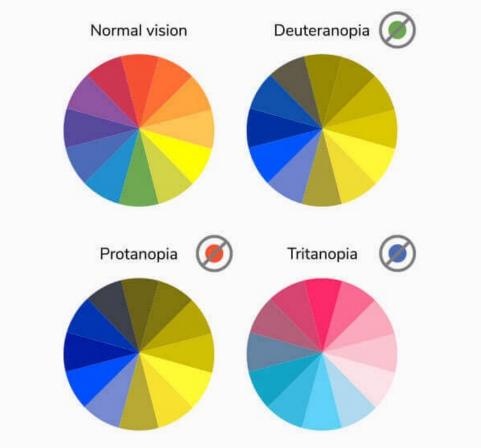
# Usability InSights



Considering users with low to no vision when designing POC diagnostics

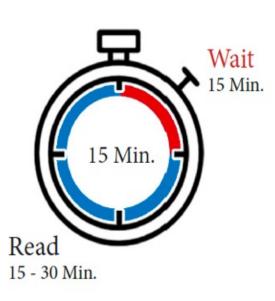
## **Use of Color**

Color is an important asset in design, but not everyone can perceive it in the same way. Color should be a redundant source of coding – red warning text is great, but text or images should be able to convey their message without the use of color.

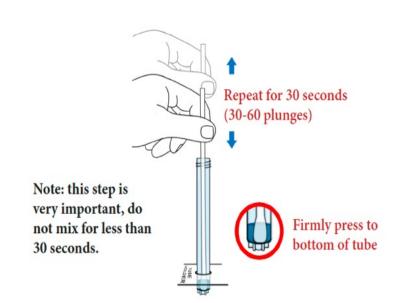


https://www.medicalnewstoday.com/articles/319115#The-many-shades-of-color-blindness

#### Poor Design: Reliance on Color Alone



This timer image is difficult to understand without the use of its red font (or even with it).



The text in this mixing step is red – without this color, there is no indication that this step is important.

#### Good Design: Multiple Indicators



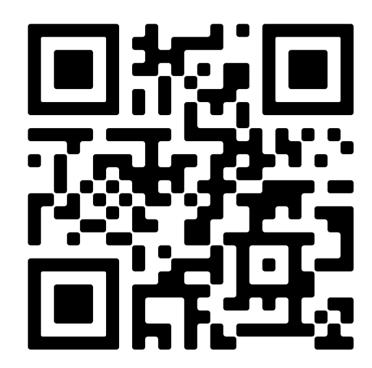
Both of these instructions use the text 'WARNING' as well as bold or CAPITALIZED features to denote important information. Also, the timer image is simpler and clearer.

## **Best Practices**

For users with low/no vision, including individuals with reduced visual acuity and reduced contrast sensitivity:

- Minimum font size of 14pt
- Streamlined protocol
- Pre-filled buffer tube to eliminate additional dispensing or measuring steps.
- Tethered dropper caps
- Tactile feedback when dropper cap placed
- Well-labeled packaging and instructions with high contrast; eye catching labeling
- QR code with additional instructional formats
- For mobile applications or digital QRIs, ensure screen reader compatibility

### **Color Blindness Simulator**



Color blindness can be simulated using the QR code shown here.

Diagnostics for at-home users range in complexity, but a test, no matter how simple or sophisticated, is only as good as the user's ability to complete it. Protocols designed with accessibility in mind improve the experience & efficacy for ALL users, not only those with disabilities.

