

**Table 1. Characteristics of the cohort.**

<b>Variable</b>	<b>Interviewed, N=50</b>
<b>Age, years</b>	65 (58 – 72)
<b>Male sex (no., %)</b>	24 (48%)
<b>Race (no., %)</b>	
<b>White</b>	34 (68%)
<b>Black</b>	16 (32%)
<b>Body mass index</b>	27.9 (21.8 – 34.0)
<b>Current or former smokers</b>	30 (60%)
<b>Hospital length of stay, days</b>	36 (28 – 47)
<b>Education level</b>	
Some high school or less	4 (8.3%)
High school diploma or GED	22 (44%)
Vocational school	4 (8.3%)
College Degree (BA or BS)	15 (31%)
Advanced degree	5 (10%)
<b>Functional Status prior to hospital admission</b>	
Lives at home, independent in all ADLs	42 (84%)
Lives at home, independent in some ADLs	3 (6%)
Lives at home, dependent on others for all ADLs	5 (10%)
<b>LTACH length of stay, days</b>	41.5 (23 – 65)
<b>Discharge destination</b>	
Acute rehabilitation	20 (40.0)
Skilled care facility	15 (30.0)
Rehospitalization	6 (12.0)
Home*	7 (14.0)
Hospice	2 (4.0)

Categorical variables are presented as counts and percentages; continuous variables are presented as medians and interquartile ranges for non-normally distributed variables).

\*1 patient discharged to drug rehabilitation.

**Table 2.** Neuropsychological and physical outcomes and health-related quality of life.

Variable	Performance
Cognition, MoCA score – median (IQR)*	23 (19 – 26)
Cognitive impairment – no. (%) *	
None	13 (26.5)
Mild	25 (51.0)
Moderate or severe	11 (22.5)
Anxiety – no. (%) **	
Mild	10 (20)
Moderate or severe	16 (32)
Depression – no. (%) **	
Mild	11 (22)
Moderate or severe	9 (18)
Symptoms of PTSD – no. (%) ***	11 (22.5)
ICU-acquired weakness – no. (%) ****	40 (80)
Health-related quality of life, EuroQol	
Descriptive score (5 – 25) ‡	13 (10 – 16)
Visual analogue scale (0 – 100)	50 (30 – 60)

*Definition of abbreviations:* MoCA = Montreal Cognitive Assessment; PTSD = post-traumatic stress disorder.

\* Mild cognitive impairment was defined as a score of 18-25, and moderate or severe impairment as <18); 49 patients completed testing.

\*\* Determined by Hospital Anxiety and Depression Scale (HADS).

\*\*\* Determined by Post-Traumatic Stress Syndrome 10-Questions Inventory (PTSS-10); 49 patients completed testing.

\*\*\*\* Determined by the Medical Research Council (MRC) assessment for physical impairment. MRC < 48 = ICU-acquired weakness.

‡ Greater score represents more perceived problems in dimensions assessed.

**Table 3.** Goals and goal attainment in the LTACH setting.

<u>Goal</u>	<u>Median Rank</u>	<u>Number of Times Ranked</u>	<u>Salience *</u>	<u>Attainment of Ranked Goals**</u>
Eating and drinking	2.5 (2 – 3)	40	100	87.5 (35/40)
Toileting	4 (3 – 5)	22	88	18.2% (4/22)
Walking	3 (2 – 4)	29	87	20.7% (6/29)
Returning home	3 (1 – 4.5)	24	72	12.5% (3/24)
Breathing comfortably	3 (1 -4)	23	69	100% (23/23)***
Speaking	2 (1 – 2)	33	66	96.9% (32/33)
Less anxious/depressed	4 (3 – 5)	14	56	n/a
Grooming	3.5 (3 – 5)	14	49	35.7% (5/14)
Being pain free	3.5 (1 – 5)	14	49	n/a
Thinking clearly	4 (2 – 4.5)	12	48	n/a
Resuming work or leisure activities	4 (1 – 4)	11	44	n/a
Relationships	3	1	3	n/a
Caring for one's self	2	1	2	n/a

\* Salience was defined as the product of average rank and number of times ranked.

\*\* At time of LTACH discharge; denominator aligned with the number of times the given goal was ranked.

