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Create a profile

102 Name:

104 Gender:

106 Date of birth:

108 Email:

110 Phone numnber:

112 Address:

114 Nationality:

116 Password:

101

FIG. 1

100

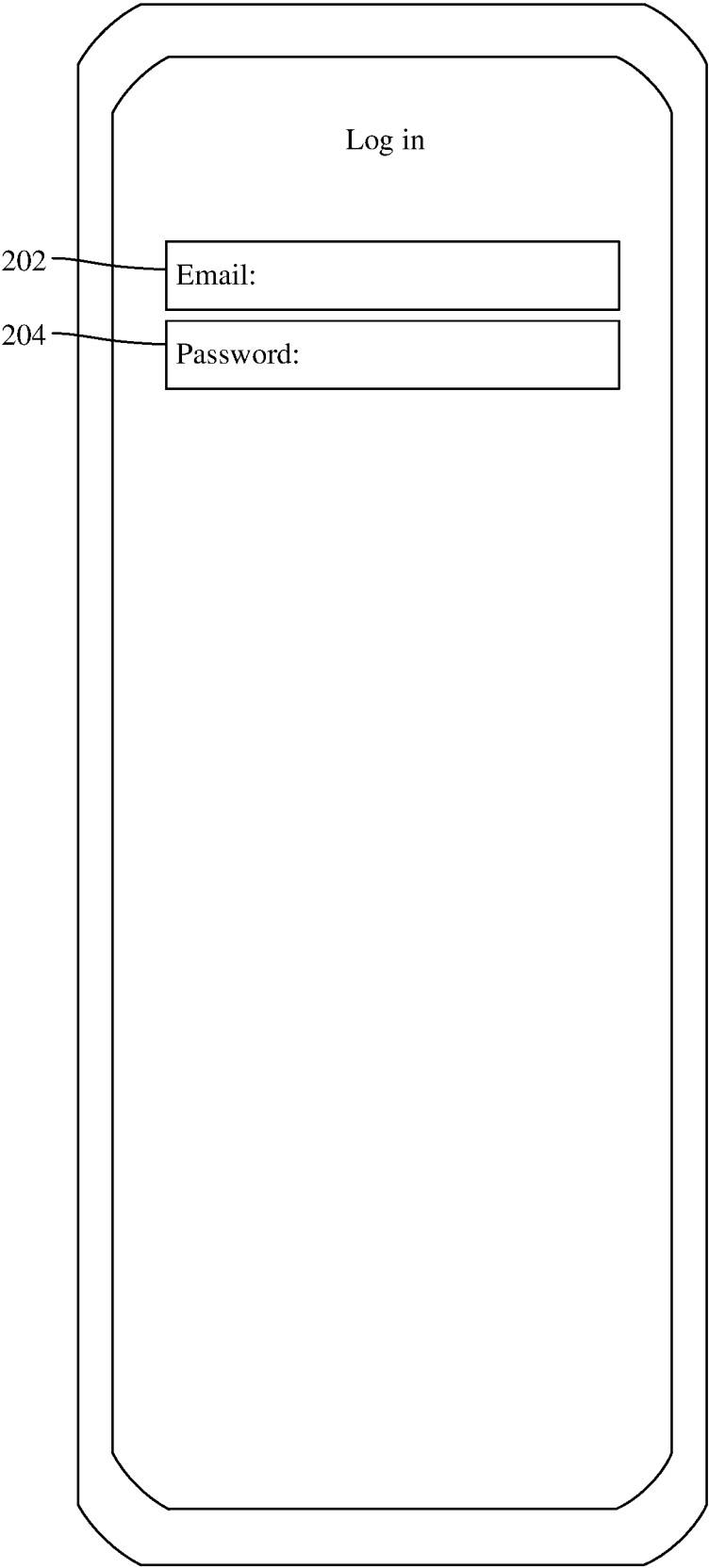


FIG. 2

200

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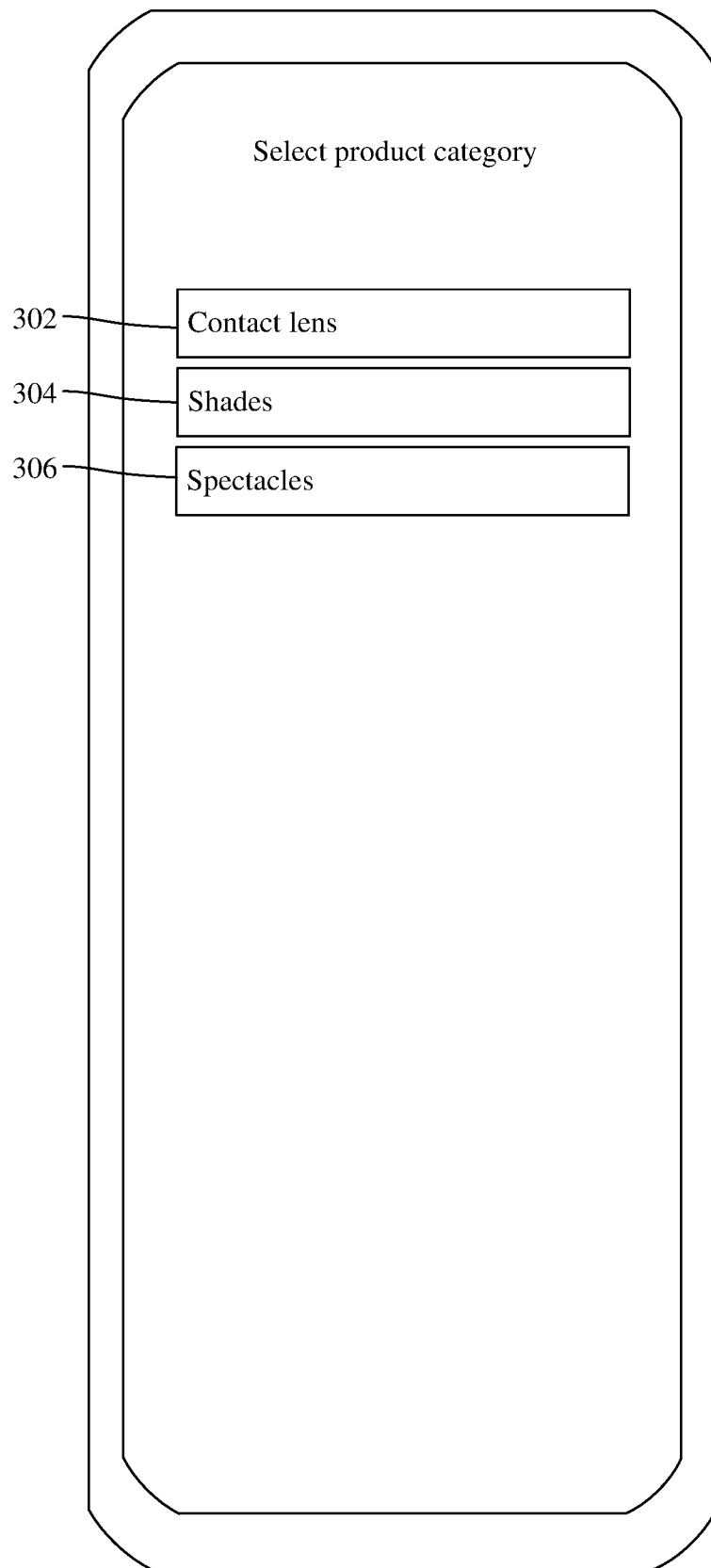


FIG. 3

300

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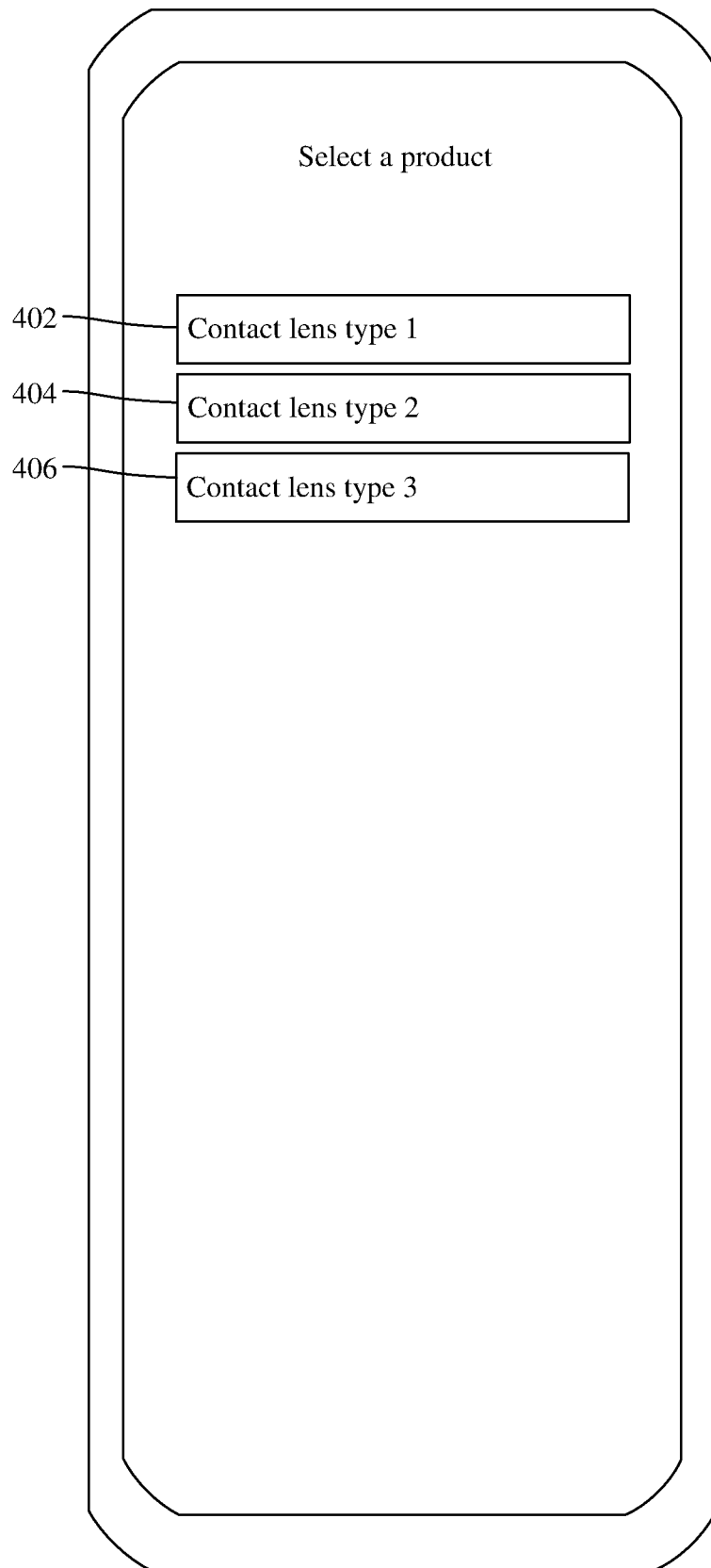


