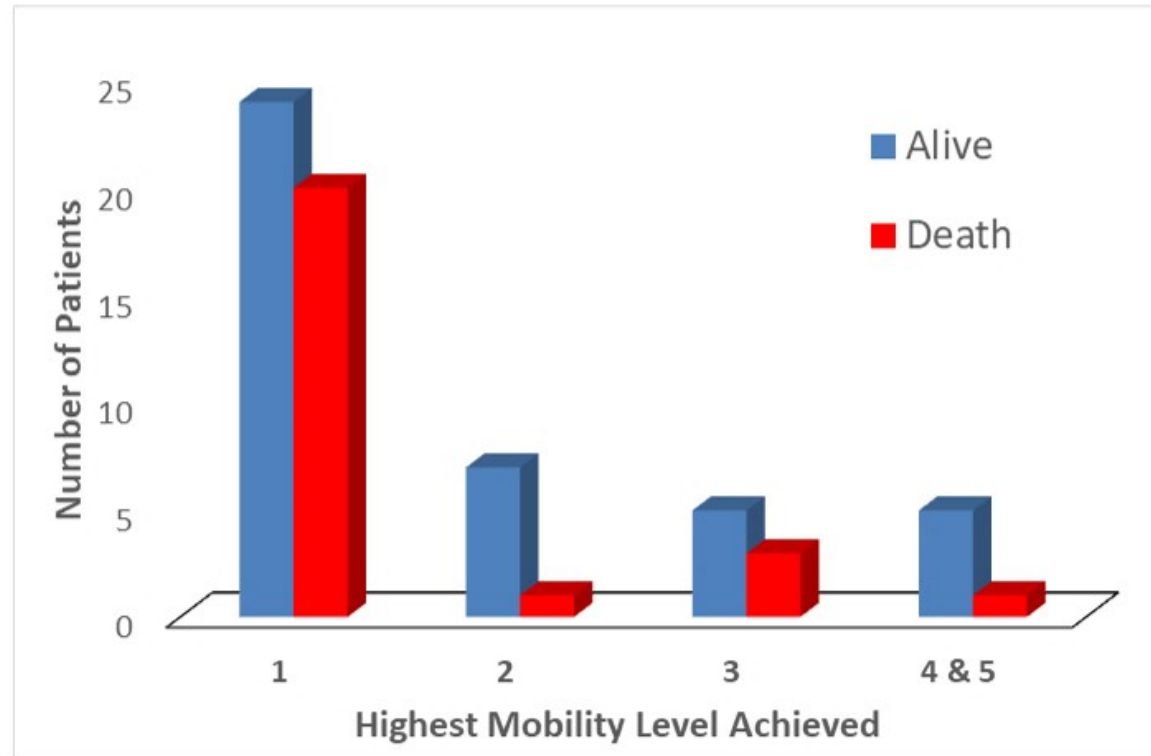**Supplemental Figure 1**: Highest level of mobility achieved during rehabilitation sessions stratified by hospital mortality. Patients achieving higher levels of mobility were more likely to be alive at discharge, although not statistically significant (X^2 = 9.96, p = 0.076, Cramer's V = 0.39).

Supplemental Table 1: Multivariable logistic regression models of hospital mortality as the dependent variable and selected rehabilitation parameters analyzed as the main independent variable.

Variable	Odds Ratio	95% Confidence Interval	P value
Time from ICU admission to first rehabilitation session, per 1-day*	0.950	0.840-1.070	0.414
Level of mobility achieved, per 1-level*	0.708	0.420-1.193	0.195
Ratio of rehabilitation sessions per CRRT days*	0.169	0.001-15.92	0.443
Number of completed rehabilitation sessions, per 1-session*	0.868	0.560-1.340	0.526

*Each rehabilitation parameter was entered into a single model with candidate variables of liver disease, yes vs no; Charlson Comorbidity Index, per 1-unit, and Sequential Organ Failure Assessment (SOFA) at ICU admission, per 1-unit.