

# Supplementary Material

## Long COVID-19 Symptoms in People with Dementia or Mild Cognitive Impairment

### Questionnaire

ID:

Name:

Sex:

Age:

Education (years):

**1. Did you get COVID-19?**

Yes

No

If yes, please continue to the following questions

**2. Did you have symptoms for more than two weeks?**

Yes

No

**3. How long did the symptoms last?**

3-4 weeks

2 months

More than two months

**4. What were the symptoms?**

Difficulty in breathing

Fatigue

Sore throat

Psychological stress/depression

**5. To what extent did these symptoms affect your daily living?**

None

A little bit

Considerable

A lot