FIG. 4

400

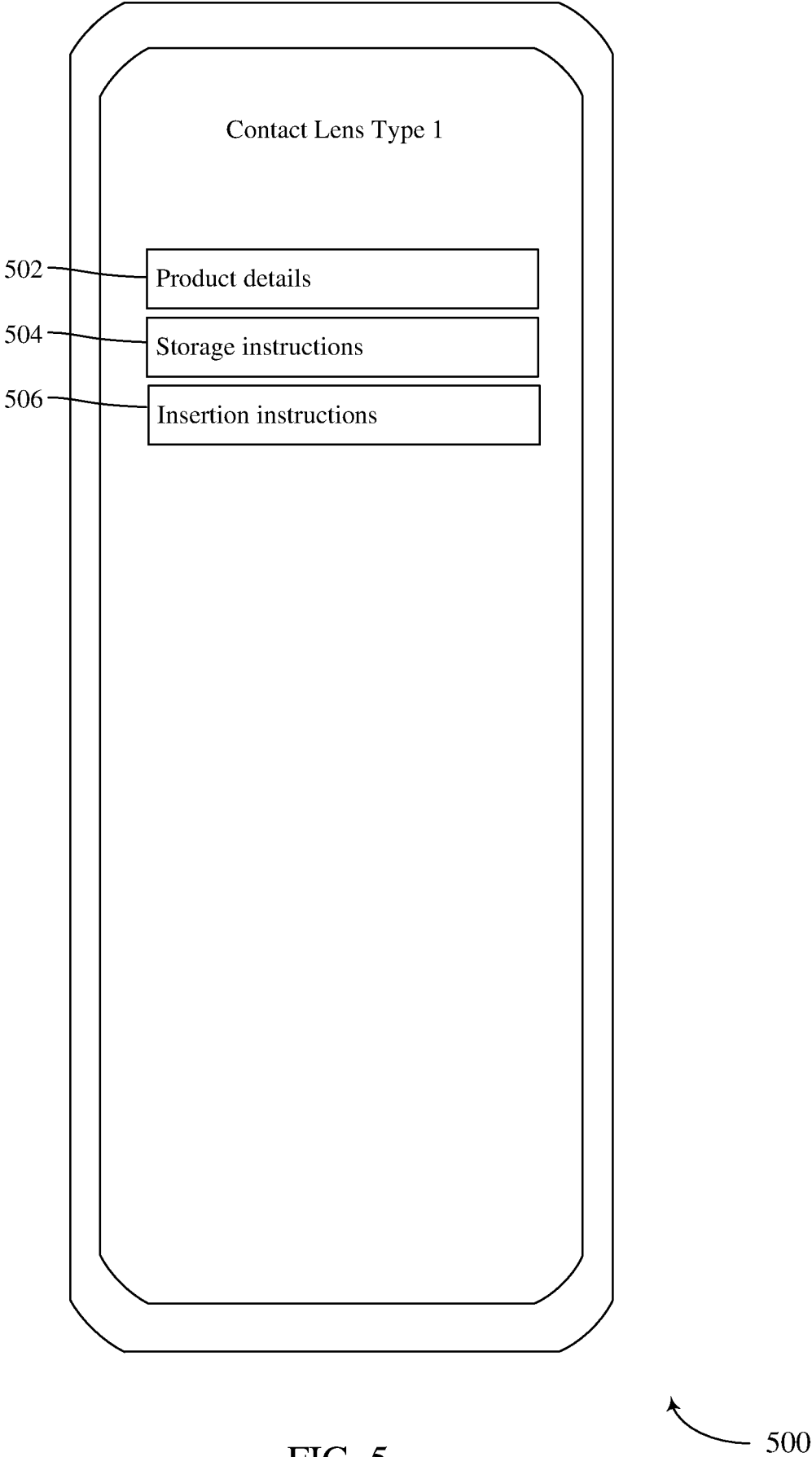


FIG. 5

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Hi Jon, how was your experience inserting/wearing your contact lens today?

602 — Very Easy

604 — Easy

606 — Just OK

608 — Difficult

610 — Very Difficult

FIG. 6

600

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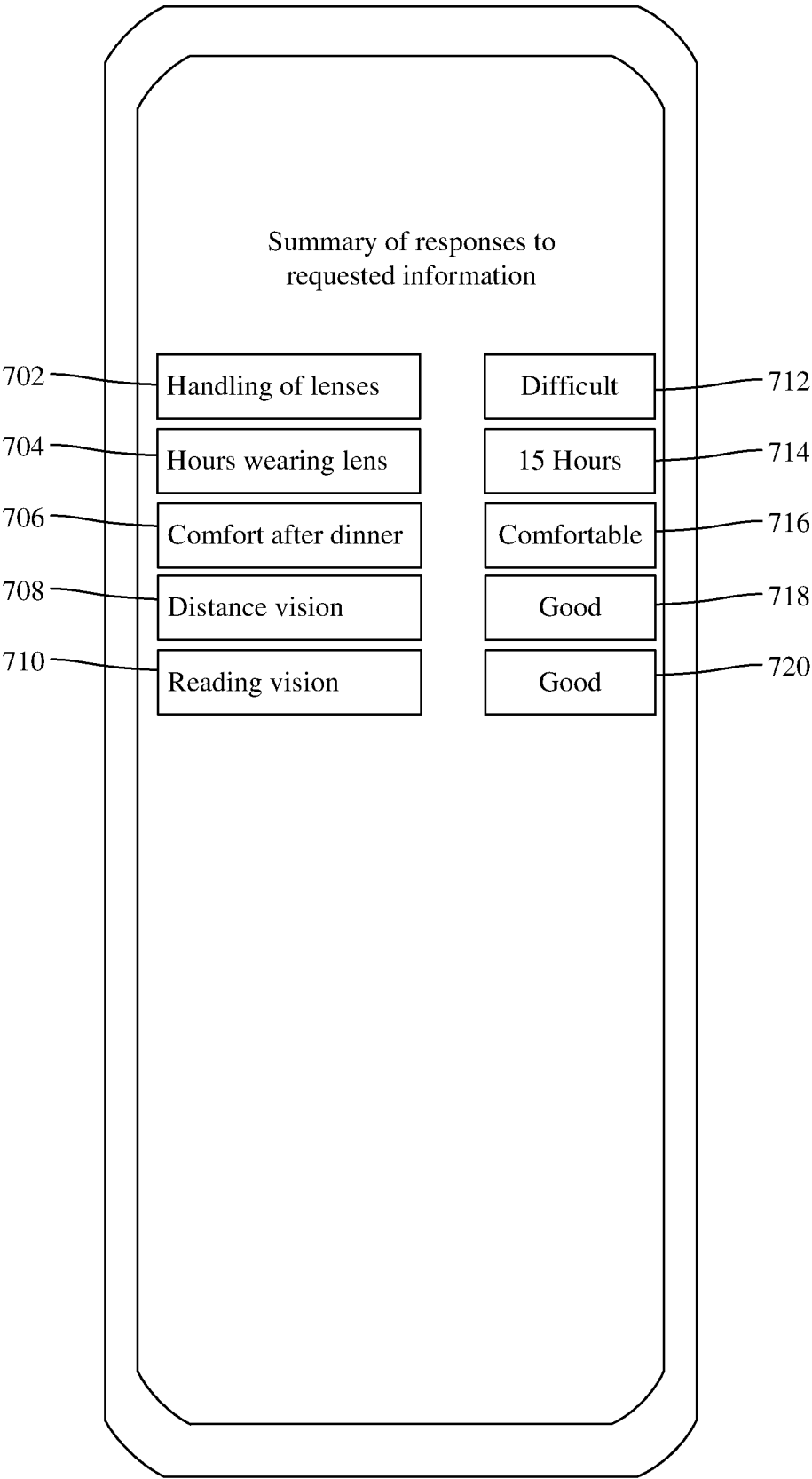


