Figure S1. Flow diagram of study population eligibility.
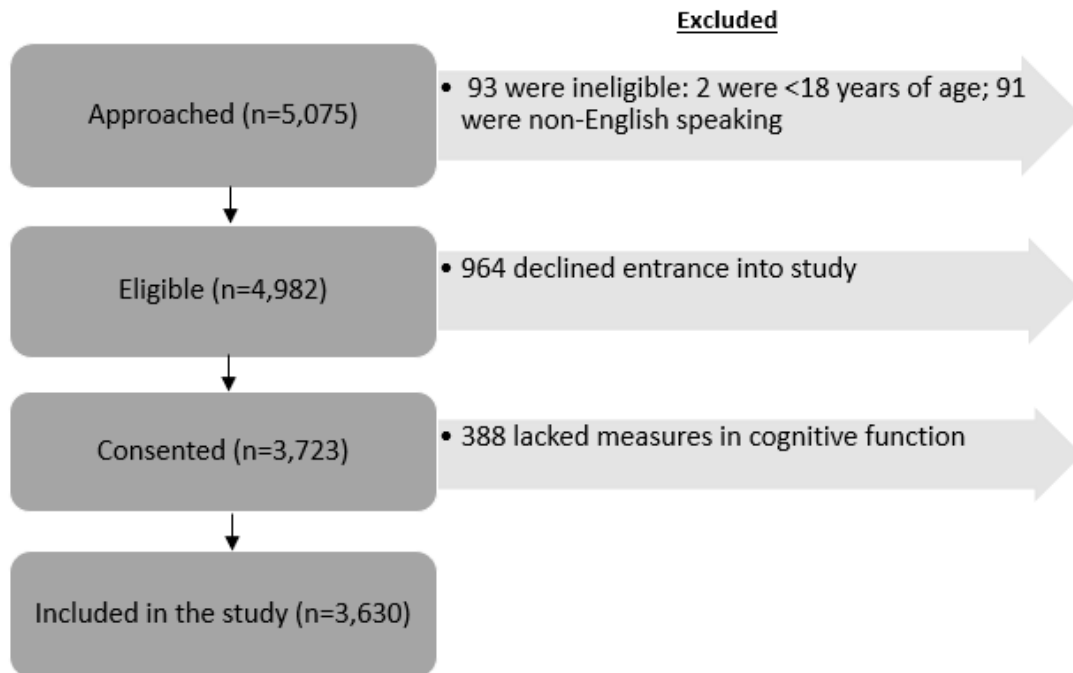
Table S1. Sensitivity Analyses: Cumulative incidence (%) and associations of listing, waitlist mortality, and kidney transplantation (KT) by global cognitive impairment after excluding those with diagnosed dementia.

Outcome by Global Cognitive Impairment		
Chance of Listing	**Adjusted HR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	0.74 (0.61-0.90)	0.003
Diabetes		
Not impaired	Reference	
Impaired	0.90 (0.68-1.20)	0.48
No Diabetes		
Not impaired	Reference	
Impaired	0.63 (0.48-0.82)	0.001
Risk of Waitlist Mortality	**Adjusted SHR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	1.41 (0.87-2.31)	0.21
Diabetes		
Not impaired	Reference	
Impaired	0.98 (0.52-1.84)	0.83
No Diabetes		
Not impaired	Reference	
Impaired	2.42 (1.27-4.59)	0.008
Rate of KT	**Adjusted IRR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	0.76 (0.55-1.06)	0.11
Diabetes		
Not impaired	Reference	
Impaired	1.11 (0.71-1.76)	0.63
No Diabetes		
Not impaired	Reference	
Impaired	0.57 (0.35-0.90)	0.02

Participants were classified as cognitively impaired if they had a 3MS score <80. Adjusted associations were controlled for age, sex, race, diabetes, educational attainment, the Charlson Comorbidity Index adapted for ESKD. To explore the association between each outcome and cognitive impairment by diabetes status, an interaction term was added between cognitive impairment and diabetes status. Abbreviations: HR, hazard ratio; SHR, subdistribution hazard ratio; IRR, incidence rate ratio.

