Study title: Assessment of Wound Viability in the Lower Extremity of Diabetics by Multi-Spectral Imaging and MRI

Patient ID #____________

STUDY QUESTIONNAIRE

1. How often do you usually check your feet?

☐ Every day  ☐ Once a week  ☐ Never  ☐ Other (please specify) ______________

Probe:
• What types of challenges do you encounter, if any, during this process?

2. On a scale of 1 to 10, how easy was [DEVICE] to use in general? (please circle)

Very easy 1 2 3 4 5 6 7 8 9 10 Hard

3. If [DEVICE] was hard to use in general, what would make it easier?

Probes:
• Can you describe any difficulty that you had or may have in imaging your foot with this device?

4. On a scale of 1 to 10, how easy was the [DEVICE] ‘app’ to use? (please circle)

Very easy 1 2 3 4 5 6 7 8 9 10 Hard

5. If the [DEVICE] ‘app’ was hard to use, what would make it easier?

Probes:
- Maybe having the camera and phone separated, so imaging the bottom of your foot is easier?
6. Do you think using [DEVICE] will save you from having to go to the wound care clinic so often?

☐ Yes  ☐ No  ☐ No change

7. Now, I want to talk about your relationship with technology. Do you own a smartphone or a tablet? If so, which one?
   - How did you obtain your phone?
   - If not, how about a computer?

8. What do you use your phone for?
   - What applications do you use?
   - Are there any apps you use daily?
   - Any apps that you use for health reasons?
   - How do you decide on using an app, and continue using it?
   - Is your phone a source of information for you?

9. Does your smartphone have a camera?
   - Do you use it often?
   - Describe your experience with the camera interface.
   - Do you have issues locating images on your phone after taking them?

10. Thank you for completing the survey. Please let us know if you have any further comments about [DEVICE] in the space below.