FIG. 7

700

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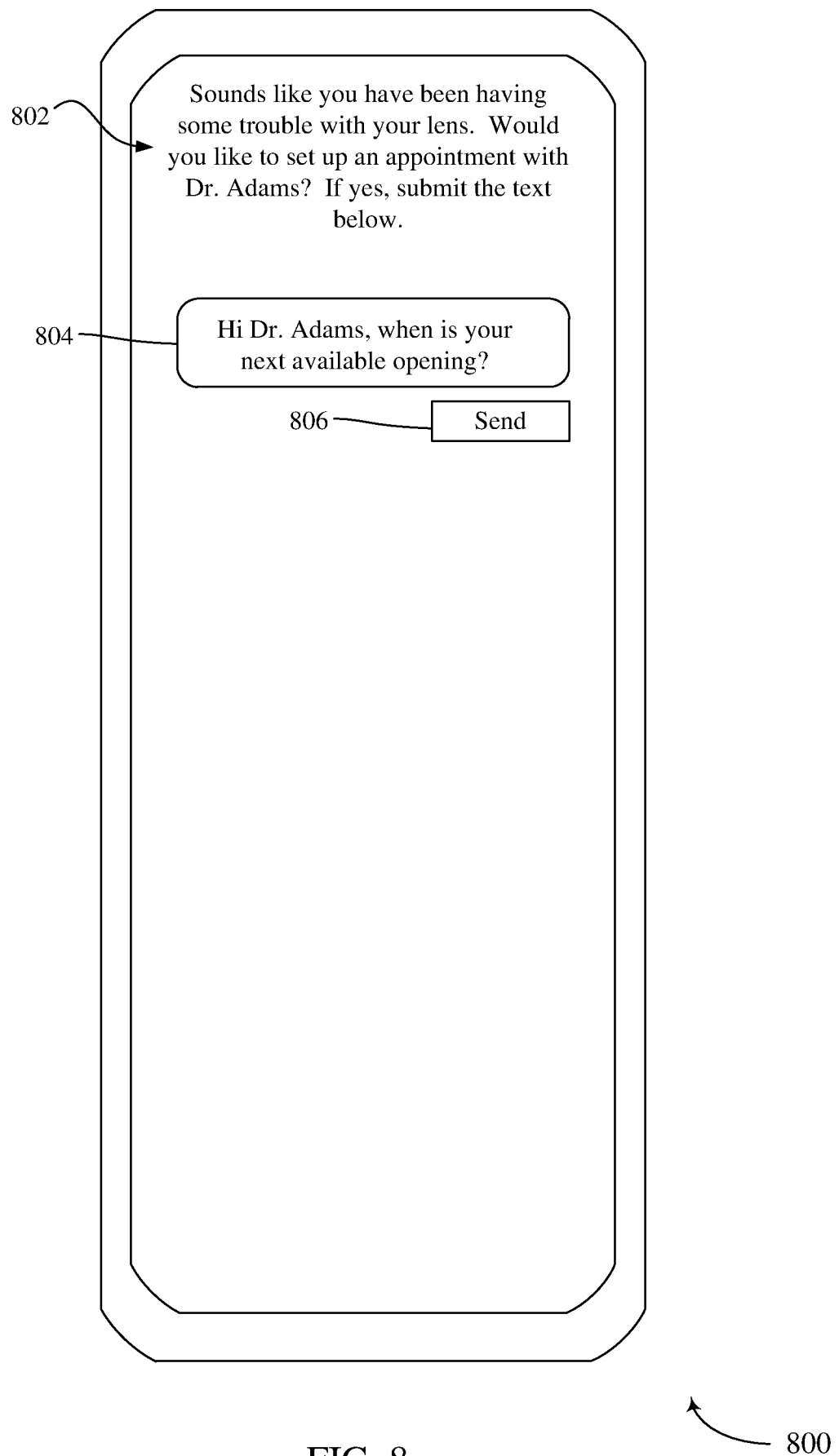


FIG. 8

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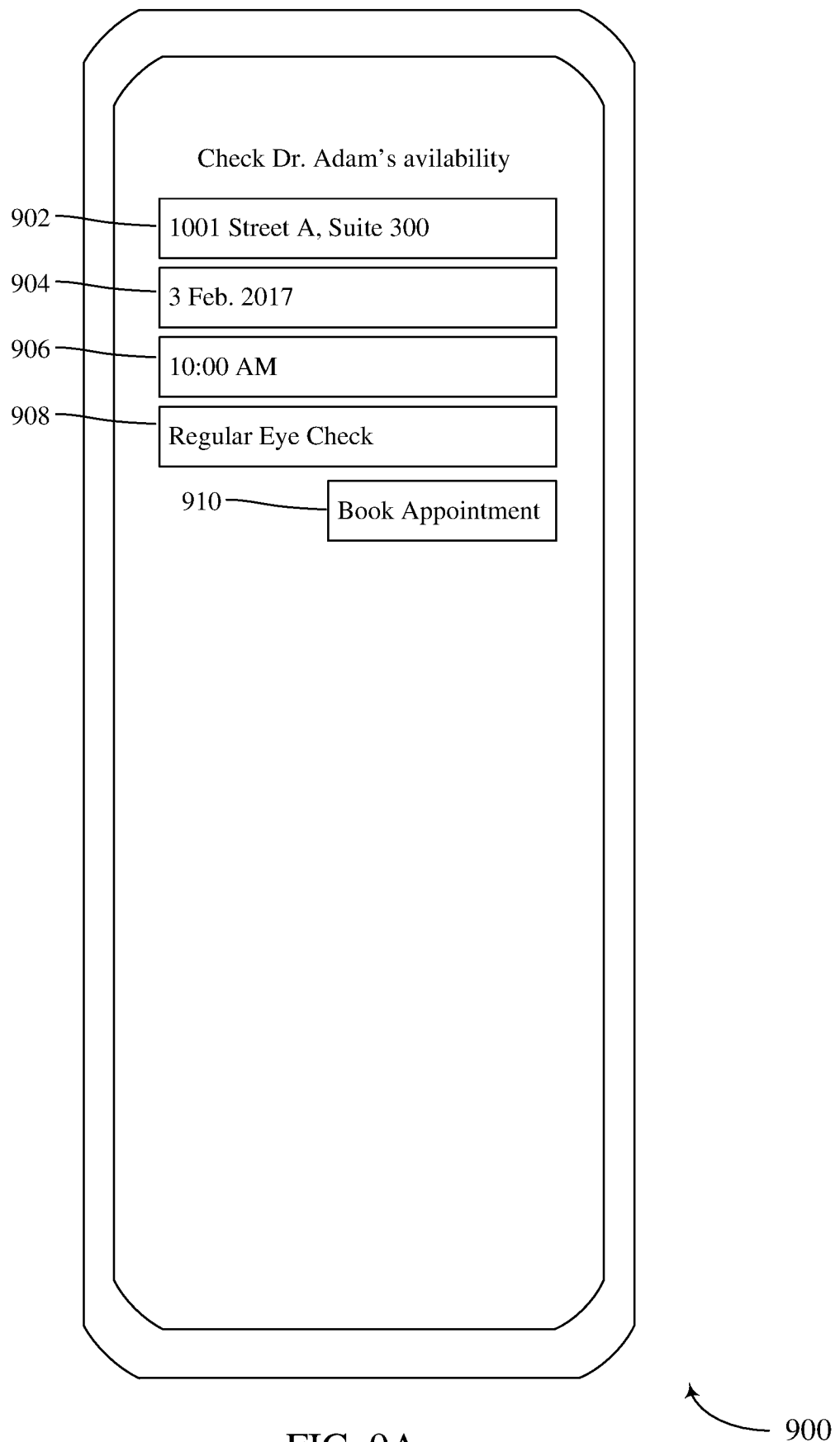


FIG. 9A

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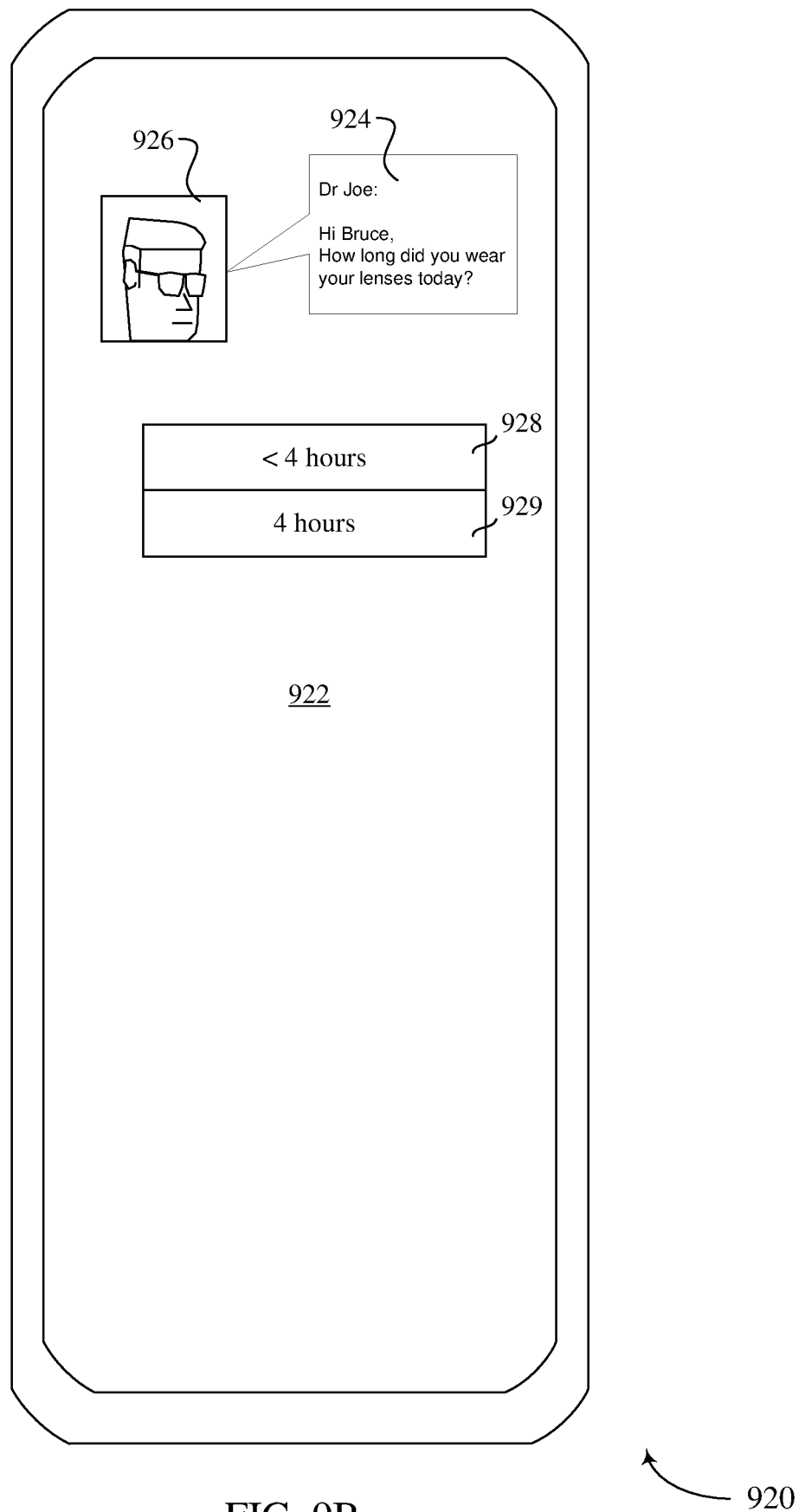


