## **Questionnaire - Cardiac Rehabilitation**

| Start of Block: Default Question Block   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| - With regard to the presentation, please give us your view by answering the following questions. Your response will help us to understand the relevance of our project for cardiac rehabilitation monitoring. |  |  |  |  |  |  |
| Q1 Which of the following parameters with regards to <b>physiological</b> data collection do you consider as important when monitoring cardiac rehabilitation patients?  |  |  |  |  |  |  |
| ☐ ECG Signals  |  |  |  |  |  |  |
| Heart Rate   |  |  |  |  |  |  |
| Blood Pressure   |  |  |  |  |  |  |
| Body temperature   |  |  |  |  |  |  |
| Oxygen Saturation  |  |  |  |  |  |  |
| Any other, Please enter  |  |  |  |  |  |  |

| Q2 Which of the following parameters with regards to <b>physical activity</b> do you consider to be important when monitoring cardiac rehabilitation patients?  |
|---|
| Walking   |
| Running   |
| Sitting   |
| Jogging   |
| Standing  |
| Total Steps   |
| Distance covered  |
| Calories Burn   |
| Any other, Please enter   |
| Q3 Which of these parameters with regards to <b>Lifestyle</b> information do you consider to be important when monitoring cardiac rehabilitation patients?  Sleeping Duration  Medication compliance  Any other, please enter |

| <ul><li>Might or might not</li><li>Probably not</li><li>Definitely not</li></ul> |         |         |              |             |             |         |
|--|---------|---------|--------------|-------------|-------------|---------|
|  |         |         |              |             |             |         |
|  |         |         |              |             |             |         |
| Q5 Rate the following features   |         |         | ipport syste | m with rega | ards to its |         |
| •  | 0       | 1       | 2            | 3           | 4           | 5       |
| Physical Activity  | $\circ$ | $\circ$ | 0            | $\circ$     | $\circ$     | 0       |
| Physiological Information  | $\circ$ | $\circ$ | $\circ$      | $\circ$     | $\circ$     | 0       |
| Medication Compliance  | $\circ$ | $\circ$ | $\circ$      | $\circ$     | $\circ$     | $\circ$ |
| Personalised<br>Recommendation/Feedback  | $\circ$ | $\circ$ | $\circ$      | $\circ$     | $\circ$     | $\circ$ |
| Nutrient Content of Food intake  | $\circ$ | $\circ$ | $\circ$      | $\circ$     | $\circ$     | 0       |
|  |         |         |              |             |             |         |

| Q7 Do you think that using mobile phone to au improve the rehabilitation scheme | utomatically detect the activity of patient will |
|---|--|
| O Definitely yes  |  |
| O Probably yes  |  |
| Might or might not  |  |
| O Probably not  |  |
| O Definitely not  |  |
| Q8 Any other comments   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| End of Block: Default Question Block  |  |