#### Semistructured interview guide

Question	Probing:	Answers
<b>Basic information</b>		
Occupation:		
Familiarity with CFS:	Defined as any type of education or assessment of frailty using the CFS questionnaire.	
Questionnaire		
What were your overall impressions of the questionnaire?		
How did you find the process of completing the questionnaire?	<ul> <li>Could you elaborate on any difficulties you faced?</li> <li>Were there any questions that were confusing or challenging?</li> <li>Did you feel uncertain while completing it or while discussing it with the patient?</li> </ul>	
Did the questionnaire provide you with greater insight into the patient's frailty?	- Can you elaborate?	
Question 1		
How did you interpret the question?		
How did you interpret the response options?		
Question 2		
How did you interpret the question?	How did you understand the list of activities provided?	
How did you interpret the response options?		
Question 3		
How did you interpret the question?	How did you understand the list of activities provided?	
How did you interpret the response options?		
Question 4		
How did you interpret the question?	How did you understand the term "chronic conditions" in the questionnaire	
How did you interpret the response options?		
Question 5		
How did you interpret the question?		
How did you interpret the response options?	How well do you think the response options are distributed in terms of difficulty?	
Question 6		

How did you interpret the question?	How do you interpret the term "udfordrende" in this context? Could you explain what it means to you?	
How did you interpret the	How well do you think the response options are	
response options?  Question 7	distributed in terms of difficulty?	
How did you interpret the question?	How do you interpret the phrase "moderate eller anstrengende sports- eller fritidsaktiviteter"? Could you explain what it means to you?	
How did you interpret the response options?	How well do you think the response options are distributed in terms of difficulty?	
Classification tree		
How did you find using the classification tree to determine the category?	Can you elaborate? Were there any challenges you faced or aspects you were unsure about? Were there any instances where the questionnaire and the classification tree did not seem to align?	

Supplementary material from Stage 1 to Stage 5

Stage 1: Translation			
false cognate	Translating "doctor" to "[doctor]" instead of "[læge]."		
idiomatic error	Translation "two weeks" to "[14 dage]", instead of "[to uger]."		
contextual error	Translating "conditions" in to "[forhold]" instead of "[tilstande]."		
semantic	Translating "effort" into "[kamp]" instead for "[krævende]."		
translation error			
translation	"Some of the time (1-2 days)" was translated into "[Noget af tiden (1-2 dage)]"		
variation	and "[Nogle gange (1-2 dage)]."		

Stage 4: Expert committee review				
Semantic	Instrumental daily activites" was inital translated to "[instrumentelle daglige			
differences	aktiviteter]" was revised to "[komplekse daglige aktiviteter]", as the term is			
	used in the Danish translation of CFS.			
	"Typical" was changed to "[normal]" because it was assessed that the termber			
	reflected the patient's health status before the illness.			
	"[Middelmådigt]" was changed to "[nogenlunde]" because "[middelmådigt]"			
	was understood as a description midway between the extreme categories.			
	In question seven, "seldom" was translated to "[sjældent]," but "[sjældent]" wa			
	considered unsuitable for a person over 65 who engages in sports up to twice a			
	week. Therefore, it was changed to "[nogle gange]." This also ensured that the			
	response options were consistent between questions 6 and 7.			

Stage 5: Pretest	t		
Question 1	Everybody understood "terminally ill" as a disease or condition that is expected		
	to lead to death within a relatively short period (6 months or less).		
Question 2	Everyone understood the question as intended. Three people struggled with		
	scoring a patient with a long-term condition (6-12 months) and were expected		
	to become more independent, though not necessarily as independent as before.		

Question 3	Everyone understood the question as intended. Twenty-two people felt it
	covered both cognitive and functional aspects, while seven were unsure.
Question 4	All participants agreed it was independent of whether the condition required
	medical treatment or surgery as long as a doctor had been involved, and it
	lasted 6 months.
Question 5	Everybody understood the question as intended. Twenty-three out of thirty
	directly questioned the patient, while the remaining participants based their
	assessment on the patient's self-reported health and age-related health status.
Question 6	This question was described as the most difficult. "[Udfordrende]" was
	understood by everyone as "[krævende]," "[svært]," or "[hårdt]", covering both
	physical and mental challenges. Four out of 30 suggested changing
	"[udfordrende]" to "[krævende]," while 26 felt it was appropriate. Twenty-
	seven out of 30 asked the patient directly, and three assessed it based on the
	consultation.
Question 7	Everyone understood the question as referring to an activity beyond what is
	mentioned in questions 1 and 2. Six participants believed a walk over 5 km
	counted as a moderate sport for patients over 65, while two thought it only
	counted if it was over 10 km. Eight did not consider any walk, regardless of
	distance, to count.