FIG. 9B

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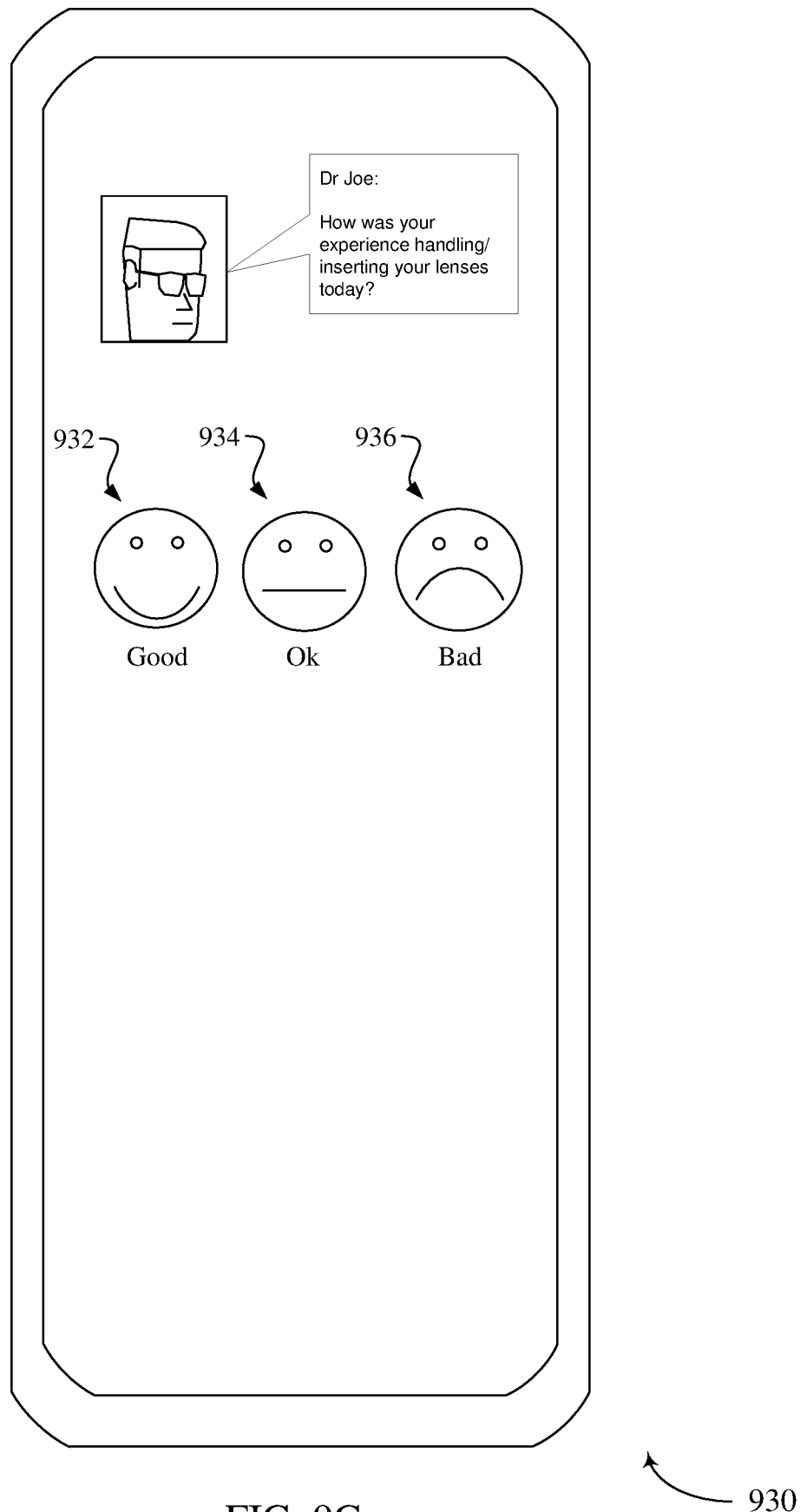


FIG. 9C

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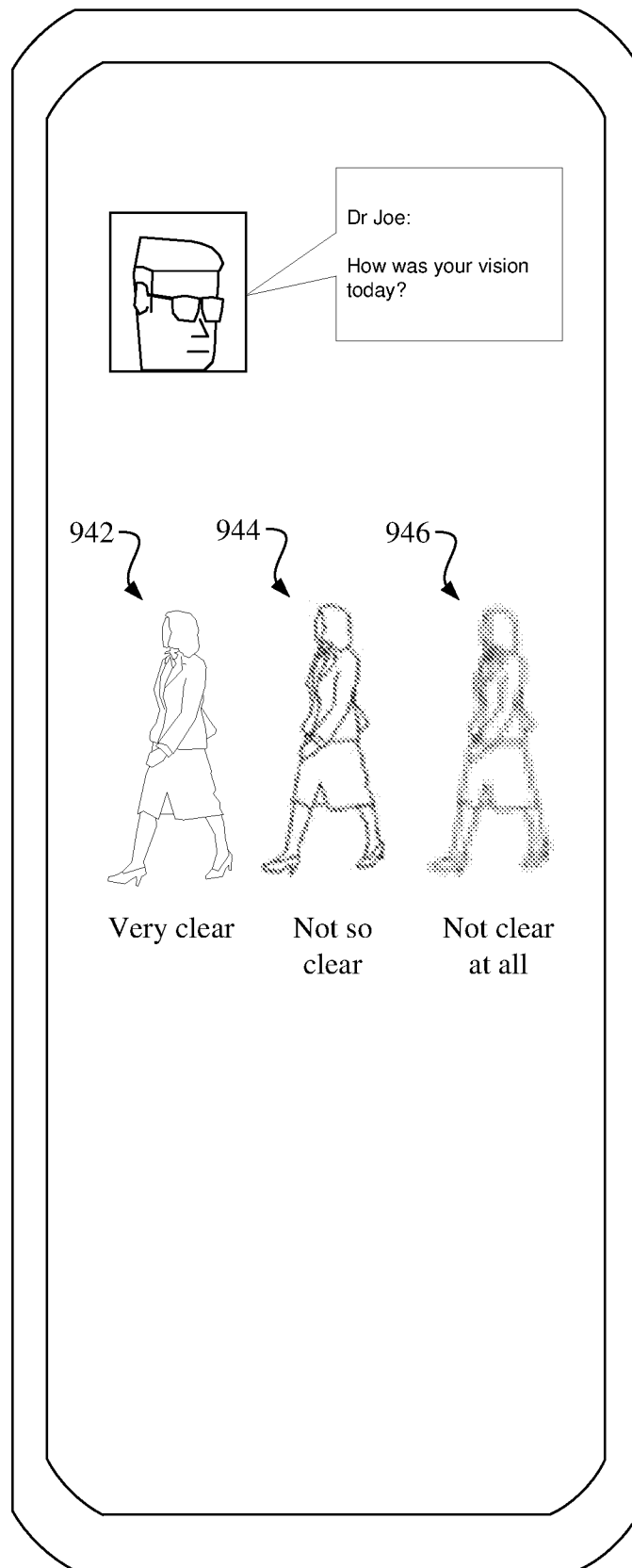


FIG. 9D

940

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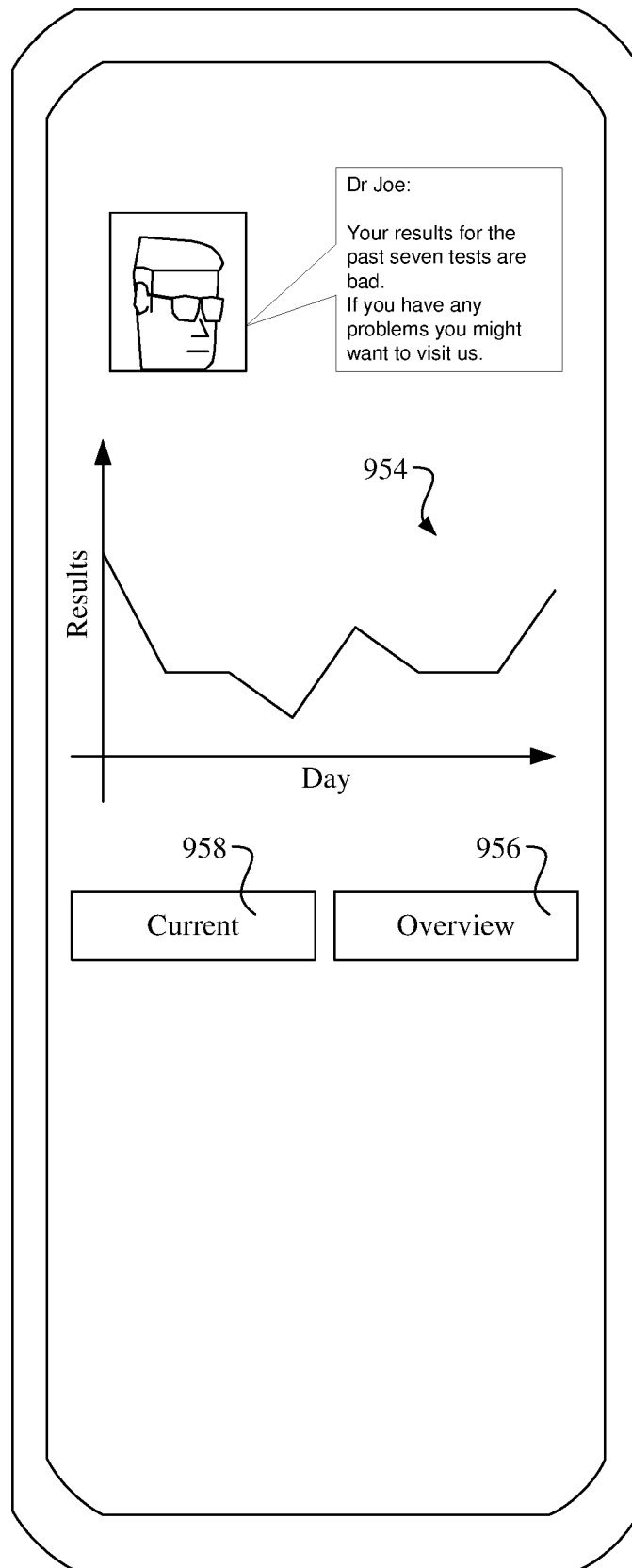


FIG. 9E

950

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1000

1002

1000

Name:

Age:

Location:

Date:

Family:

Good

Ok

Bad

DONE?

