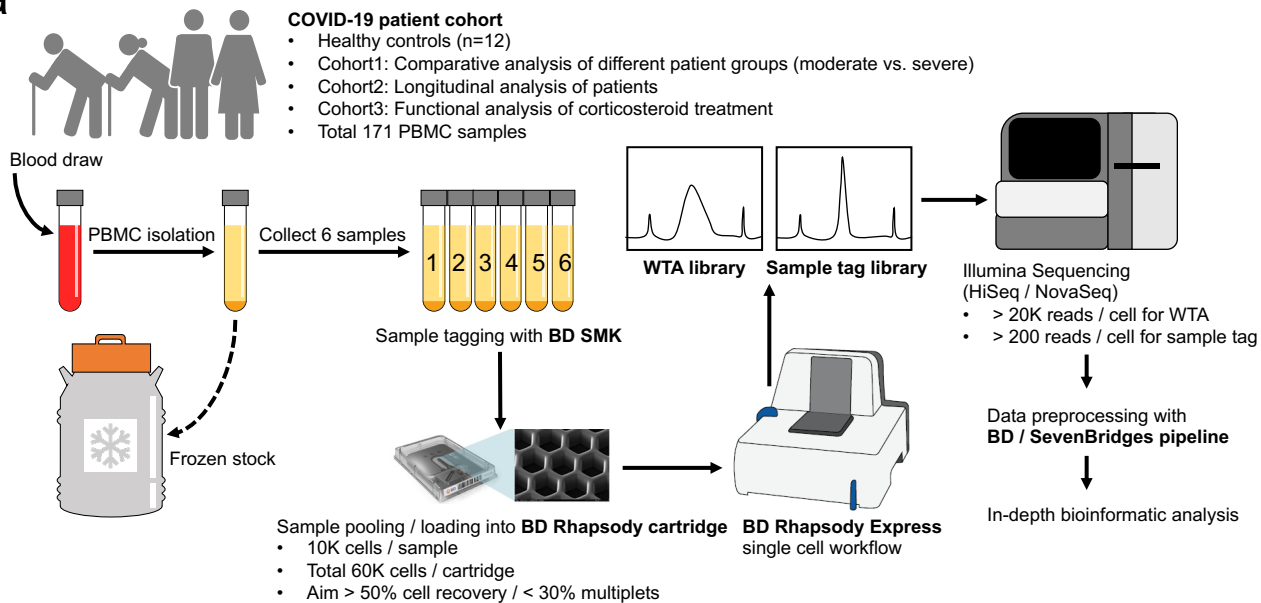
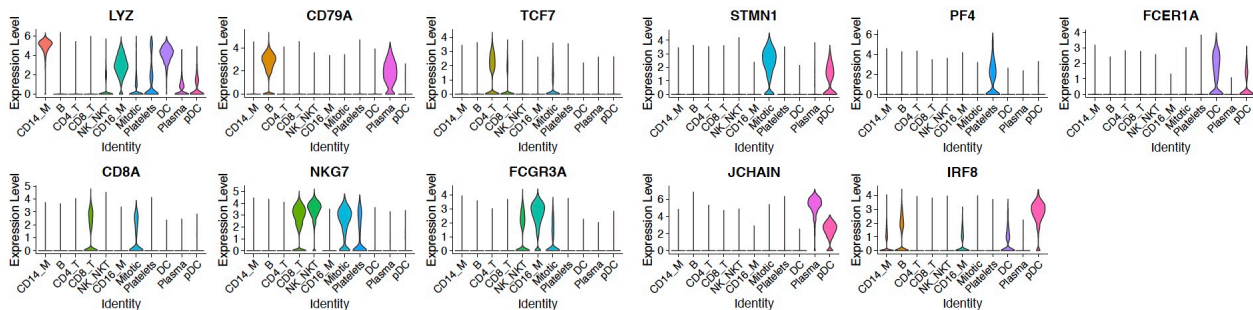


