

**Table S2** Measures included in the Koori Growing Old Well Study Phase 2 “gold standard” medical assessment.

<b>Measure</b>	<b>Description/comment</b>	<b>Reference</b>
General medical history	Document vascular risk factors, history of neurological disorders, psychiatric disorders, etc.	-
Medications	List current medications and indication.	-
Personal and family history	Briefly review place of birth, education, parents’ medical history, siblings, marital status and any children.	-
Physical Examination	Includes blood pressure, assessment of atrial fibrillation, handedness, and qualitative assessment of language and attention.	-
Neurology of Ageing Examination – Revised	Assessment of reflexes, vibration sense, cranial nerves, gait and extrapyramidal signs.	Waite, L. M., Broe, G. A., Creasey, H., Grayson, D., Edelbrock, D. and O’Toole, B. (1996). Neurological signs, aging, and the neurodegenerative syndromes. <i>Arch Neurol</i> , 53, 498-502.
Unified Parkinson Disease Rating Scale (UPDRS)	Standardised scale for Parkinson disease.	Movement Disorder Society Task Force on Rating Scales for Parkinson's Disease. (2003). The Unified Parkinson's Disease Rating Scale (UPDRS): status and recommendations. <i>Mov Disord</i> , 18, 738-750.

<b>Measure</b>	<b>Description/comment</b>	<b>Reference</b>
Addenbrooke's Cognitive Examination – Revised	Cognitive assessment of attention/orientation, memory, language, verbal fluency and visuospatial skills.	Mioshi, E., Dawson, K., Mitchell, J., Arnold, R. and Hodges, J. R. (2006). The Addenbrooke's Cognitive Examination Revised (ACE-R): a brief cognitive test battery for dementia screening. <i>Int J Geriatr Psychiatry</i> , 21, 1078-1085.
Verbal memory	Modified Story A from Logical Memory test (Parts 1 and 2).	Wechsler, D. (1997). <i>Wechsler Memory Scale 3rd Edition (WMS-III)</i> : Psychological Corporation.
Digit Span	Auditory verbal attention span and working memory.	Wechsler, D. (1997). <i>Wechsler Memory Scale 3rd Edition (WMS-III)</i> : Psychological Corporation.
Oral Trail Making Test	Information processing speed and mental flexibility.	Ricker, J. H., Axelrod, B. N. and Houtler, B. D. (1996). Clinical validation of the oral trail making test. <i>Neuropsych Neuropsych Be</i> , 9, 50-53.
Contact Person (CP) report of history, cognitive symptoms and decline	Verify participant report and document any cognitive decline – nature, duration, and gradual or stepwise onset and progression.	-
Cognitive Fluctuation questions	Assess signs of Lewy body dementia with CP.	Ferman, T. J., <i>et al.</i> (2004). DLB fluctuations: specific features that reliably differentiate DLB from AD and normal aging. <i>Neurology</i> , 62, 181-187.

<b>Measure</b>	<b>Description/comment</b>	<b>Reference</b>
Cambridge Behavioural Inventory – Short form	Screen for cognitive, functional, behavioural and mood changes with CP.	Wear, H. J., <i>et al.</i> (2008). The Cambridge Behavioural Inventory revised. <i>Dementia &amp; Neuropsychologia</i> , 2, 102-107.
Activities of Daily Living	Assess basic activities of daily living with CP (or physician).	Akhtar, A. J., Broe, G. A., Crombie, A., McLean, W. M., Andrews, G. R. and Caird, F. I. (1973). Disability and dependence in the elderly at home. <i>Age Ageing</i> , 2, 102-111.
Medical Practitioner’s determinations	Physician makes preliminary diagnosis ahead of consensus panel review	-