FIG. 10

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1100

1102

1104

1106

1108

HOW ARE YOU FEELING TODAY?

VERY ANXIOUS

ANXIOUS

NOT VERY ANXIOUS

NOT ANXIOUS

FIG. 11

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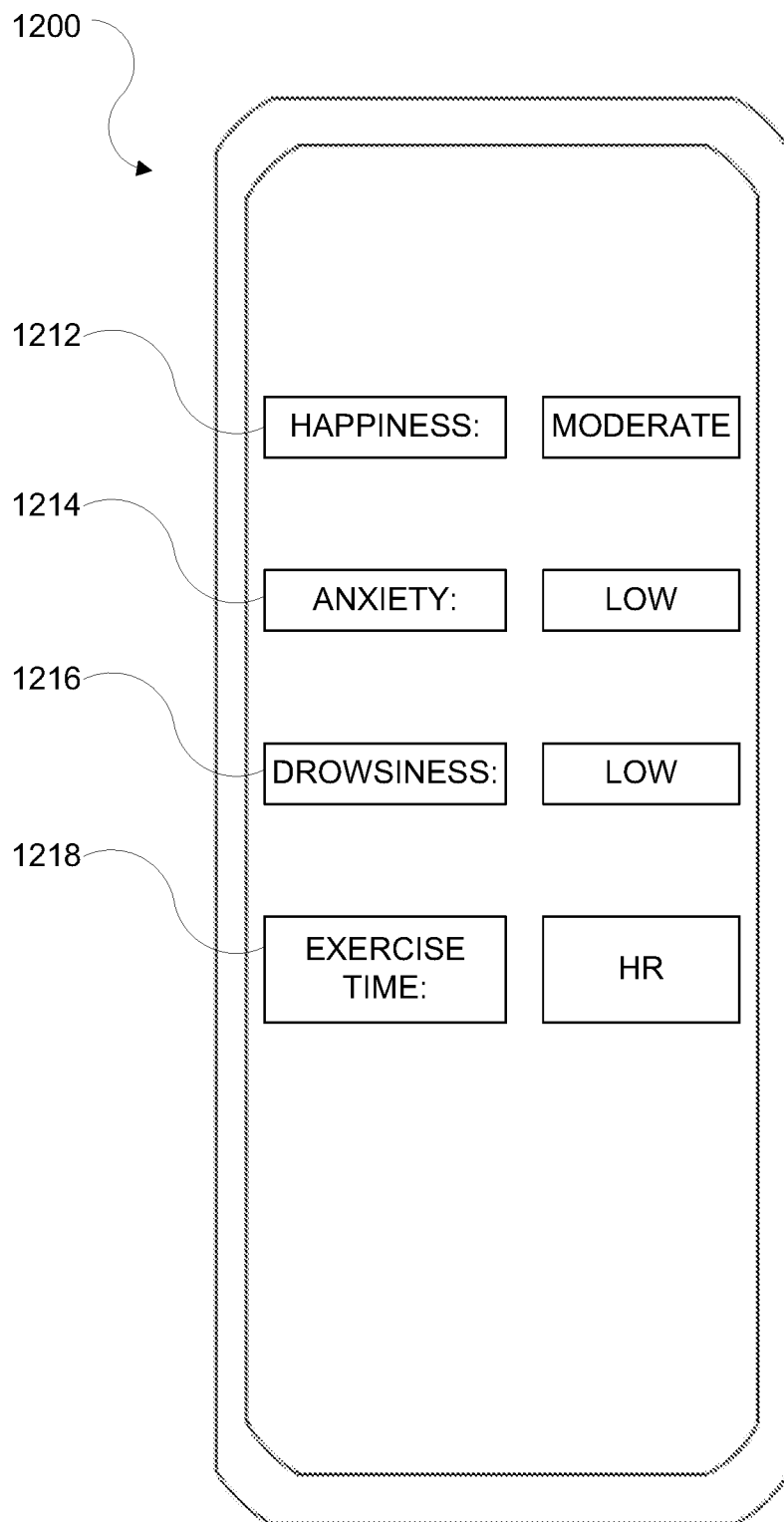


FIG. 12

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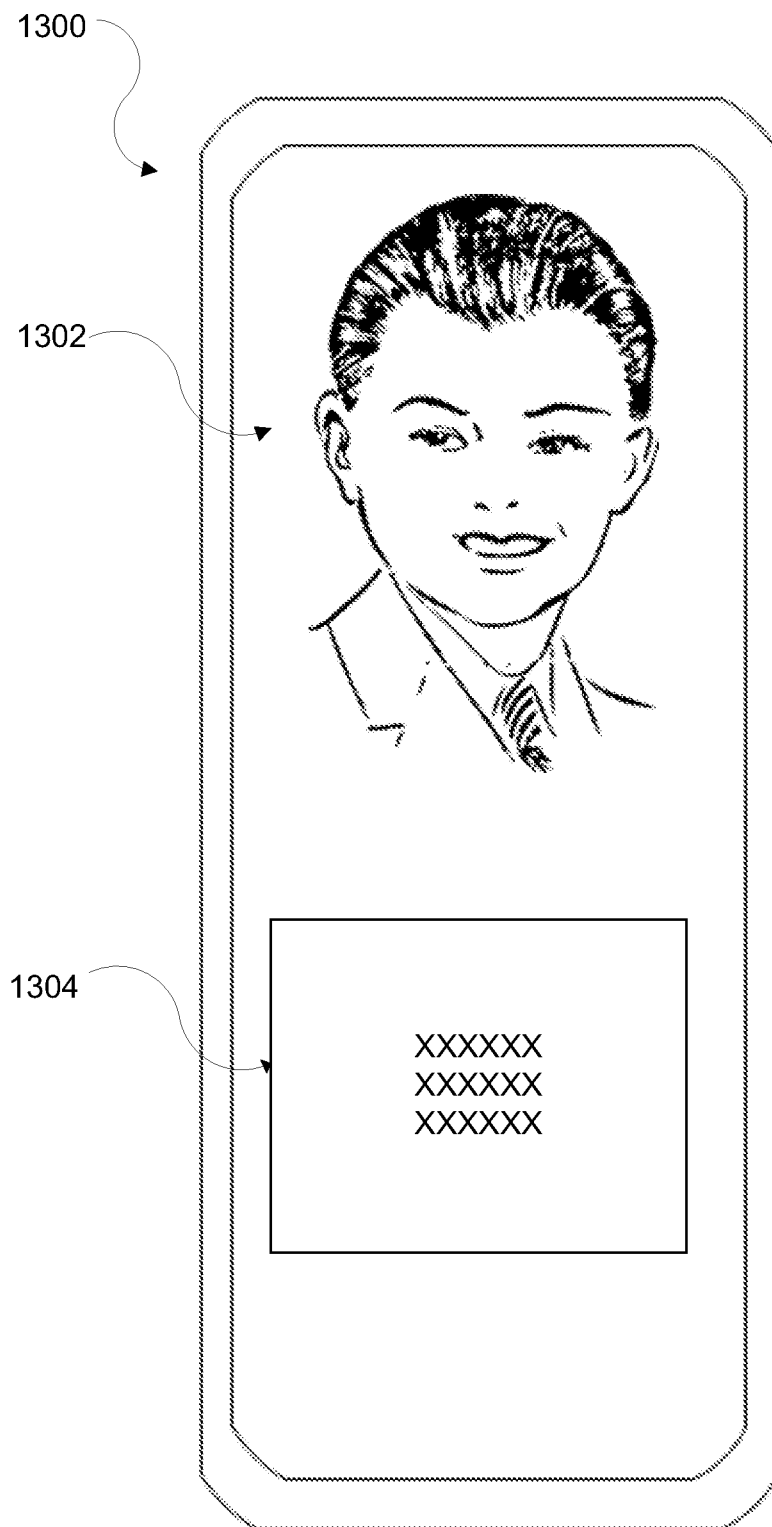