# Supplementary Figure 1

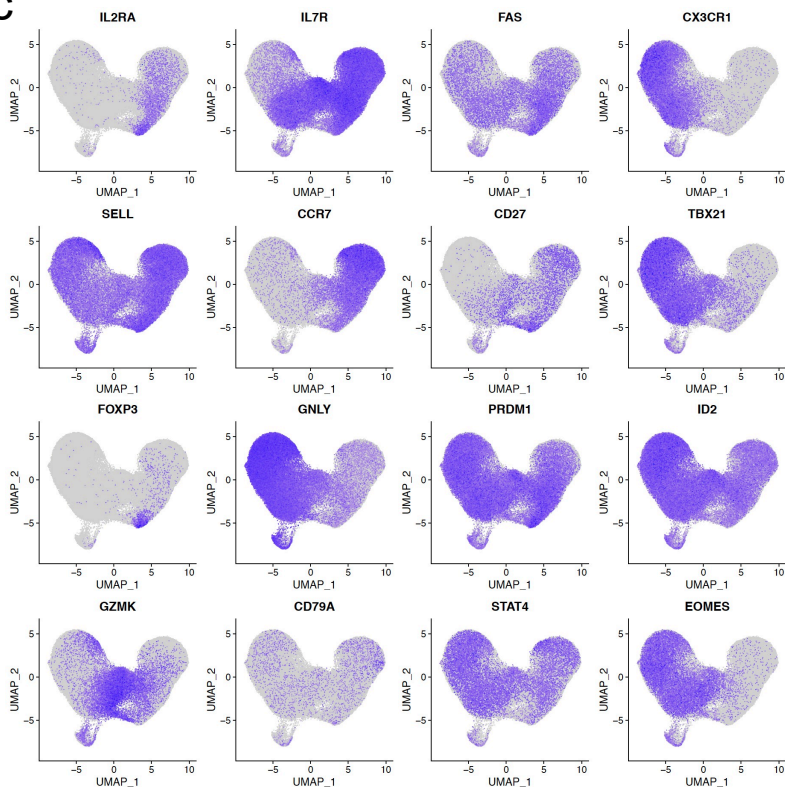
**a**



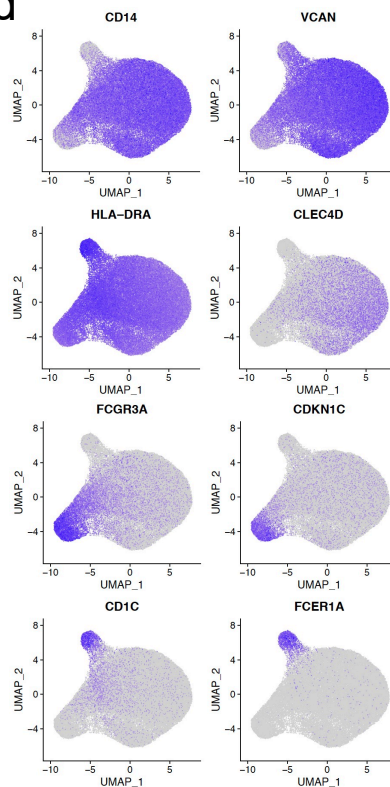
**b**



**c**

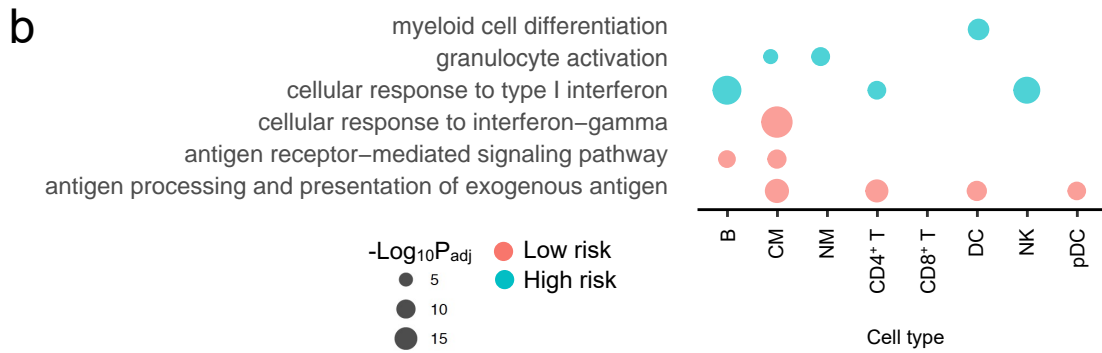
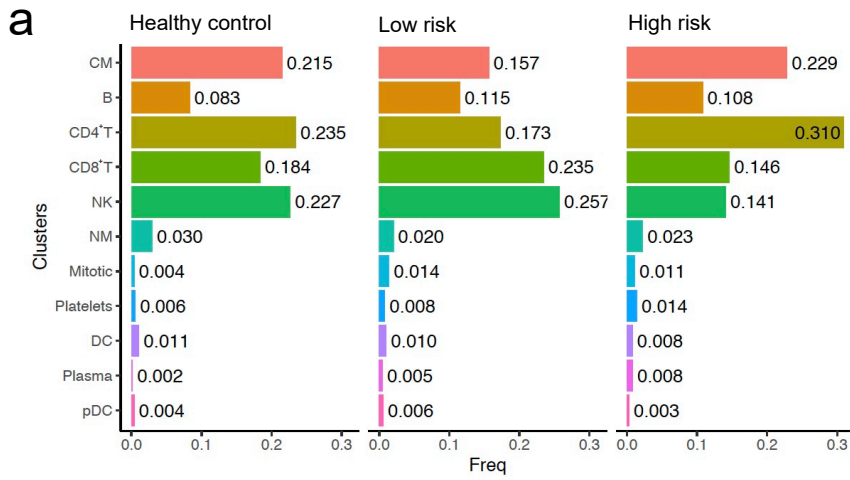


