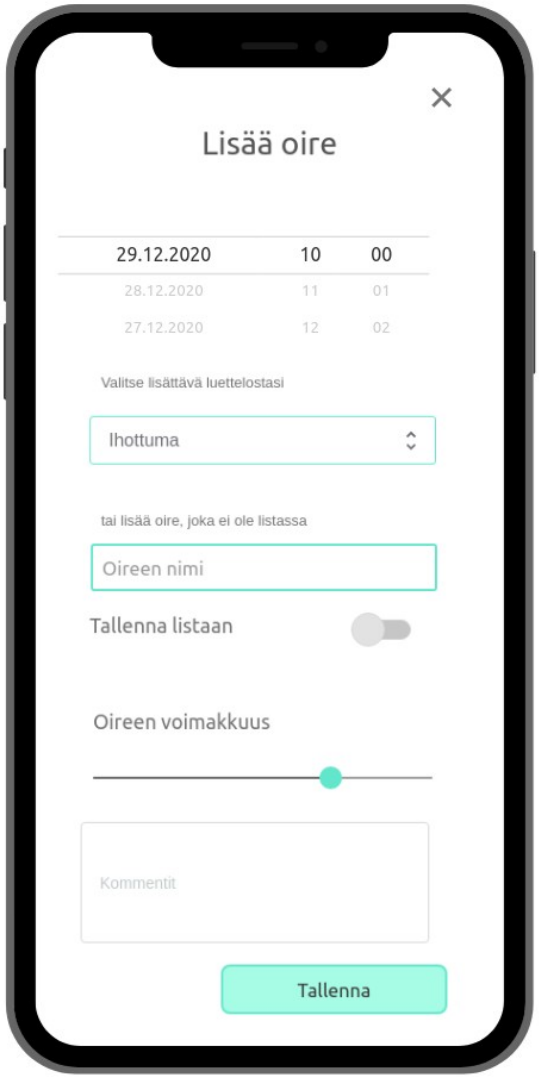

Rekisteröidy
Käyttäjänimi
Salasana
Salasana uudelleen
Lapsen nimi
Valitse syntymäpäivä
1 Tammikuu 2020
2 Helmikuu 2019
3 Maaliskuu 2018
Luo käyttäjä

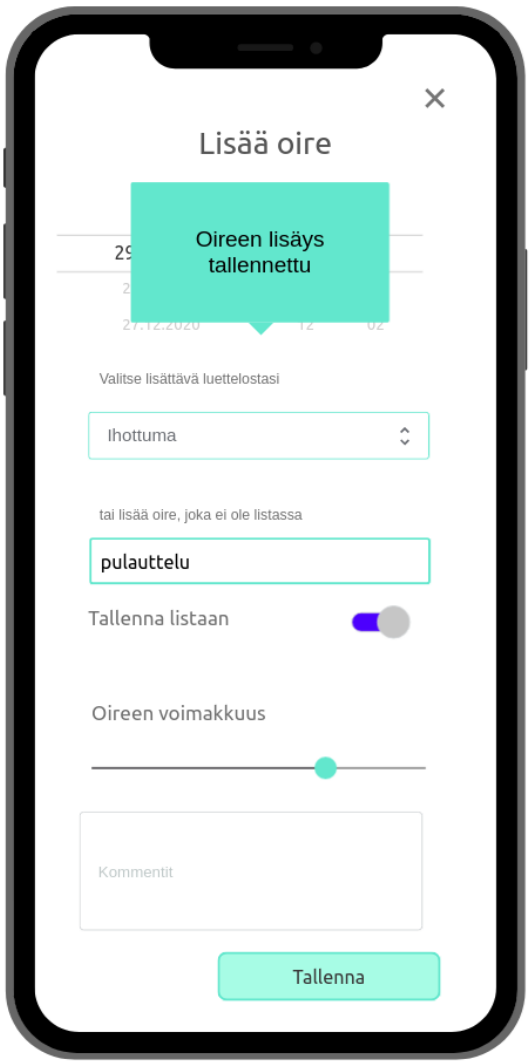

Lapsen nimi
29 JOU
Hoidossa tänään
Oire
Ruoka-aine
Lääke
Muistiinpano
Epäsopiva ruoka-aine
Kuva
Päivittäin toistuvat lääkkeet
Kirjaudu ulos