FIG. 13

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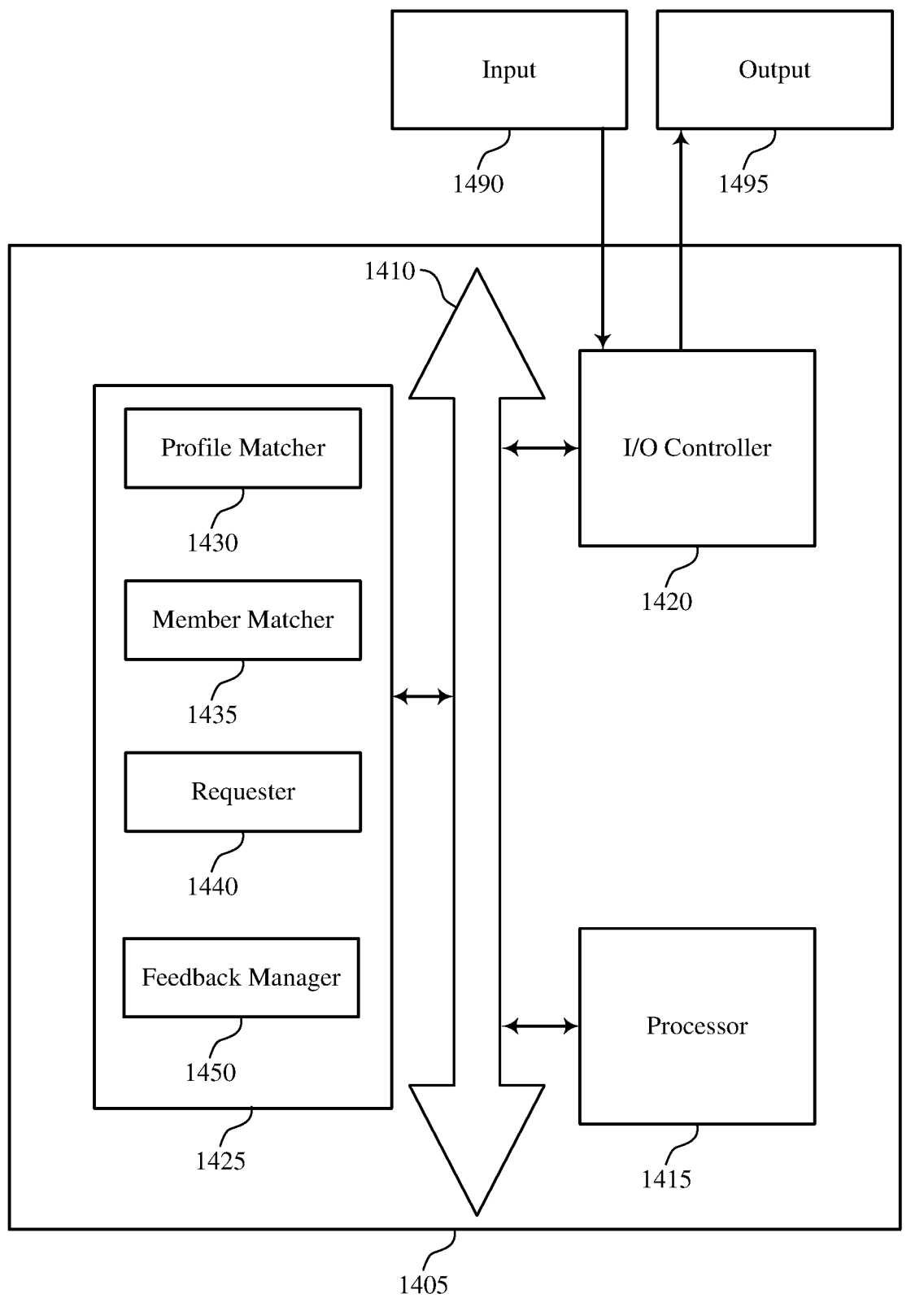


