FAST

Investigator and Institutional Scoping Brief

Immediate request: Help define, price, and supervise a narrow first study. FAST is not asking an institution to endorse a finished product or begin participant testing.

The research question

Can a qualified research team design and operate a controlled nutrition protocol that measures body composition, appropriate clinical markers, cognition, and basic physical performance with acceptable safety and participant burden? The investigator must refine the intervention, comparison, population, duration, endpoints, and stopping rules.

A staged, two-track program

TRACK 1	TRACK 2
Clinical and metabolic Nutrition protocol, adherence, tolerability, body composition, biomarkers, and basic function.	**Applied human performance** Validated measures of cognition, learning, decision-making, physical function, and skill retention.
This track comes first and establishes whether the core question is safe and measurable.	This remains a later, separately reviewed program with its own expertise and safety controls.

Phase 1 - study planning and protocol design

- Review the scientific premise and relevant literature.
- Define the population, intervention, comparison condition, endpoints, exclusions, and stopping rules.
- Prepare the statistical, data-management, medical-monitoring, ethics, and regulatory approach.
- Deliver an institutional scope, formal pilot budget, timeline, and recommended funding route.

Phase 1 is professional planning. It includes no participant intervention.

Phase 2 - small feasibility pilot, only after approval

Potential measures include adherence and tolerability, body composition, appropriate clinical and metabolic markers, brief validated cognitive measures, and basic low-risk physical-performance measures. The investigator and institutional review process determine the final protocol.

What the opening work should answer

- Can the nutrition protocol be studied safely and followed as designed?
- Can the research team collect reliable, interpretable measurements?
- What effect-size estimates and operational lessons can guide a later study?
- Is a larger clinical study scientifically justified?

What Art of Survival needs from an institution

1	A qualified principal investigator or scientific lead
2	The smallest credible Phase 1 planning scope and Phase 2 pilot
3	A written planning quotation, pilot estimate, and realistic timeline
4	Advice on contracts, ethics review, data, publication, intellectual property, and communications
5	A recommendation among industry sponsorship, state support, investigator-led grants, or STTR/SBIR

Planning ranges - not institutional quotations

Work package	Illustrative range
Phase 1: protocol, statistics, safety/ethics preparation, costing	$16,000-$55,000
Phase 2: small clinical feasibility pilot	$70,000-$260,000 plus applicable institutional indirect costs
Phase 3: later performance-battery development	$45,000-$190,000 plus applicable institutional indirect costs

A participating institution must replace these placeholders with its own formal budget.

Commercial direction

The recommended starting product is a **protocol and assessment platform**: a standardized workflow for approved nutrition-performance studies, measurement capture, scoring, quality control, and auditable reporting. The nutrition intervention is what the platform evaluates; it is not yet the commercial product. This direction must be tested with investigators, prospective users, and commercialization advisers before an SBIR/STTR application.

Research and safety boundary

No recruitment or human intervention has begun. The opening pilot excludes military recruitment, survival scenarios, drowning or breath-hold challenges, electrical incapacitation, chemical-agent exposure, weapons, and full-force assaults. Any human research would require qualified institutional leadership and all applicable ethics, medical, legal, and safety approvals.

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art-of-survival.com/pages/fast-study?view=mvni-investigator-brief