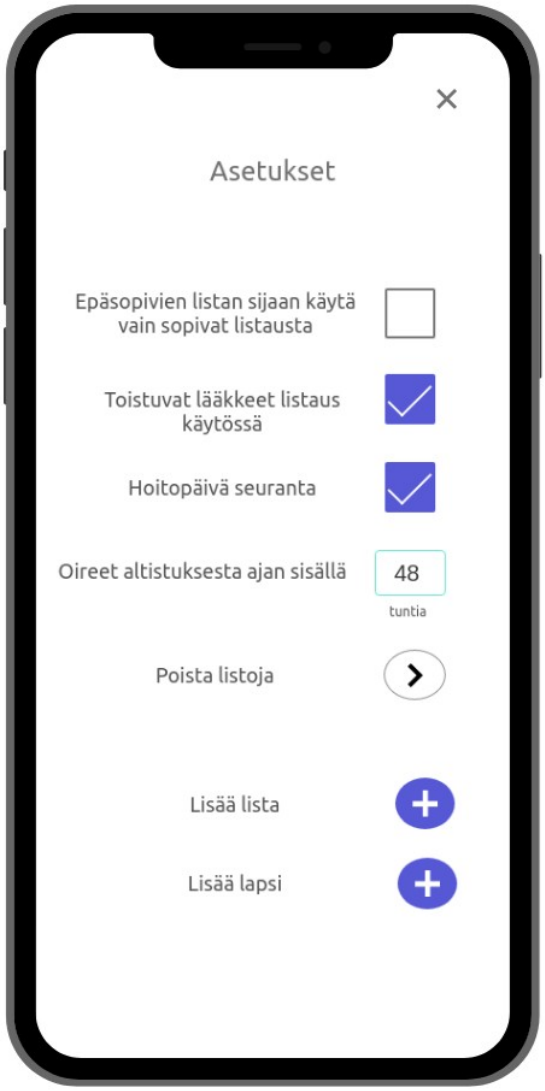

Asetukset
Listatut
Muistiinpanot
Raportit
Tallennetut ruuat


Lisää lääke
29.12.2020 10 00
28.12.2020 11 01
27.12.2020 12 02
Valitse lisättävä luettelostasi
Zyrtec
tai lisää lääke, joka ei ole listassa
Lääkkeen nimi
Tallenna listaan
Merkitse toistuvaksi
Lääkkeen määrä
1
ml
2
Kommentit
Tallenna

