

PUBLIC SUBMISSION

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Comment from Kai KETELHUT on VA-2026-VACO-0001-0223

Submitter Information

Name: Kai KETELHUT
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General Comment

See attached file(s)

Attachments

patient_action_protocol

Quantumthermostatic Remediation: Patient Action Protocol

1. Supervision & Medical Authority

SUPERVISING MEDICAL OFFICER Dipl.-Ing. Kai Olaf Ketelhut Berlin, Germany	TARGET INDICATION Specific Learning Disorder in Mathematics (Dyscalculia) & Cognitive Processing Anomalies
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2. Patient Responsibilities Across 3-Month Operational Sprint

Stage / Timeframe	Patient Operational Actions	Expected Engagement Outcome
Month 1 Baseline Calibration & Setup	• Complete initial sensory-motor rhythm alignment sessions. • Engage with web dashboard or mobile runtime modules under clinical supervision. • Establish baseline numerical symbol recognition routines.	Stabilization of neural interface rhythm patterns and reduction of transient register loss during basic arithmetic sequences.
Month 2 Active Multi- Platform Training	• Participate in structured daily cognitive remediation exercises via SaaS dashboards or embedded micro-stimulators. • Provide real-time feedback on visual display scaling to prevent cognitive overload. • Assist in recording performance logs for progress evaluation.	Enhanced spatial alignment and error reduction in complex logical processing and symbolic restructuring tasks.
Month 3 Consolidation & Review	• Undergo final progress evaluation sessions with the supervising medical officer. • Validate long-term memory stabilization metrics and cognitive maintenance strategies.	Achieving sustained arithmetic processing stability and long-term compensatory scaffolding.

3. Daily Patient Compliance Checklist

CORE DAILY REQUIREMENTS

- **Session Consistency:** Complete scheduled daily modular engagement windows on approved platforms (Web dashboard or Android runtime).
- **Frequency Compliance:** Maintain secure channel rhythm focus aligned with calibrated telemetry parameters.
- **Progress Reporting:** Report any cognitive fatigue or telemetry overload directly to the supervising medical officer for real-time display scaling.

Clinical Directive: Compliance with calibrated inertial thresholds is mandatory to ensure effective neural feedback and eliminate processing errors caused by transient memory loss.