Supplementary table 2: All items from the World Health Organization Trial Registration Data Set (SPIRIT item 2b)

Data category	**Information**
Primary registry and trial identifying number	ClinicalTrials.gov NCT03659123
Date of registration in primary registry	6 September 2018
Secondary identifying numbers	69HCL16_0701 ID RCB N° 2018-A001026-49
Source(s) of monetary or material support	Agence Régionale de Santé Auvergne Rhône Alpes
Primary sponsor	Hospices Civils de Lyon
Secondary sponsor(s)	
Contact for public queries	David Dayde, +33.4.78.86.37.74, david.dayde@chu-lyon.fr
Contact for scientific queries	Claire Falandry, +33.4.78.86.66.34, claire.falandry@chu-lyon.fr
Public title	Prehabilitation & Rehabilitation in Oncogeriatrics: Adaptation to Deconditioning Risk and Accompaniment of Patients' With Cancer
Scientific title	Prehabilitation & Rehabilitation in Oncogeriatrics: Adaptation to Deconditioning Risk and Accompaniment of Patients' With Cancer, a Multicentre Pilot Study
Countries of recruitment	France
Health condition(s) or problem(s) studied	Old Injury
Intervention(s)	Behavioural: standardised geriatric intervention Nutritional care is based on: • A personalised evaluation of nutritional balance and nutritional needs of the patient • A weekly follow-up of weight and nutritional intake Total-body rehabilitation is based on: • 2 to 3 times a week: strength exercise • 2 to 3 times a week: endurance exercise, 20 to 45 min each sequence • 2 times a week: respiratory physiotherapy Pharmaceutical conciliation and optimisation according to the STOPP/START criteria During peri-operative time, the nurse contacts the surgical team for transmission of the patient's personal data, physical medication conciliation results During rehabilitation time and hospital-home transition time, the nurse contacts the rehabilitation team for transmission of the patient's personal data and care course, physical (nutritional, functional, and/or comorbidities), medication conciliation results.

Data category	**Information**
Key inclusion and exclusion criteria	Inclusion criteria: Patient aged ≥70 years OR patient aged ≥60 years with significant comorbid condition (modified Charlson index ≥3) or disability (ADL score <6/6); Histologically or cytologically proven cancer. Life expectancy > 3 months. Written informed consent obtained Covered by a Health System where applicable. Exclusion Criteria: Other malignancy within the previous 5 years, except for adequately treated carcinoma *in situ* of the cervix or squamous carcinoma of the skin, or adequately controlled limited basal cell skin cancer. Patient unable to be regularly followed for any reason (geographical, familial, social, psychological). Any mental or physical handicap at risk of interfering with the appropriate treatment. Any administrative or legal supervision where applicable
Study type	Interventional Allocation: N/A Intervention model: Single Group Assignment Masking: None (Open Label) Primary purpose: Health Services Research Phase II
Date of first enrolment	3 July 2018
Target sample size	122
Recruitment status	Recruiting
Primary outcome(s)	Implementation of at least one item of PROADAPT standardised geriatric intervention of the PROADAPT programme pilot study [Time Frame: 12 months]: • Preoperative physical activity including strength and endurance exercise assessed by physical exercises accomplished under the supervision of a physiotherapist. Number of patients with at least 1 intervention achieved in the domain. • Nutrition guidelines before and after physical activity assessed by questionnaires. Number of patients with at least 1 intervention achieved in the domain. • Patient education and coaching assessed by questionnaires and visits. Number of patients with at least 1 intervention achieved in the domain • Achievement of standardized intervention procedures, according to the checklist established in consensus with surgeons. Number of patients with at least 1 intervention achieved in the domain • Rehabilitation assessed by questionnaires. Number of patients with at least 1 intervention achieved in the domain

Data category	**Information**
	• Accomplishment of pharmaceutical medication conciliation and treatment optimisation. Number of patients with at least 1 intervention achieved in the domain • Bridging interventions for hospital-to-home transition. Number of patients with at least 1 intervention achieved in the domain
Key secondary outcomes	• Post-operative morbidity [Time Frame: 30 and 90 days] according to the Clavien-Dindo classification • Post-operative morbidity [Time Frame: 90 days] according to NCI CTC v4.4 • Therapeutic strategy [Time Frame: 12 months]: Treatment plan completion rate: Number of patients for whom the treatment plan was completed. • Progression-free survival [Time Frame: 12 months] • Post-treatment complication [Time Frame: 12 months]: Post-treatment complication grade ≥3 according the National Cancer Institute Common Toxicity Criteria version 4 (NCI-CTC-v4)