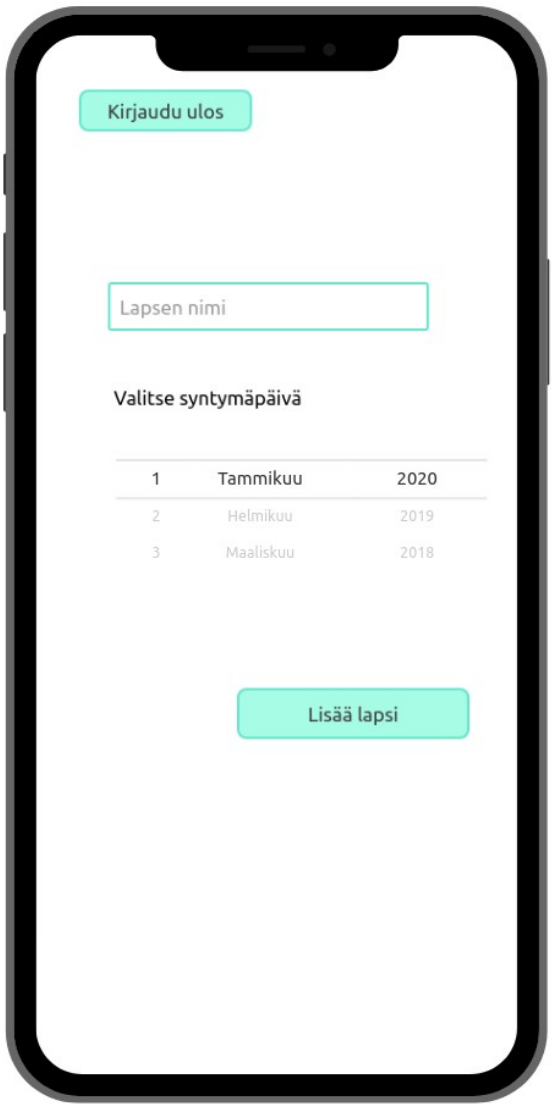

Lisää ruoka-aine
29.12.2020 10 00
28.12.2020 11 01
27.12.2020 12 02
Valitse lisättävä luettelostasi
Kaurapuuro
Tai lisää ruoka, aine joka ei ole listassa
Ruoka-aineen nimi
Tallenna listaan
Ruoka-aineen määrä
Kommentit
Tallenna
Lisää ruoka
ainesosaluettelolla listaan


Lisää oire
29.12.2020 10 00
28.12.2020 11 01
27.12.2020 12 02
Valitse lisättävä luettelostasi
Ihottuma
tai lisää oire, joka ei ole listassa
Oireen nimi
Tallenna listaan
Oireen voimakkuus
Kommentit
Tallenna

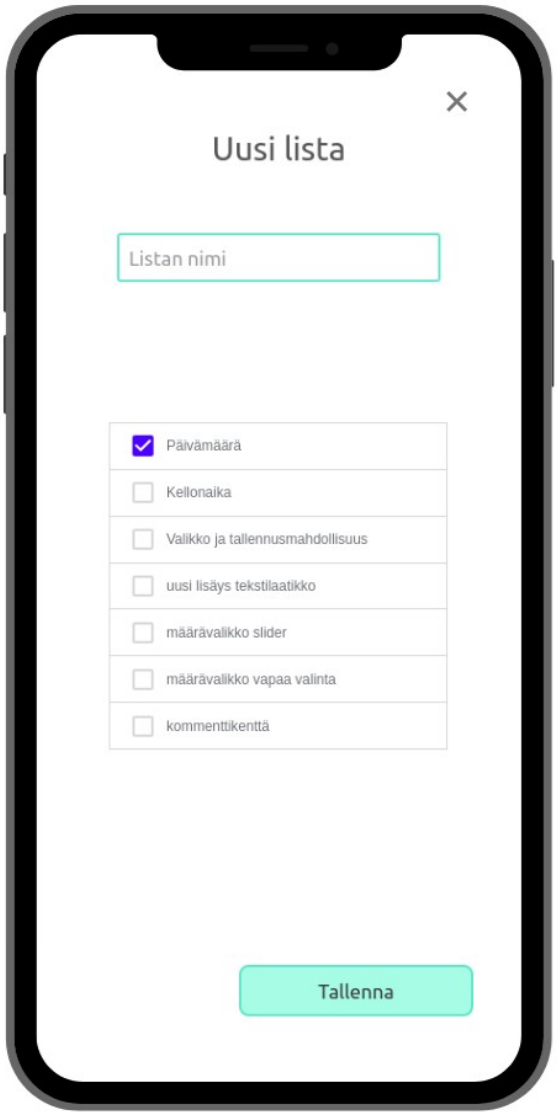

Lisää oire
Oireen lisäys tallennettu
Valitse lisättävä luettelostasi
Ihottuma
tai lisää oire, joka ei ole listassa
pulauttelu
Tallenna listaan
Oireen voimakkuus
Kommentit
Tallenna


Asetukset
Epäsopivien listan sijaan käytä vain sopivat listausta
Toistuvat lääkkeet listaus käytössä
Hoitopäivä seuranta
Oireet altistuksesta ajan sisällä
48
tuntia
Poista listoja
Lisää lista
Lisää lapsi