Clinical Frailty Scale (CFS), Questionnaire, Danish

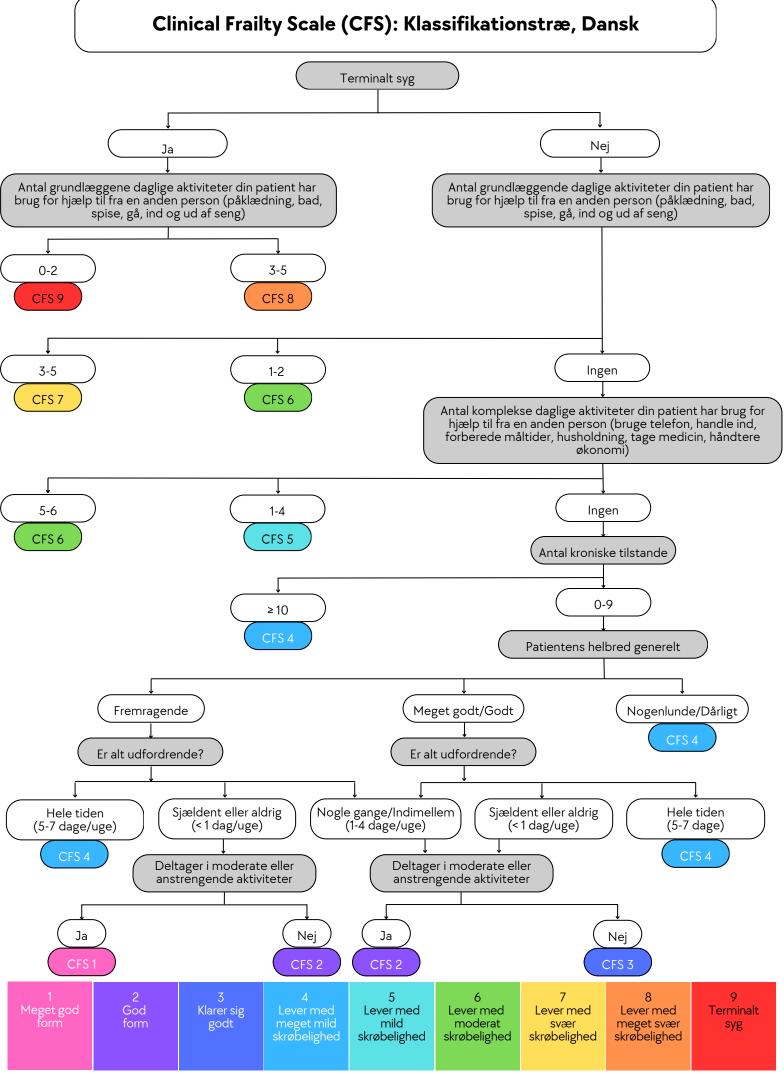
#### Clinical Frailty Scale (CFS): Spørgeskema, Dansk (kort version)

For hvert spørgsmål skal du sætte kryds i den boks, der bedst beskriver din patients sædvanlige helbredstilstand.

Hvis patienten i øjeblikket er svg. skal du tænke på deres helbredstilstand for cirka to uger siden.

Tivio patier	illeri i bjeblikket er syg, skar	du tærike på deres	neibieustiistanu ioi ciika t	o uger sideri.
1) Er patienten term	ninalt syg?			
	Ja		Nej	
2) Hvor mange af fø	olgende grundlæggende (	daglige aktivitete	er har din patient brug f	or hjælp til fra
en anden person?				
-	på (inklusive at tage sokker	og sko nå)		
2) At tage et karba	•	og sko paj		
3) At spise	ia chei brasebaa			
4) At gå				
5) At komme ind o	og ud af sengen			
		1 - 2 aktiviteter	۲ ـ	5 aktiviteter
Inger	11	1 - Z aktivitetei	3-	J aktivitetei
3) Hvor mange af fø en anden person? *	elgende komplekse daglig	ge aktiviteter haı	din patient brug for hja	elp til fra
1) At bruge telefor	nen (inklusive at finde kontal	(ter og ringe on)		
2) At handle daglig		(tel og illige op)		
	res egne måltider (inklusive :	at planlægge og till	herede fulde måltider)	
	gt arbejde (inklusive tungt hu		berede raide mailider)	
	gen medicin (inklusive at do	• .	len rigtige dosis nå det rett	-a tidenunkt)
, ,	res egen økonomi (inklusive			te tidspulikt)
•	•	0 0	•	ro
	eter, som patienten aldrig h			
Ingen	1	1 - 4 aktiviteter	5 -	6 aktiviteter
<b>A</b> 11				
_ ·	iiske tilstande har en læg	=	: din patient med, som 1	orventes at vare
eller allerede nar val	ret i 6 måneder eller mer	ef		
	0 - 9 tilstande		10 eller flere tilsta	nde
5) Generelt, vil din p	patient sige, at deres hel	bred er:		
Fremragende	Meget godt	Godt	Nogenlunde	Dårligt
6) Hvor ofte føler di	in patient på en normal u	ige, at alt, hvad d	le foretager sig, er udfo	rdrende?
ældent eller aldrig	Nogle gange		Indimellem	Hele tiden
Mindre end 1 dag)	(1 - 2 dage)		(3 - 4 dage)	(5 - 7 dage)
7) På en typisk uge,	hvor ofte deltager din p	atient i moderat	e eller anstrengende sp	orts- eller
· /. •	ီsom dans, golf uden vog		•	
Aldrig	Nogle gange	, ,	Indimellem	Hele tiden
Aldrig	(1 - 2 dage)		(3 - 4 dage)	(5 - 7 dage)

Clinical Frailty Scale (CFS), Classification Tree, Danish



Bland-Altman plot illustrating the agreement between the two observers.

Each point represents one paired observation (n = 41). The x-axis represents the mean of the two observers scores, while the y-axis shows the difference between them The solid blue line represents the mean difference (bias), while red dashed lines represent the 95% limits of agreement, indicating the range within which 95% of differences are expected to lie.

Points aligned with even numbers on the x-axis and at 0.0 on the y-axis indicate exact agreement between observers on the CFS score. Points at  $\pm 1$  on the y-axis reflect disagreements of one category. Discrepancies occurred mainly within CFS categories 2 to 7. The plot highlights the precision and bias between the methods, with the 95% limits of agreement shown as the dashed lines.

