

Appendix - Paper-based Questionnaire

This survey asks for your views and feelings about your experience with MeTree. Please answer every question by selecting the answer as indicated. If you are unsure about how to answer a question, please give the best answer you can.

MeTree start time: _____

MeTree end time: _____

Completion time: _____minutes

Part A

Study ID: _____

What is the date today: _____(month/day/year)

Part B: Please tell us about yourself

1. What is your age? ()
2. What is your gender?
 - 1 Male
 - 2 Female
3. What is your major?
 - 1 Medical
 - 2 Nursing
 - 3 Pharmacy
 - 4 Other (please specify) _____
4. Which grade are you in?
 - 1 1st
 - 2 2nd
 - 3 3rd
 - 4 4th
 - 5 5th
 - 6 6th
 - 7 Above 6th

Part C: Please tell us about your overall feelings of this research using MeTree©

1. How satisfied are you with your experience using the web-based portal to enter information?
 - 1 Very Poor
 - 2 Somewhat Unsatisfactory
 - 3 About Average
 - 4 Very Satisfactory
 - 5 Superior
2. Overall how likely would you be to recommend this process (using the web to provide information to your physician so that risk scores can be calculated and discussed at the time of your visit) to your family or friends?
 - 1 Very Likely
 - 2 Likely

- 3 Somewhat Likely
 - 4 Unlikely
 - 5 Not Likely
3. Overall how likely do you think MeTree can be put into real practice in the context of Sri Lanka?
- 1 Very Likely
 - 2 Likely
 - 3 Somewhat Likely
 - 4 Unlikely
 - 5 Not Likely
- If not, please simply state why: _____

Part D: Please tell us about your experience using MeTree©

1. The MeTree program was easy to use.
 - 1 Yes
 - 2 No
 - 3 I don't know
2. Answering the questions made me anxious.
 - 1 Yes
 - 2 No
 - 3 I don't know
3. The questions were easy to understand.
 - 1 Yes
 - 2 No
 - 3 I don't know
4. The layout and design of the interface made it easy to fill in the information.
 - 1 Yes
 - 2 No
 - 3 I don't know

Part E: Please tell us about your perceived benefits after using MeTree©

1. Completing MeTree is a useful experience.
 - 1 Yes
 - 2 No
 - 3 I don't know
2. The family history form used to help collect information was helpful.
 - 1 Yes
 - 2 No
 - 3 I don't know
3. I talked with relatives about our family's health history before using MeTree©
 - 1 Yes
 - 2 No
 - 3 I don't know
4. I didn't have enough information about some people in my family when completing MeTree.
 - 1 Yes (If yes, please simply specify why _____)

- 2 No
- 3 I don't know

5. I learned a lot about my family's health history that I did not know.

- 1 Yes
- 2 No
- 3 I don't know

6. I am more aware of my health risks.

- 1 Yes
- 2 No
- 3 I don't know

7. On a scale of 1 to 5, how much do you agree or disagree with each of the following statements.

Please check in the corresponding box.

On a scale of 1 to 5, how much do you agree or disagree with each of the following statements.					
	Strongly Agree 1	Agree 2	Neutral 3	Disagree 4	Strongly Disagree 5
Completing MeTree made me more aware of health risks in general within my family.					
Knowing my family health history has changed how I think about my health.					
The suggestions MeTree gave are helpful to me.					
Having my family tree drawn out is helpful to me.					

Do you have any opinions or suggestions to our study?

Thank you for your time!