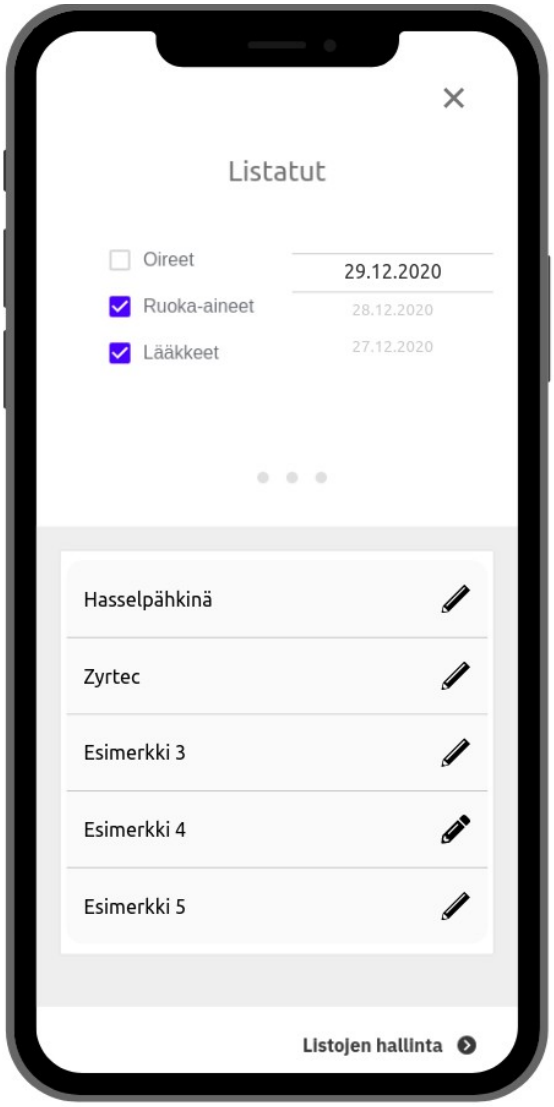

Epäsopivat ruoka-aineet
Lisää uusi epäsopiva ruoka-aina
Lisää
lisätty esimerkki 1
lisätty esimerkki 2
lisätty esimerkki 3
Lähetä listaus

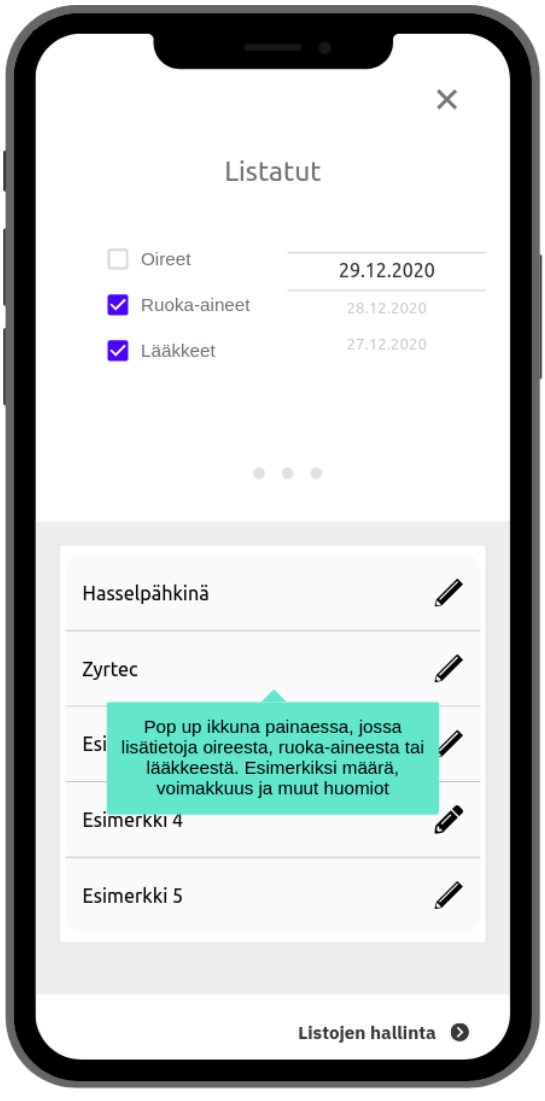

Kirjaudu ulos
Lapsen nimi
Valitse syntymäpäivä
1 Tammikuu 2020
2 Helmikuu 2019
3 Maaliskuu 2018
Lisää lapsi