Table S2. Sensitivity Analyses: Cumulative incidence (%) and associations of listing, waitlist mortality, and kidney transplantation (KT) by global cognitive impairment after additionally adjusting for factors associated with cognitive impairment at time of evaluation.

Outcome by Global Cognitive Impairment		
Chance of Listing	**Adjusted HR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	0.78 (0.63-0.97)	0.02
Diabetes		
Not impaired	Reference	
Impaired	0.83 (0.61-1.12)	0.21
No Diabetes		
Not impaired	Reference	
Impaired	0.74 (0.56-0.997)	0.047
Risk of Waitlist Mortality	**Adjusted SHR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	0.94 (0.58-1.54)	0.82
Diabetes		
Not impaired	Reference	
Impaired	0.58 (0.30-1.13)	0.11
No Diabetes		
Not impaired	Reference	
Impaired	1.84 (0.93-3.64)	0.08
Rate of KT	**Adjusted IRR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	1.19 (0.84-1.67)	0.32
Diabetes		
Not impaired	Reference	
Impaired	1.36 (0.84-2.19)	0.21
No Diabetes		
Not impaired	Reference	
Impaired	1.06 (0.66-1.69)	0.82

Participants were classified as cognitively impaired if they had a 3MS score <80. Adjusted associations were controlled for *a priori* factors (age, sex, race, diabetes, educational attainment, the Charlson Comorbidity Index adapted for ESKD), and factors associated with cognitive impairment at time of evaluation (BMI, ADL impairment, IADL impairment, cause of ESKD, and years on dialysis). To explore the association between each outcome and cognitive impairment by diabetes status, an interaction term was added between cognitive impairment and diabetes status. Abbreviations: HR, hazard ratio; SHR, subdistribution hazard ratio; IRR, incidence rate ratio.

Table S3. Sensitivity Analyses: Cumulative incidence (%) and associations of listing by global cognitive impairment utilizing time from dialysis initiation to listing.

Outcome by Global Cognitive Impairment			
Chance of Listing	**Time from dialysis initiation to listing Median (IQR)**	**Adjusted HR (95% CI)**	**p-value**
Overall	6.0 (18.8)		
Not impaired		Reference	
Impaired		0.90 (0.74, 1.10)	0.27
Diabetes	6.0 (12.9)		
Not impaired		Reference	
Impaired		1.04 (0.79, 1.37)	0.76
No Diabetes	6.0 (15.6)		
Not impaired		Reference	
Impaired		0.78 (0.60, 1.03)	0.083

Participants were classified as cognitively impaired if they had a 3MS score <80. Adjusted associations were controlled for age, sex, race, diabetes, educational attainment, the Charlson Comorbidity Index adapted for ESKD. To explore the association between listing and cognitive impairment by diabetes status, an interaction term was added between cognitive impairment and diabetes status. Abbreviations: HR, hazard ratio.

Table S4. Sensitivity Analyses: Cumulative incidence (%) and associations of waitlist mortality by global cognitive impairment, censoring for KT (no competing risk).

Outcome by Global Cognitive Impairment		
Risk of Waitlist Mortality	**Adjusted HR (95% CI)**	**p-value**
Overall		
Not impaired	Reference	
Impaired	1.27 (0.80-2.01)	0.31
Diabetes		
Not impaired	Reference	
Impaired	0.85 (0.45-1.60)	0.62
No Diabetes		
Not impaired	Reference	
Impaired	2.35 (1.23-4.48)	0.009

Participants were classified as cognitively impaired if they had a 3MS score <80. Adjusted associations were controlled for age, sex, race, diabetes, educational attainment, the Charlson Comorbidity Index adapted for ESKD. To explore the association between waitlist mortality and cognitive impairment by diabetes status, an interaction term was added between cognitive impairment and diabetes status. Abbreviations: HR, hazard ratio.