

**Supplementary Table 1.
Radiotherapy characteristics.**

Descriptors of the radiotherapy treatment courses are listed for the patient cohort. Dose-volume histogram characteristics, such as mean dose, D₂, D₉₈ were calculated after regions of interest (brain, temporal lobe, hippocampus) were censored to exclude the gross tumor volume.

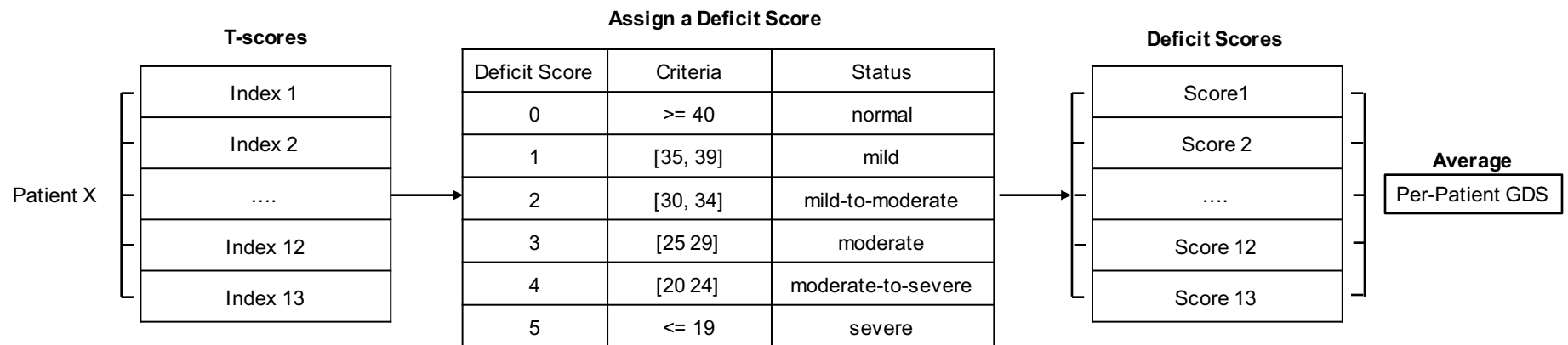
Radiotherapy Characteristic	Patient Cohort, n = 37
Treatment type: n[%]	
Photons	27 [73%]
Protons	10 [27%]
Prescription dose: Gy	
Median	59.4
Interquartile range	54-59.4
Dose schedule: n [%]	
54 Gy / 30 Fx	11 [29.7%]
59.4 Gy / 33 Fx	10 [27.0%]
60 Gy / 30 Fx	8 [21.6%]
50.4 Gy / 28 Fx	7 [18.9%]
70 Gy / 35 Fx [#]	1 [2.7%]
Mean dose Gy [95% CI]:	
Brain	16.0 [12.2 – 19.8]
Temporal Lobe	
Left	19.7 [12.8 – 26.6]
Right	16.6 [11.0 – 22.2]
Hippocampus	
Left	23.5 [16.5 – 30.3]
Right	21.4 [15.1 – 27.7]
D ₂ : Gy [95% CI]	
Brain	1.1 [0.6 – 1.7]
Temporal Lobe	
Left	10.5 [4.3 – 16.7]
Right	6.5 [3.5 – 9.5]
Hippocampus	
Left	15.3 [8.3 – 22.2]
Right	14.5 [8.0 – 21.0]
D ₉₈ : Gy [95% CI]	
Brain	52.8 [48.7 – 56.9]
Temporal Lobe	
Left	33.7 [26.1 – 41.3]
Right	30.3 [23.6 – 36.9]
Hippocampus	
Left	34.6 [27.2 – 41.9]
Right	31.6 [24.9 – 38.3]

[#] Prescription dose to low grade chondrosarcoma.

Neurocognitive Test	Brief Description	References
Hopkins Verbal Learning Test-Revised	<ul style="list-style-type: none"> Validated within Alzheimer's disease and amnesic disorder patients as a measure of verbal learning and memory 	<ul style="list-style-type: none"> Benedict RHB, Schretlen D, Groninger L et al. Hopkins Verbal Learning Test – Revised: Normative Data and Analysis of Inter-Form and Test-Retest Reliability. <i>The Clinical Neuropsychologist</i> 1998; 12(1). Hopkins Verbal Learning Test-Revised HVLTR. Retrieved from https://www.parinc.com/Products/Pkey/130
Delis-Kaplan Executive Functioning System	<ul style="list-style-type: none"> Assess key components of executive functions mediated by frontal lobe. 	<ul style="list-style-type: none"> Delis DC, Kramer JH, Kaplan E et al. Reliability and validity of the Delis-Kaplan Executive Function System: An update. <i>Journal of the International Neuropsychological Society</i> 2004; 10(2). Homack S, Lee D, Riccio CA. Test review: Delis Kaplan executive function system. <i>J Clin Exp Neuropsychol</i> 2005; 27(5)
Brief Visuospatial Memory Test	<ul style="list-style-type: none"> Measure of visuospatial memory 	<ul style="list-style-type: none"> Benedict, R. H. B., Schretlen, D., Groninger, L., Dobraski, M., & Shpritz, B. (1996). Revision of the Brief Visuospatial Memory Test: Studies of normal performance, reliability, and validity. <i>Psychological Assessment</i>, 8(2), 145-153. Brief Visuospatial Memory Test–Revised BVMT-R. Retrieved from https://www.parinc.com/Products/Pkey/30

Neurocognitive Test	Brief Description	References
Wisconsin Card Sorting Test	<ul style="list-style-type: none"> Test of cognitive reasoning Can be used to assess damage to prefrontal cortex 	<ul style="list-style-type: none"> Anderson S, Damasia H, Jones RD et al. Wisconsin card test performance as a measure of frontal lobe damage. <i>J Clin Exp Neuropsychol</i> 1991; 13(6) Chelune GJ, Baer RA. Developmental norms for the Wisconsin card sorting test. <i>J Clin Exp Neuropsychol</i> 1986; 8(3)
Boston Naming Test	<ul style="list-style-type: none"> Test of visual confrontation naming for aphasia and dementia 	<ul style="list-style-type: none"> Borod JC, Goodglass H, Kaplan E et al. Normative data on the boston diagnostic aphasia examination, parietal lobe batter, and the boston naming test
Wechsler Memory Scale	<ul style="list-style-type: none"> Assess memory functioning 	<ul style="list-style-type: none"> Prigatano DP. Wechsler memory scale: A selective review of the literature. <i>Journal of Clinical Psychology</i> 1978.

Supplementary Table 2. Neurocognitive Tests. Brief descriptions and additional references for each of the neurocognitive tests used in this study.



Supplemental Figure 1. Calculation of global deficit score (GDS). First, individual T-scores were assigned a deficit score: 0 if greater than or equal to 40 (normal), 1 if between 35 and 39 (mild), 2 if between 30 and 34 (mild-to-moderate), 3 if between 25 and 29 (moderate), 4 if between 20 and 24 (moderate-to-severe), and 5 if less than or equal to 19 (severe). Per-patient GDS was then calculated as the mean of the deficit scores for that patient.

Supplemental Figure 2. Statistically significant associations. Per-patient GDS values are plotted against size of PTV ($p = 0.048$), tumor type ($p = 0.043$), use of antiepileptic drugs ($p = 0.0088$), and seizures ($p = 0.0069$).