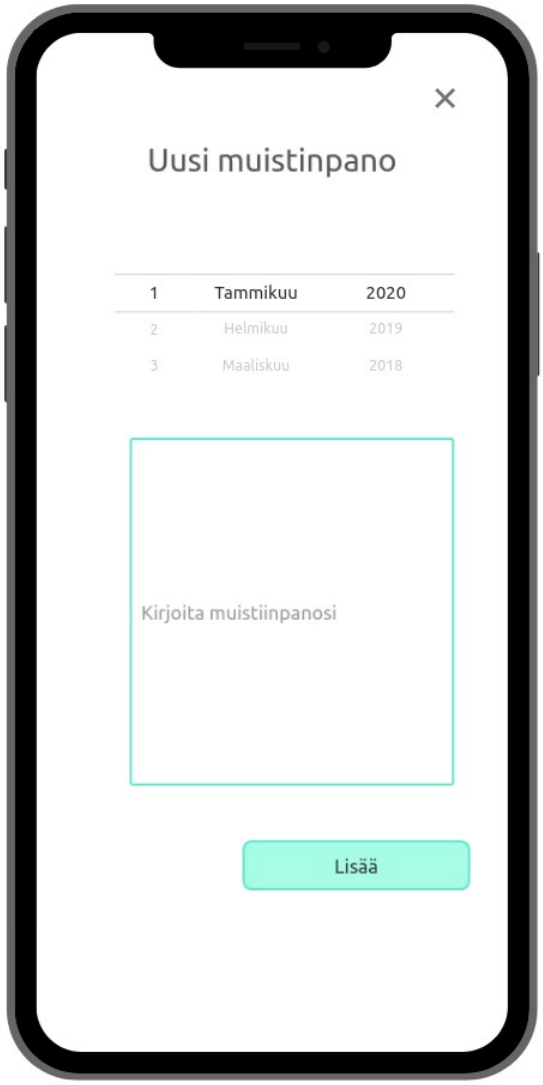

Toistuvat lääkkeet
29.12.2020
28.12.2020
27.12.2020
Otettu päivämäärällä
Multivita
Maitohappobakteeri
Zyrtec aamu 2,5ml
Tallenna muutokset
Lisää toistuva lääke listaan