**d**



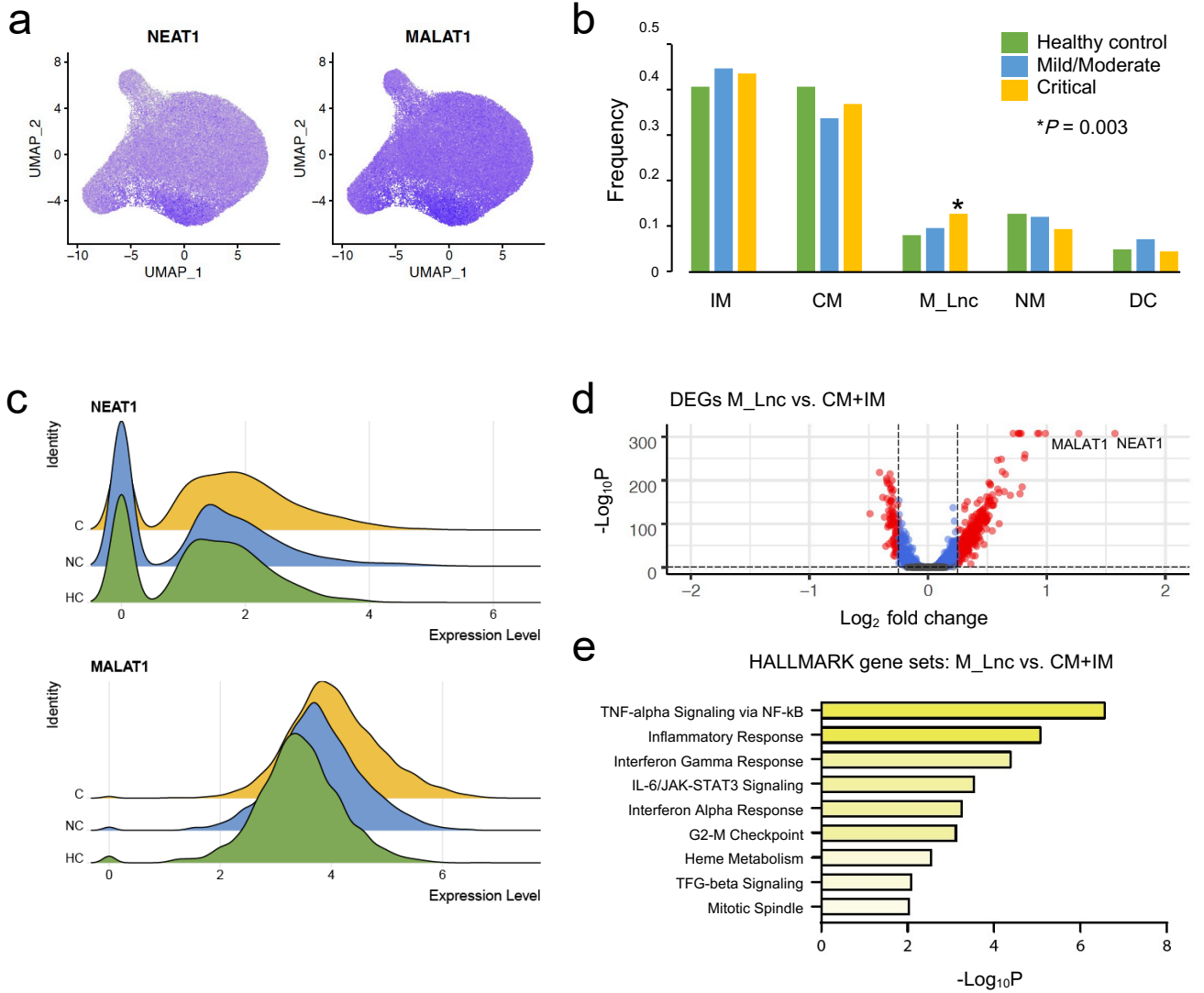
**Supplementary Figure 1.** Workflow of the analysis of single-cell RNA-seq and expression of cell-type-specific marker genes. **(a)** Schematic overview of single-cell RNA-seq using PBMCs. **(b)** Expression of select cell-type specific marker