Informed Consent Form

Study public title	Can personalized nutrition plus resistance training improve muscle mass and function in older adults at risk of sarcopenia?
Scientific title	Effects of precision nutrition combined with structured resistance training on muscle mass and function in older adults at risk of sarcopenia: a randomized controlled trial
Version/date	Version 1.0 - 15 January 2026
Principal investigator	Yan Shi, Associate Professor
Institution	School of Physical Education, University of Sanya
Ethics reference	IRB-2026-001

Please initial each box after you have read the Participant Information Sheet and discussed any questions with the research team.

Consent statement	Initials
I confirm that I have read and understood the Participant Information Sheet for this study and have had sufficient opportunity to ask questions.	
I understand that participation is voluntary and that I may withdraw from further study participation at any time without giving a reason and without affecting my usual healthcare or services.	
I understand that I will be assigned by chance to one of two study groups and that I cannot choose the group to which I am assigned.	
I understand that both groups undertake supervised resistance training three times per week for 12 weeks and that the nutrition support differs between the groups.	
I understand the study assessments, including bioelectrical impedance analysis, handgrip testing, walking and chair-based performance tests, dietary records and training logs.	
I understand the foreseeable risks and inconveniences, including temporary muscle soreness, fatigue, musculoskeletal symptoms, dizziness or falls during exercise, and possible gastrointestinal discomfort associated with increased protein intake.	

I consent to authorized study staff collecting and using my study and relevant health information for the purposes described in the Participant Information Sheet.	
I understand that my information will be kept confidential as far as possible and that publications and registry records will not identify me personally.	
I understand that de-identified study data may be used for scientific reporting and may be shared for legitimate research purposes when permitted by ethics, confidentiality and institutional governance requirements.	
I freely agree to participate in this study.	

Participant name		
Participant signature		Date
Person obtaining consent		Date
Signature of person obtaining consent		

A copy of the signed consent form and Participant Information Sheet should be provided to the participant. The original signed form is retained securely in the study records.

Study and ethics contacts

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