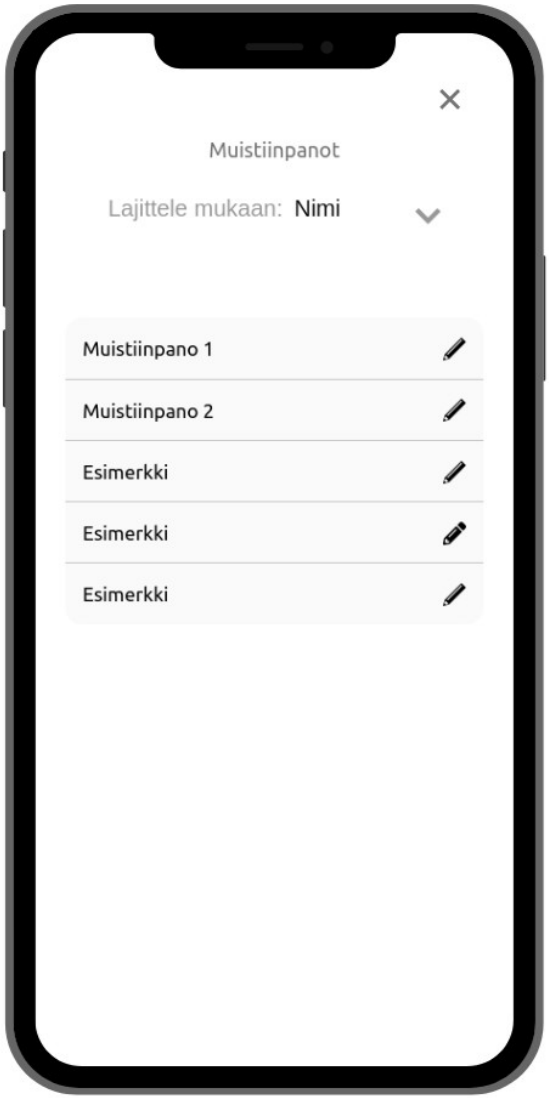

Uusi lista
Listan nimi
Päivämäärä
Kellonaika
Valikko ja tallennusmahdollisuus
uusi lisäys tekstilaatikko
määrävalikko slider
määrävalikko vapaa valinta
kommenttikenttä
Tallenna

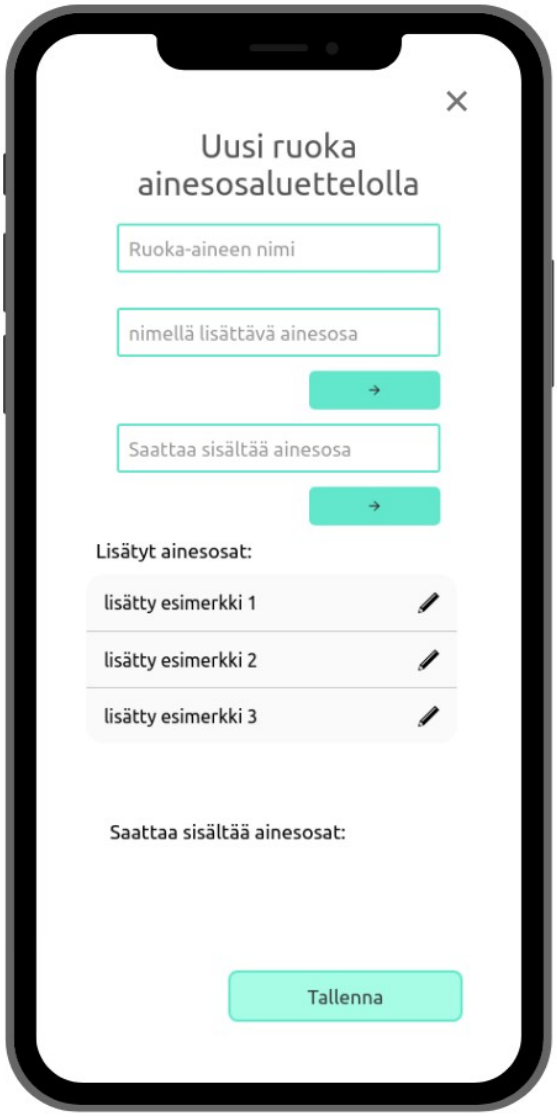

Poista listoja
Varoitus, toiminto poistaa listan ja kaikki sen tiedot! Tiedot voi olla mahdollista palauttaa varmuuskopiosta.
Oire
Ruoka-aine
Lääke
Oletko varma, että haluat poistaa listan ja sen sisällön pysyvästi?
Kyllä, haluan poistaa
Ei, en poistakaan


Listatut
Oireet
29.12.2020
Ruoka-aineet
28.12.2020
Lääkkeet
27.12.2020
Hasselpähkinä
Zyrtec
Esimerkki 3
Esimerkki 4
Esimerkki 5
Listojen hallinta


Listatut
Oireet
29.12.2020
Ruoka-aineet
28.12.2020
Lääkkeet
27.12.2020
Hasselpähkinä
Zyrtec
Pop up ikkuna painaessa, jossa lisätietoja oireesta, ruoka-aineesta tai lääkkeestä. Esimerkiksi määrä, voimakkuus ja muut huomiot
Esimerkki 4
Esimerkki 5
Listojen hallinta