FIG. 14

1400

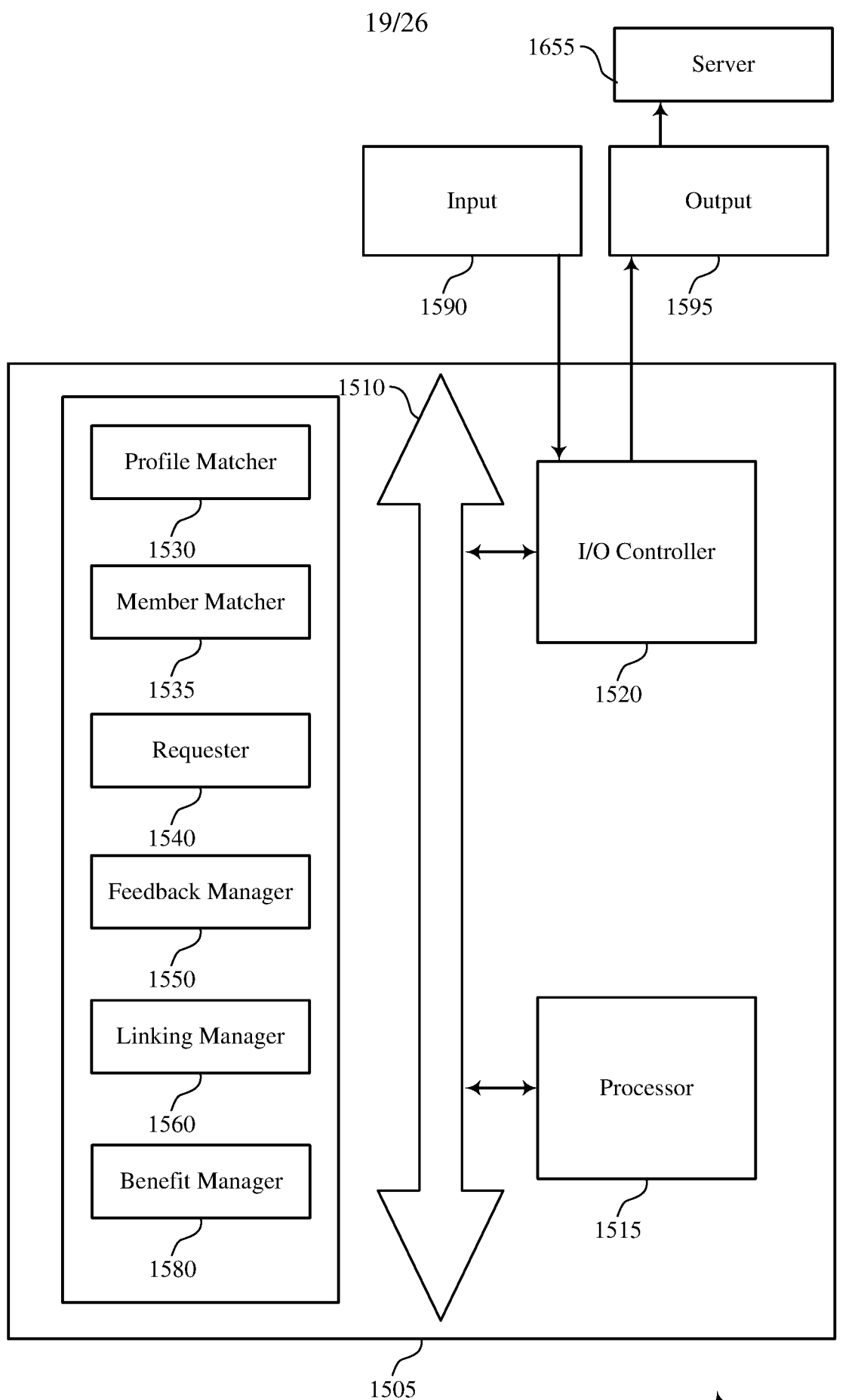


FIG. 15

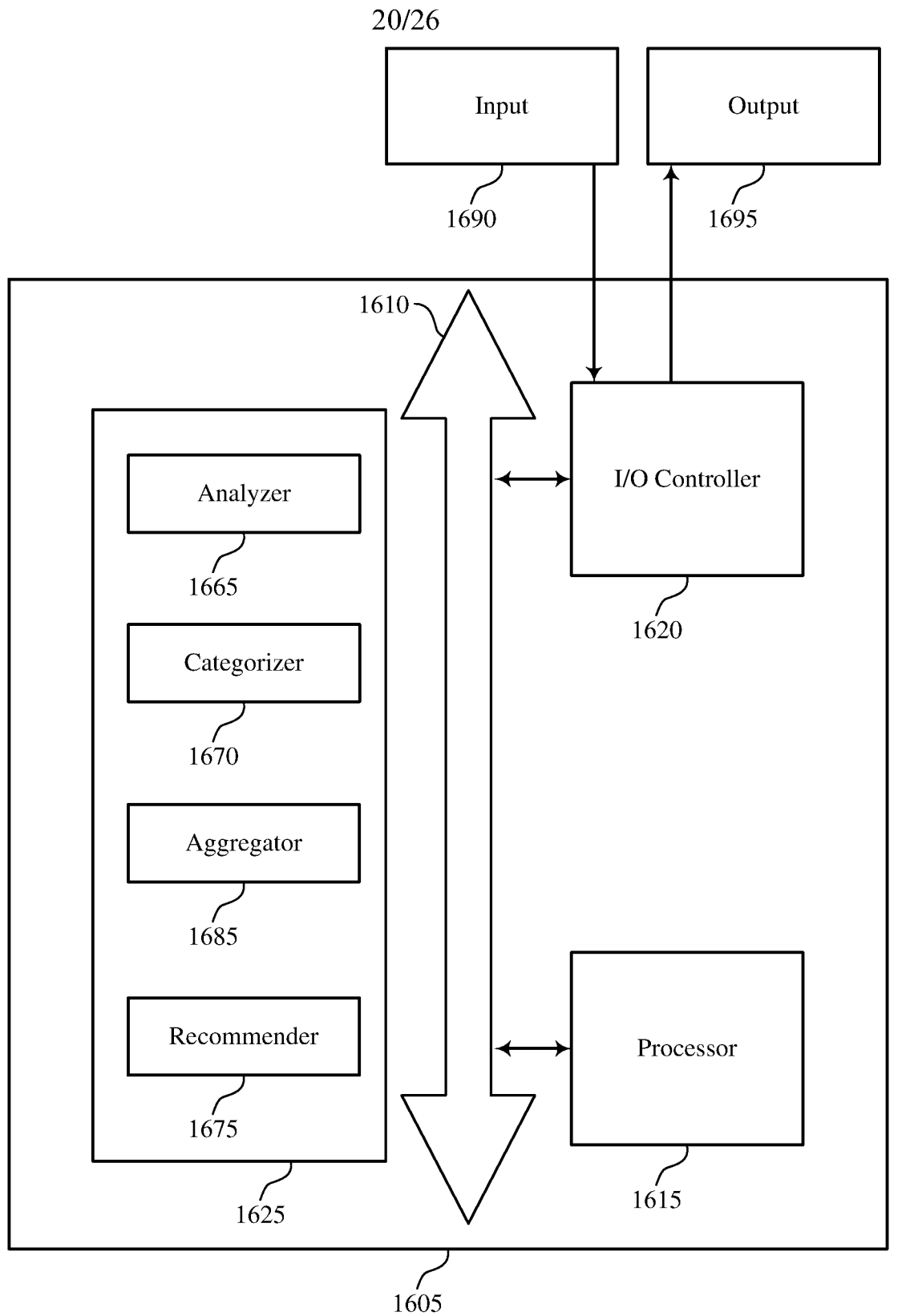


FIG. 16

1600

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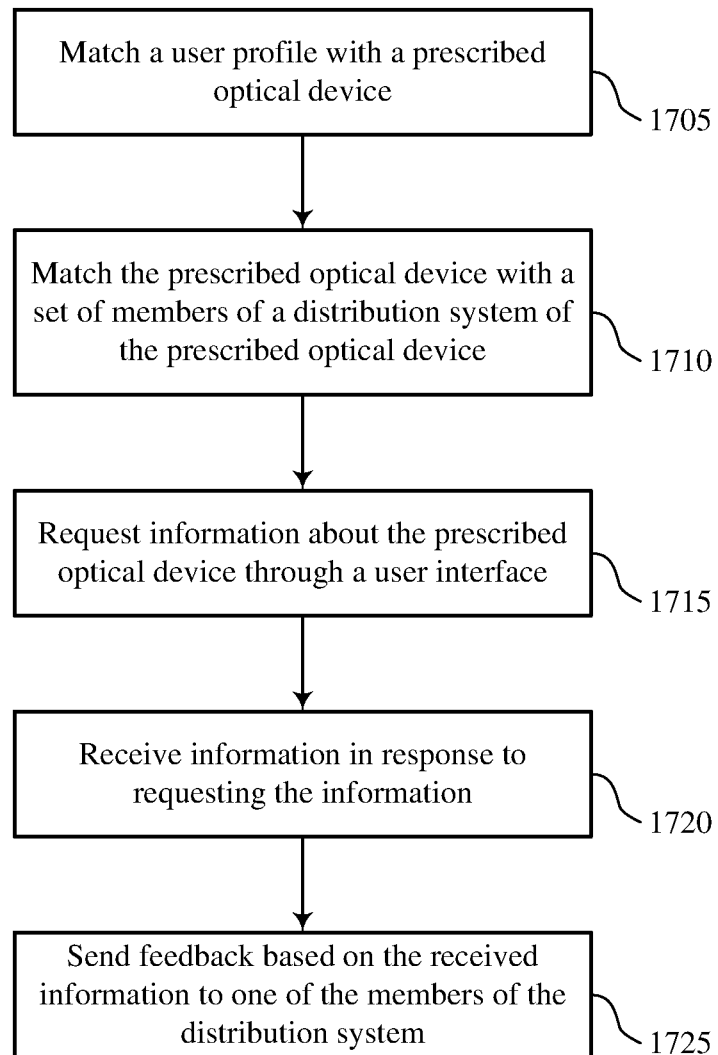


FIG. 17

1700

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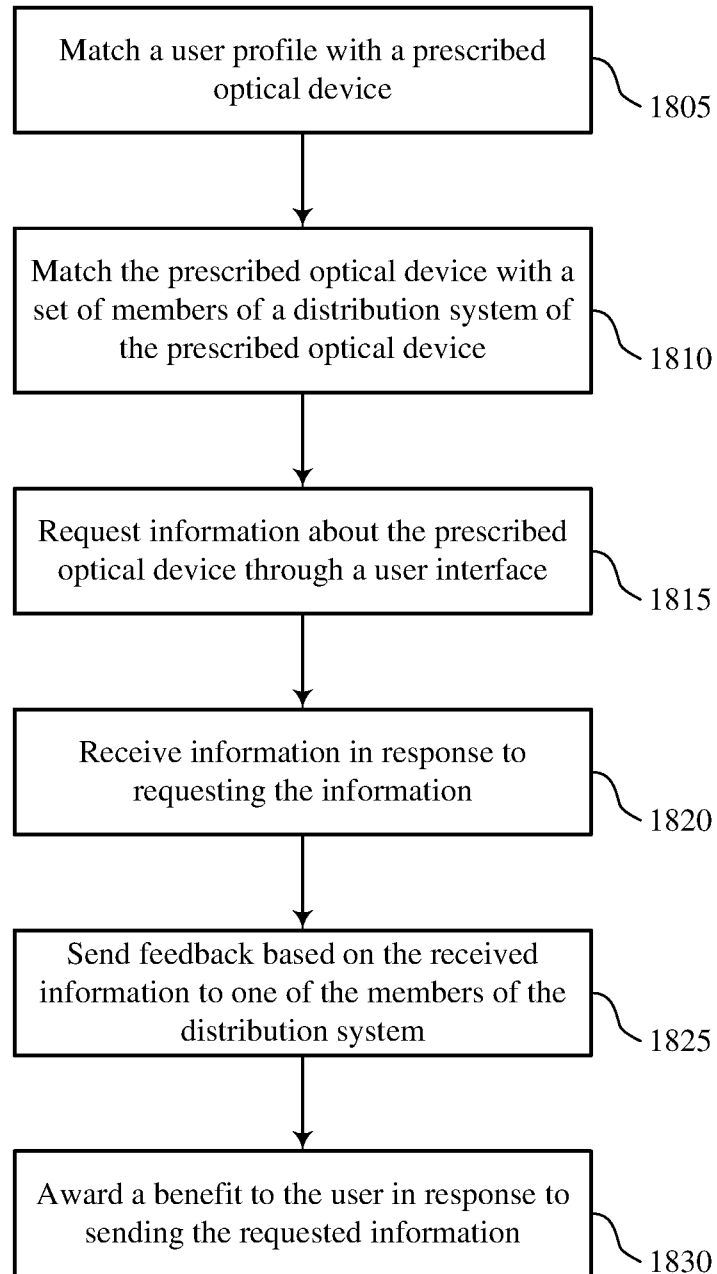


FIG. 18

1800

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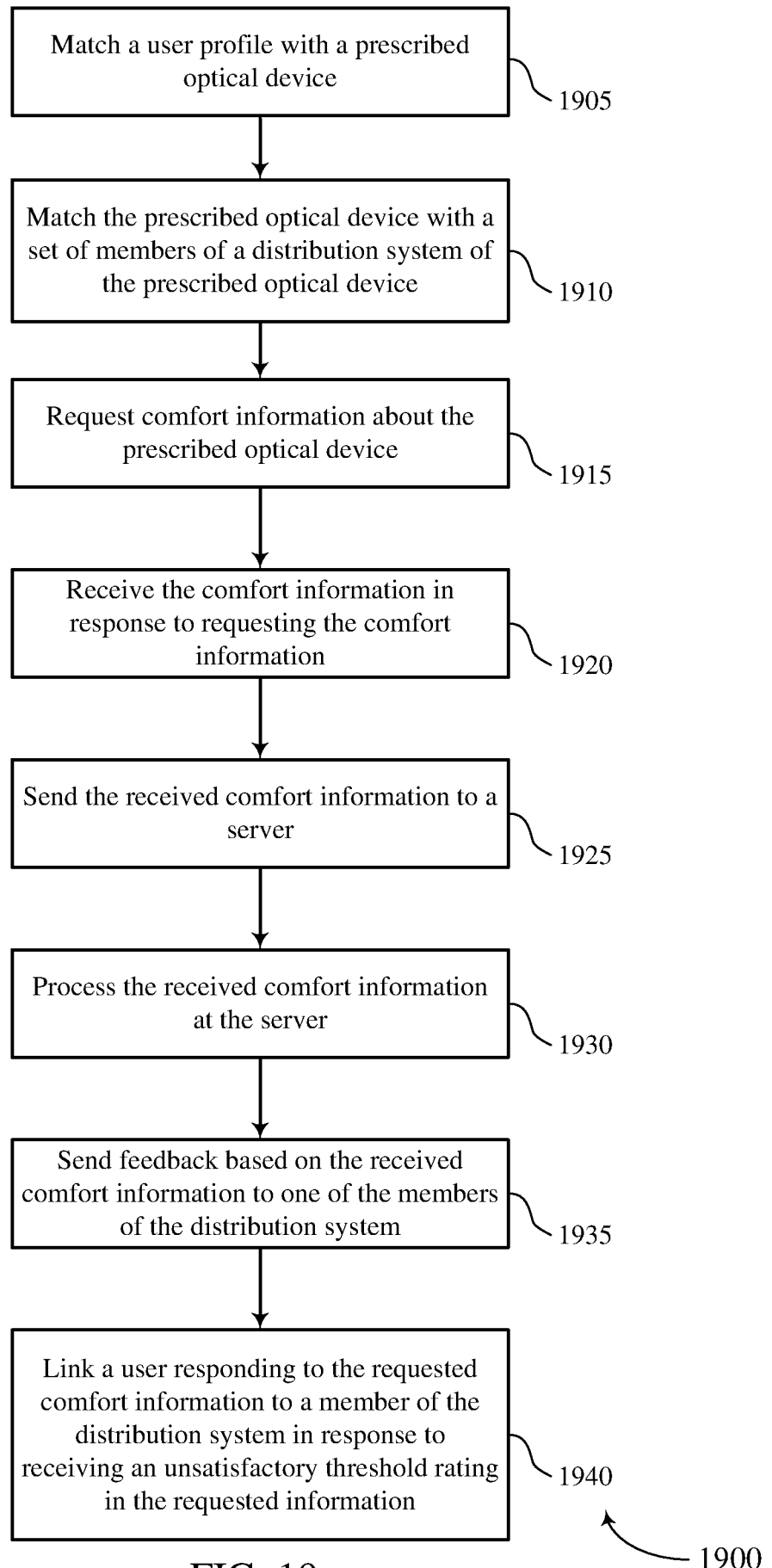


