

Supplementary Table 1. Initial screening questionnaire for clinical prodromal markers (Initial SQ-CPM)

Item	Response	
1. Clinical prodromal marker screening		
1) Have you had any problems smelling odors recently? (Hyposmia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2) Have you had any constipation recently? (Constipation)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2-1) How many times do you evacuate per day, recently?	[]	
3) Have you ever been told, or suspected yourself, that you seem to 'act out your dreams' while asleep, recently (for example, punching, flailing your arms in the air, making running movements, etc.)? (RBD1Q)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Previous clinical prodromal marker screening		
1) Did you have any problems smelling odors at the time of the operation? (Hyposmia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2) Did you have any constipation at the time of the operation? (Constipation)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2-1) How many times did you evacuate per day at that time?	[]	
3) Were you ever told before the time of the operation, or suspected yourself, that you seem to 'act out your dreams' while asleep (for example, punching, flailing your arms in the air, making running movements, etc.)? (RBD1Q)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Motor symptom screening		
1) Have you recently felt you move more slowly or stiffly? (Bradykinesia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2) Have you recently walked with a stooped posture? (Stooped posture)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3) Have you recently noticed that you do not swing your arms when you walk as much as you used to do? (Rigidity)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4) Have you recently found it difficult to start walking from a standstill or have difficulty in stopping suddenly when you want to? (Freezing, gait instability)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SQ-CPM, screening questionnaire of clinical prodromal markers; RBD1Q, rapid eye movement sleep behavior disorder single-question screen.