

| “Automated Blood Pressure and Pulse Rate Monitoring Device with Printing Capability” Questionnaire | | | | | |
|---|---|---|---|---|---|
| Name (Optional): _____ | | | | | |
| Instruction: Please check the box that corresponds to the question to evaluate the device based on the criteria provided. | | | | | |
| <p style="text-align: center;">Scale-Interpretation 1 – Excellent 2 – Very Satisfactory 3 - Satisfactory 4 – Fair 5 - Poor</p> | | | | | |
| Criteria | 1 | 2 | 3 | 4 | 5 |
| A. Design of the User Interface | | | | | |
| 1. The design of the interface is User friendly | | | | | |
| 2. The color of the text is not irritating to eyes and easy to understand | | | | | |
| 3. The buttons and icons are attractive | | | | | |
| 4. Overall the interface is easy to use | | | | | |
| B. Efficiency of the Device | | | | | |
| 1. The device is easy to operate. | | | | | |
| 2. The device is able to record the corresponding blood pressure and pulse rate reading. | | | | | |
| 3. The device is comfortable and safe to use when attached to the user’s body. | | | | | |
| C. Dependability of the System | | | | | |
| 1. The system can be considered as a device for monitoring blood pressure and pulse rate | | | | | |
| 2. The device is a dependable tool in reading and recording of blood pressure and pulse rate | | | | | |
| 3. Overall the device is dependable | | | | | |