

Table S1. 30-Items Frailty Index.

| <b>FRAILTY INDEX 30 ITEMS</b>      | <b>0 POINT</b>     | <b>0.5 POINT</b>  | <b>1 POINT</b> |
|------------------------------------|--------------------|-------------------|----------------|
| Bathing                            | Preserved          | Impaired          | Lost           |
| Dressing                           | Preserved          | Impaired          | Lost           |
| Toileting                          | Preserved          | Impaired          | Lost           |
| Transferring                       | Preserved          | Impaired          | Lost           |
| Continence                         | Preserved          | Impaired          | Lost           |
| Feeding                            | Preserved          | Impaired          | Lost           |
| Ability to Use Telephone           | Preserved          | Impaired          | Lost           |
| Shopping                           | Preserved          | Impaired          | Lost           |
| Food Preparation                   | Preserved          | Impaired          | Lost           |
| Housekeeping                       | Preserved          | Impaired          | Lost           |
| Laundry                            | Preserved          | Impaired          | Lost           |
| Mode of Transportation             | Preserved          | Impaired          | Lost           |
| Responsibility for Own Medications | Preserved          | Impaired          | Lost           |
| Ability to Handle Finances         | Preserved          | Impaired          | Lost           |
| BMI                                | < 25               | 25-29             | ≥ 30           |
| SPSMQ                              | 0-3                | 4-7               | ≥ 8            |
| MNA-sf                             | 12-14              | 8-11              | ≤ 7            |
| CIRS                               | 0                  | 1-2               | ≥ 3            |
| Number of Medication               | 0-3                | 4-6               | ≥ 7            |
| Co-habitation Status               | Living with Family | Institutionalized | Living Alone   |
| SPPB                               | 10-12              | 7-9               | ≤ 7            |
| History of Hypertension            | No                 | Suspect           | Yes            |
| History of Heart Failure           | No                 | Suspect           | Yes            |
| History of Ischemic Heart Disease  | No                 | Suspect           | Yes            |
| History of Diabetes                | No                 | Suspect           | Yes            |
| History of Stroke                  | No                 | Suspect           | Yes            |
| History of Chronic Renal Failure   | No                 | Suspect           | Yes            |
| History of Chronic Liver Failure   | No                 | Suspect           | Yes            |
| History of COPD                    | No                 | Suspect           | Yes            |
| History of Cancer                  | No                 | Suspect           | Yes            |
| <b>TOTAL SCORE</b>                 |                    | <b>/30 =</b>      |                |