\*\*\* Defined as being liberated from the ventilator for  $\geq 72$  hours.

**Table 4.** Diet recommendation at time of FEES and then at LTACH discharge.

<b>Variable</b>	<b>Diet at FEES Exam</b>	<b>Diet at Discharge</b>
Regular diet	1 (2)	18 (36)
Chopped diet	13 (26)	9 (18)
Regular with nectar thick liquids	0 (0)	2 (4)
Chopped diet with nectar thick liquids	9 (18)	8 (16)
Ground diet with nectar thick liquids	2 (4)	1 (2)
Pureed or full liquid diet	18 (36)	6 (12)
NPO	7 (14)	6 (12)

**eFigure 1** Quality of Life Goals Inventory

Instructions: During this portion of the interview, we are interested in learning what is important to you in terms of objectives during this admission. I am going to show you a list of 12 goals that we will review together that you may have been thinking about as goals that you are working towards. After we review them, please select the five cards, and rank order them, that best describe your top 5 objectives at the end of your rehabilitation. If there is a goal that is not included, you are encouraged to include that goal in your list as well.

Speaking

Eating and drinking

Walking

Breathing better (off the ventilator)

Toileting yourself

Grooming yourself

Resuming work or leisure activities

Being pain free

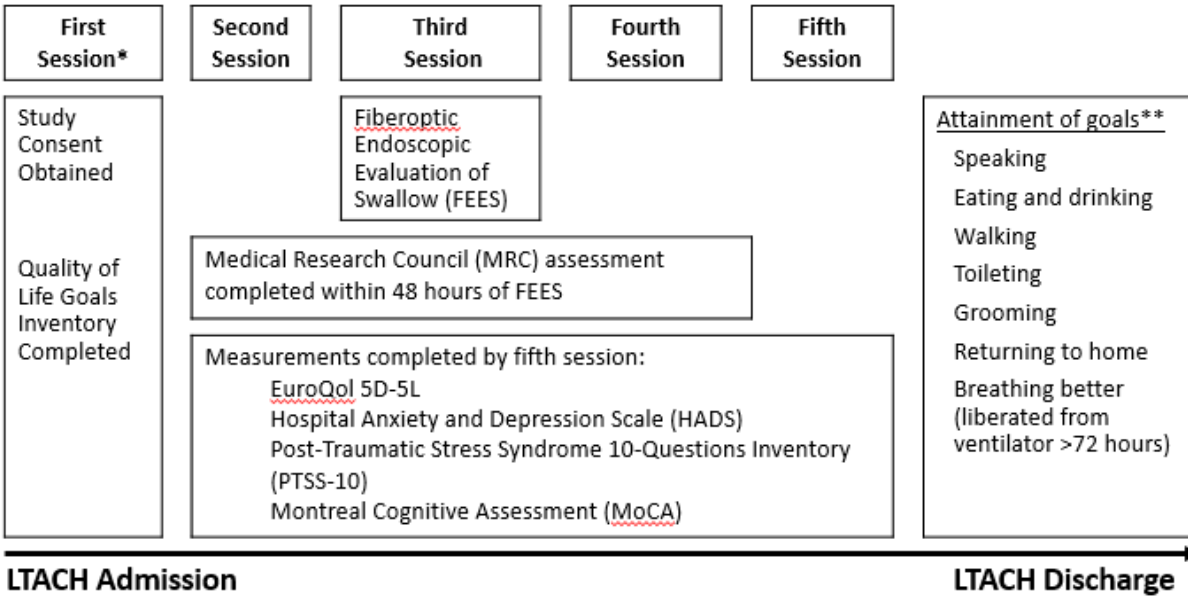
Being less anxious or depressed

Returning (to prior residence) home

Thinking clearly

\_\_\_Other

Goals were provided in random order on note cards printed in 72 font.



**Figure 1. Study timeline.** \*Session= Speech and Clinical Bedside Swallow Evaluation (CBSE). Sessions were performed every 1-2 days during weekdays. The median time to first session after LTACH admission was 4 days (IQR 1-13). \*\*Patient goals ranked as part of Quality of Life Goals Inventory.

Figure 2 Flow of Patients in Study Cohort.