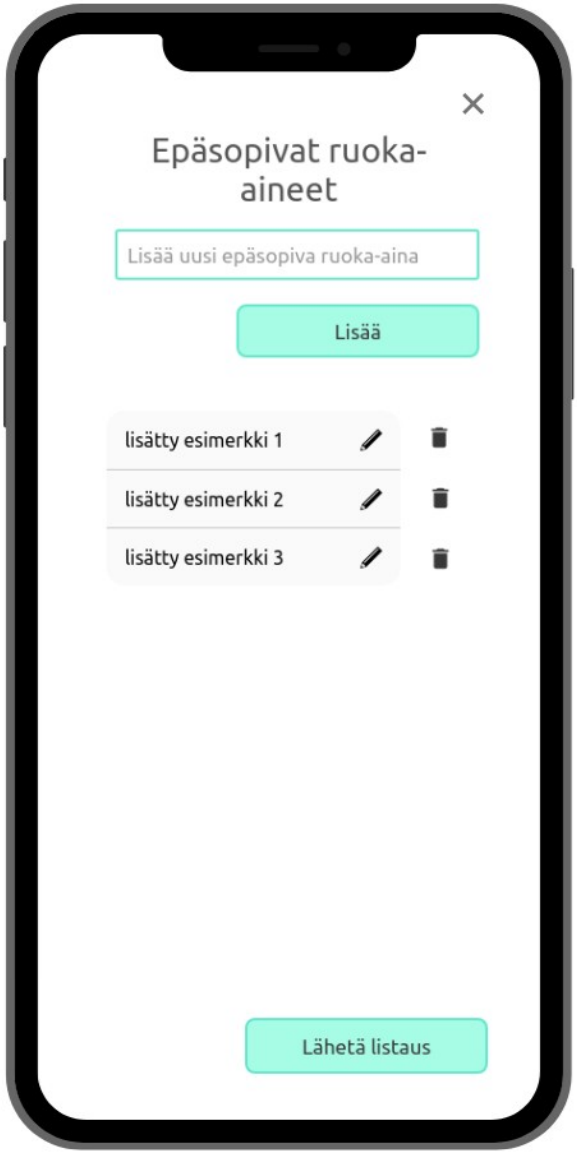

Uusi muistinpano
1 Tammikuu 2020
2 Helmikuu 2019
3 Maaliskuu 2018
Kirjoita muistiinpanosi
Lisää


Muistiinpanot
Lajittele mukaan: Nimi
Muistiinpano 1
Muistiinpano 2
Esimerkki
Esimerkki
Esimerkki


Uusi ruoka ainesosaluettelolla
Ruoka-aineen nimi
nimellä lisättävä ainesosa
Saattaa sisältää ainesosa
Lisätyt ainesosat:
lisätty esimerkki 1
lisätty esimerkki 2
lisätty esimerkki 3
Saattaa sisältää ainesosat:
Tallenna


Tallennettu ruoka-aineluettelo
Myllyn paras glut pasta
lisätty esimerkki 2
lisätty esimerkki 3
Tallenna muutokset


Raportit
Taulukko oireet - ruoka-aineet
Luo
Lähetä sähköpostilla
Lähetä viestinä


Epäsopivat ruoka-aineet
Lisää uusi epäsopiva ruoka-aina
Lisää
lisätty esimerkki 1
lisätty esimerkki 2
lisätty esimerkki 3
Lähetä listaus

Interactive prototype, introduction to participant, tasks and questions (in finnish) Attachment 4

