Form Approved OMB No: 0920-1009

Exp. Date: 3/31/2017

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Blast Injury Mobile Application User Feedback

Thank you for installing CDC's Blast Injury Mobile Application. We appreciate your support and would like your feedback on the content, design, and use of this mobile application. Please take a moment to complete this survey. All survey responses are anonymous and you will not be identified. Your input is important.

- 1. Please identify the category that best describes your role.
- Prehospital health care provider
- Hospital health care provider
- Public health professional
- Emergency management professional

Other:	
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- 2. I would like to use or have used the mobile application in the event of a blast or bombing event.
- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree
- Not applicable
- 3. By using this mobile application, I learned new information that I can use in my work.
- Yes
- No
- Unsure
- 4. The information in the mobile application will adequately help me to prepare for mass casualty explosive events.
- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree
- Not applicable

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- 5. I plan to use or currently use the mobile application in my professional work.
- At least once a day
- At least once a month
- At least once or twice per year
- Never
- 6. This mobile application is easy to use.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 7. I was able to find the information I was looking for in the mobile application.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 8. I found the information contained in this mobile application relevant to my professional responsibilities.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 9. This mobile application provides the correct level of detail to help me prepare for mass casualty explosive events.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
 - a. [If disagree or strongly disagree, please explain your response].
- 10. I found the downloadable components (such as audio podcasts and web materials) contained in this mobile application helpful.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree

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- Strongly agree
- Not applicable
- 11. Is there any information that you feel is missing from this mobile application?
 - Yes
 - No
 - Unsure
 - a. [If yes] What information could be added?
- 12. Would you add or remove any information from this mobile application?
 - Yes
 - No, I would not add or remove any information.
 - a. [If yes] What would you add or remove?
- 13. Overall, I am satisfied with the content of this mobile application.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 14. The mobile application graphics are well-designed.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 15. The mobile application colors are attractive and appealing.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 16. Overall, I am satisfied with the design of this mobile application.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 17. I like the concept of the mobile application.

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- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree
- Not applicable
- 18. I will recommend this mobile application to others.
 - Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree
 - Not applicable
- 19. Overall, I am satisfied with this mobile application.
- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree
- Not applicable
 - a. [If disagree or strongly disagree] Please explain why.
- 20. Do you have any suggestions on how to improve this mobile application?

 Open Ended