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Appendix S1. List of collected variables

Collected Variable	Possible Outcomes
Sending hospital	Name
Patient repatriated before arrival at Rehab	Yes/No
Age	Numeric value
Type of ABI	TBI, Tumour, Ischemic Stroke, Hemorrhagic Stroke, Other
First documented GCS	1-15
Surgical Treatment	Yes/No
Use of antipsychotic medications in acute care	Yes/No
Number of comorbidities	Numeric value
Previous mental health diagnosis	Yes/No
Home within greater Toronto Area	Yes/No
Employment status	Yes/No
Co-habitation with another person	Yes/No
Stairs within home	Yes/No
Bathroom on main level in home	Yes/No
Home dwelling type	House, apartment, assisted living, shelter/rooming house
Smoking status	Yes/No
Driving status	Yes/No
Date of ABI	Date
Length of time before transfer to rehabilitation	Number of days
Known adverse events in rehabilitation	Yes/No
Transfer back to acute care	Yes/No
Target discharge date	Date
Actual discharge date	Date
Non-Operative Treatment	Yes/No
Admission FIM	Numeric Value
Discharge FIM	Numeric Value
For TBI patients only:	
Galveston Orientation and Amnesia Test	0-100
Post-traumatic amnesia on admission	Yes/No
Date out of PTA per GOAT score	Date
Injury Severity	Mild GCS 12-15, moderate GCS 9-12, severe GCS 1-8
Rancho Los Amigos Scale	1-8