Prototyyppi ei tallenna tietoja ja sen avulla voi testata toimintoja sekä selvitetään, miten helposti käyttäjä löytää toiminnot tai miten hän kokee ne. Prototyypissä ei salasanakentissä ole minkäänlaista salausta, joten missään nimessä ei tule käyttää oikeita salasanoja. Jos testinä yrittää rekisteröitiä, sanasanakohdassa voi kirjoittaa esimerkiksi vain x. Kaikki painikkeet (myös rekisteröidy ja kirjaudu) toimivat prototyypissä myös täysin ilman syötteitä, joten voit navigoida syöttämättä tietoja, toki tietojen syöttämistä voi myös kokeilla. Yritettäessä lisätä oireita, muistiinpanoja tms ei prototyyppi talleta tietoja mihinkään. Myöskään asetusten toiminnot eivät tallennu interaktiivisessa prototyypissä eikä se tyhjennä tekstikenttiä.

Kuviteltu päivämäärä tänään 29.12.2020. Koska tätä ei tällä hetkellä voi toteuttaa tarkkailtuna, olisi hyvä, jos kirjoittaisit muutamalla sanalla kommentit mitä yritit ja löytyikö toiminto helposti tai oliko se vaikeaa jokaisen toiminnon kohdalla.

Kokeiltavat toiminnot:

- Yritä lisätä oire, joka on tallennettuna valmiiksi pudotusvalikkoon tälle päivälle (29.12) klo 11 ja tallentaa muutokset.

- Yritä mennä lisäämään toinen oire, mutta et haluakaan lisätä oiretta ja poistu tallentamatta

- lapsella ei olekaan hoitopäivä, miten toimit jotta tieto tallentuu?

- sinun tulisi lisätä uusi kokeiltava ruoka-aine (esimerkiksi banaani), jota ei ole pudotusvalikkolistassa. Haluat lisätä sen jatkossa pudotusvalikkoon ja määrä aluksi on pieni.

- kuvitellussa tilanteessanne joudutte listaamaan jokaisen mausteen ja lisäaineen ylös. Käytätte noin kolmen päivän välein tiettyä näkkileipää ja haluat lisätä sen valmistajan nimellä valmisluettelona, jossa lueteltu ainesosat dropdown valikkoon valmiiksi. Miten toimit?

- lapsellasi on niin vähän sopivia ruoka-aineita, että epäsopivien listauksen sijaan teille olisi hyötyä enemmän listasta, joka listaa ainoastaan sopivat ruoka-aineet. Yritä vaihtaa toiminto asetuksista. (Huom otsikot eivät vaihdu prototyypissä vaikka asetus vaihdetaan)

- Olet huomannut, että teillä oireet tulevat 72 tunnin sisällä altistumisesta. Vaihda tämä asetuksista raporttien ja sovelluksen ehdottamiin huomattuihin ruoka-oire yhdistelmiin. (Huom tekoälytoimintoa ja itse ehdotuksia ei ole prototyypissä)

- oleta, että esimerksi imetyksen vuoksi tarvitset uutta erillistä listausta. Yritä luoda listaus tai luoda joku muu listaus, jota tarvitsisit erikseen.

- Yritä löytää esimerkkimuistiinpano 2 lisätiedot

- yritä löytää listoista (oireet, ruoka-aineet, lääkkeet) esimerkki 7 lisätiedot

- oleta, että joudutte antamaan joka päivä tietyt lääkkeet. Yritä tallentaa lääke niin että se on toistuva ja lisättäisiin toistuvat listaan (huom prototyyppi ei tallenna lisäystä)

- oleta, että olet tallentanut 3 päivittäin toistuvaa lääkettä ja haluaisit merkitä ne nyt tänään (29.12) otetuksi.

Kokeilun jälkeen kysymykset:

- Oliko, jotain mikä yllätti? Jos oli, niin mitä?

- mitkä toiminnot koit helpoksi ja mitkä vaikeiksi?

- puuttuiko mielestäsi jotain oleellista? Jos puuttui, niin mitä?

- oliko mielestäsi jotain ylimääräistä? Jos oli, niin mitä?

- Oliko jokin toiminto tms oudossa paikassa/sijainnissa? Jos oli, niin mikä?

- Jos pystyisit, mitä muuttaisit sovelluksesta?