FIG. 19

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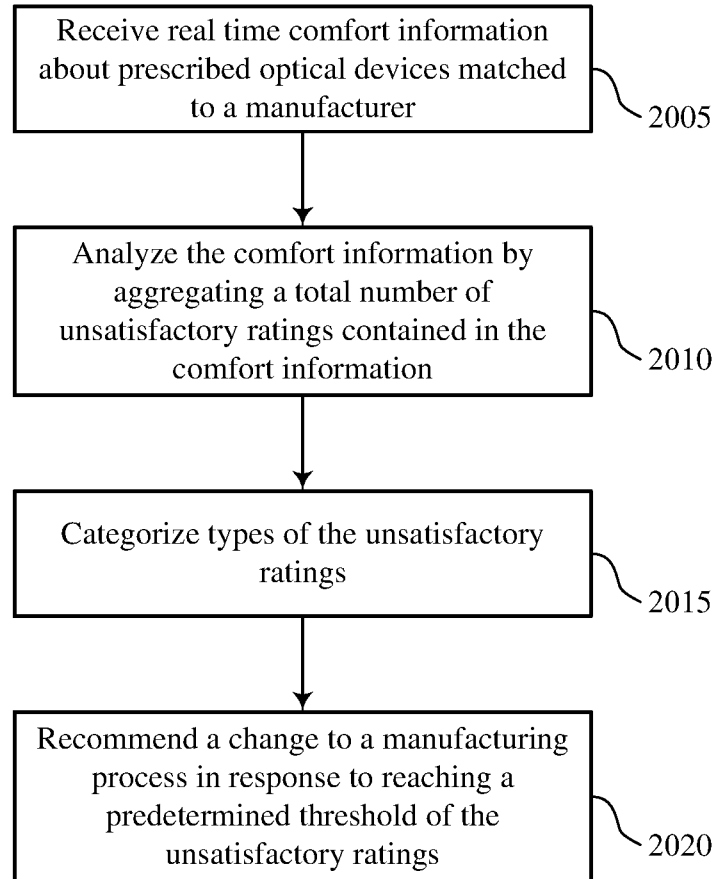


FIG. 20

 2000

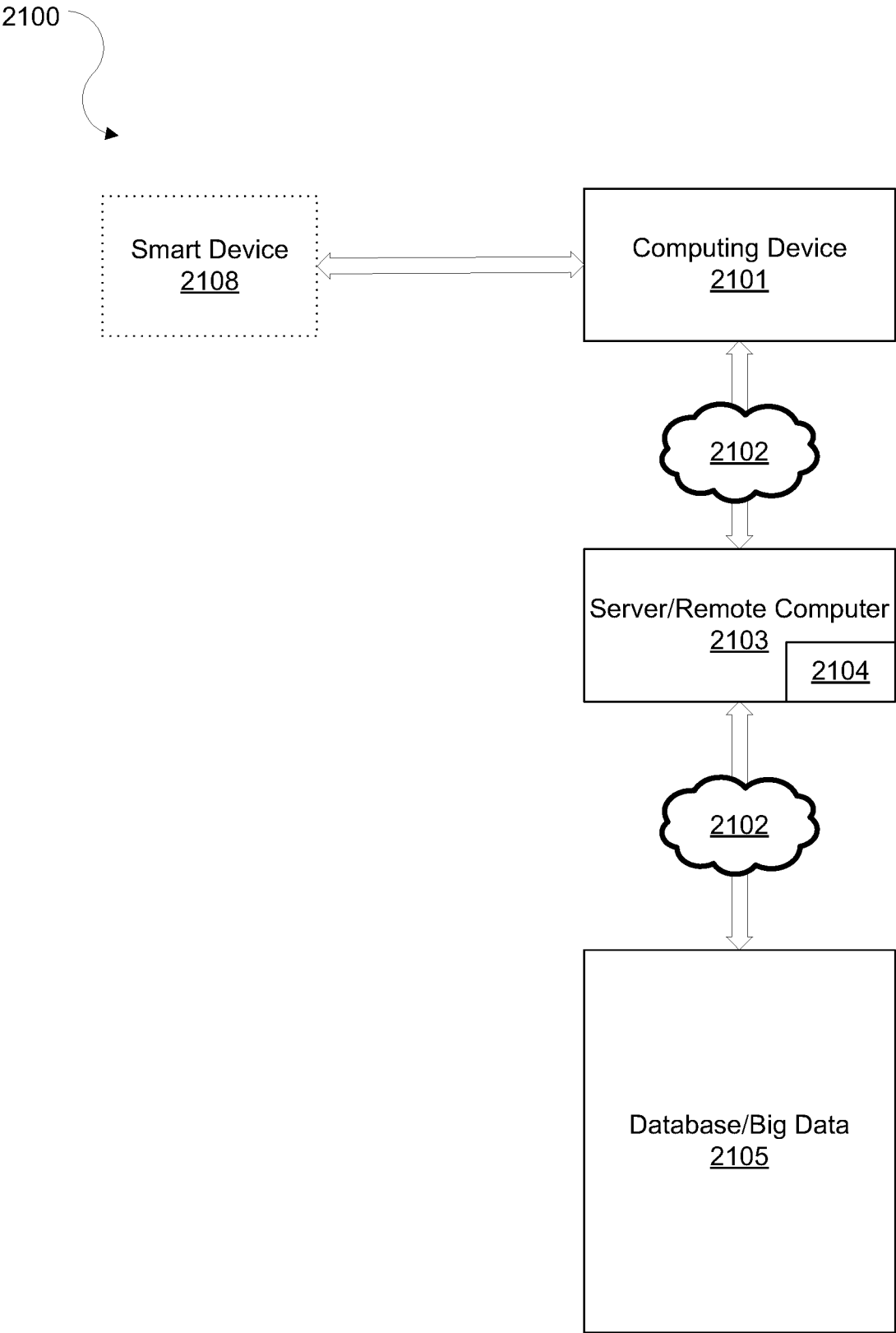


FIG. 21

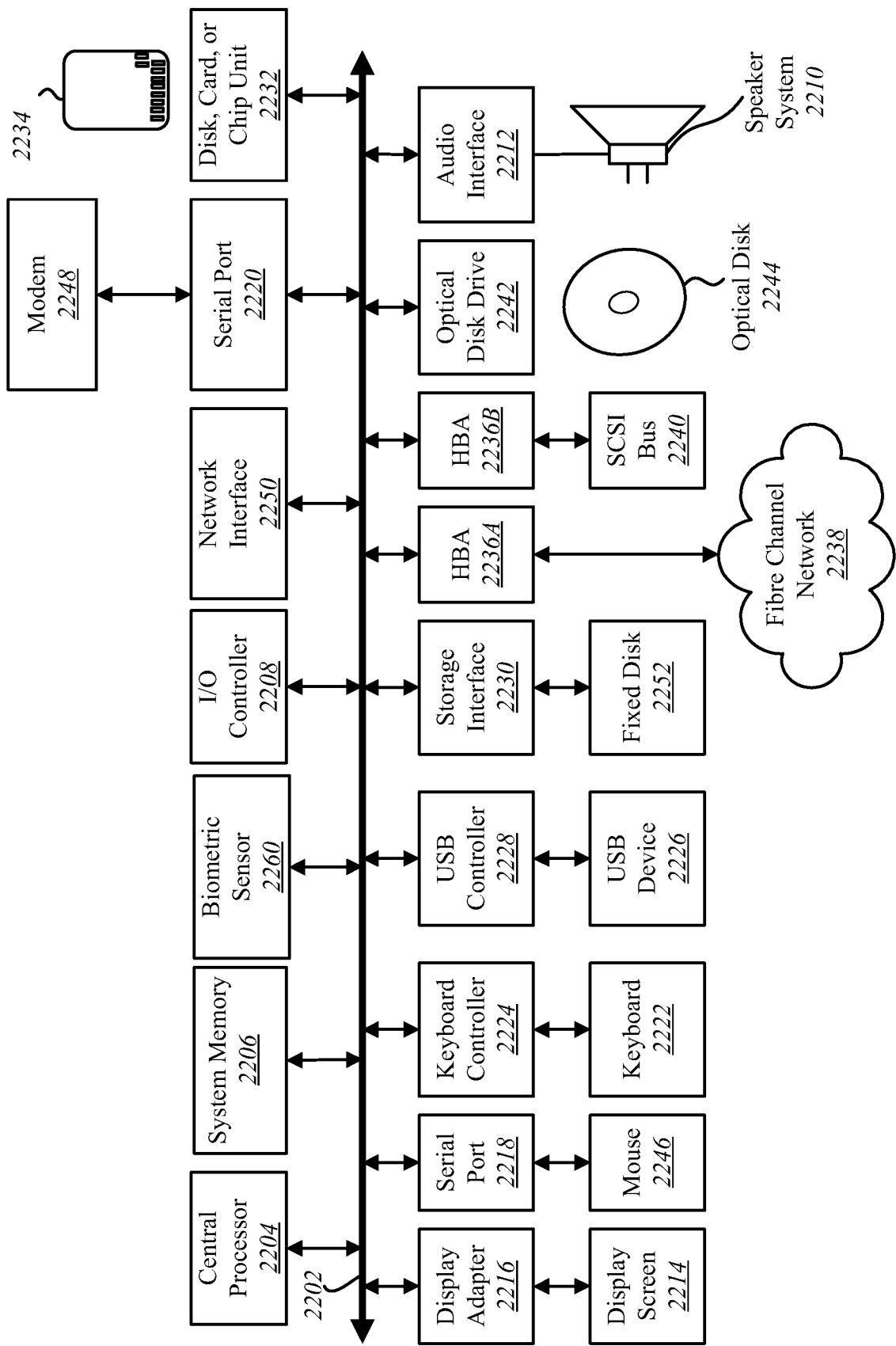


FIG. 22