genes in major cell types in violin plots and **(c)** lymphoid or **(d)** myeloid cell subpopulations in UMAP plots. (c,d) Colors represent the relative expression of each gene.

# Supplementary Figure 2



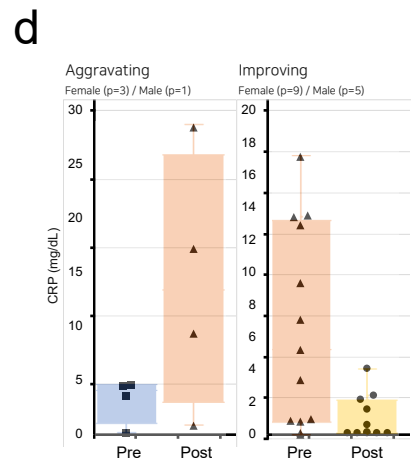
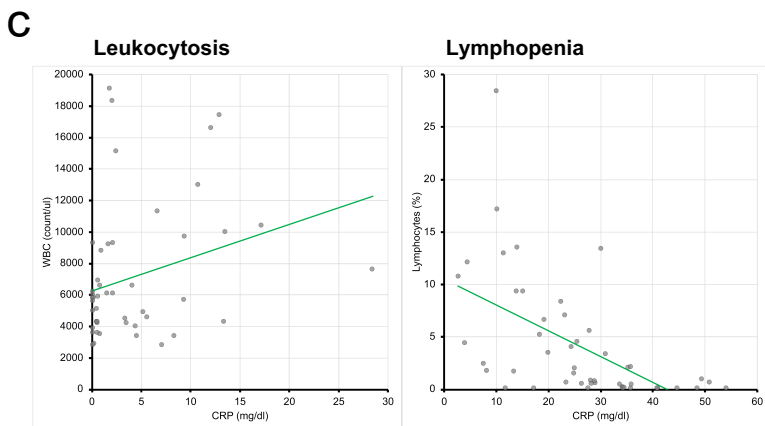
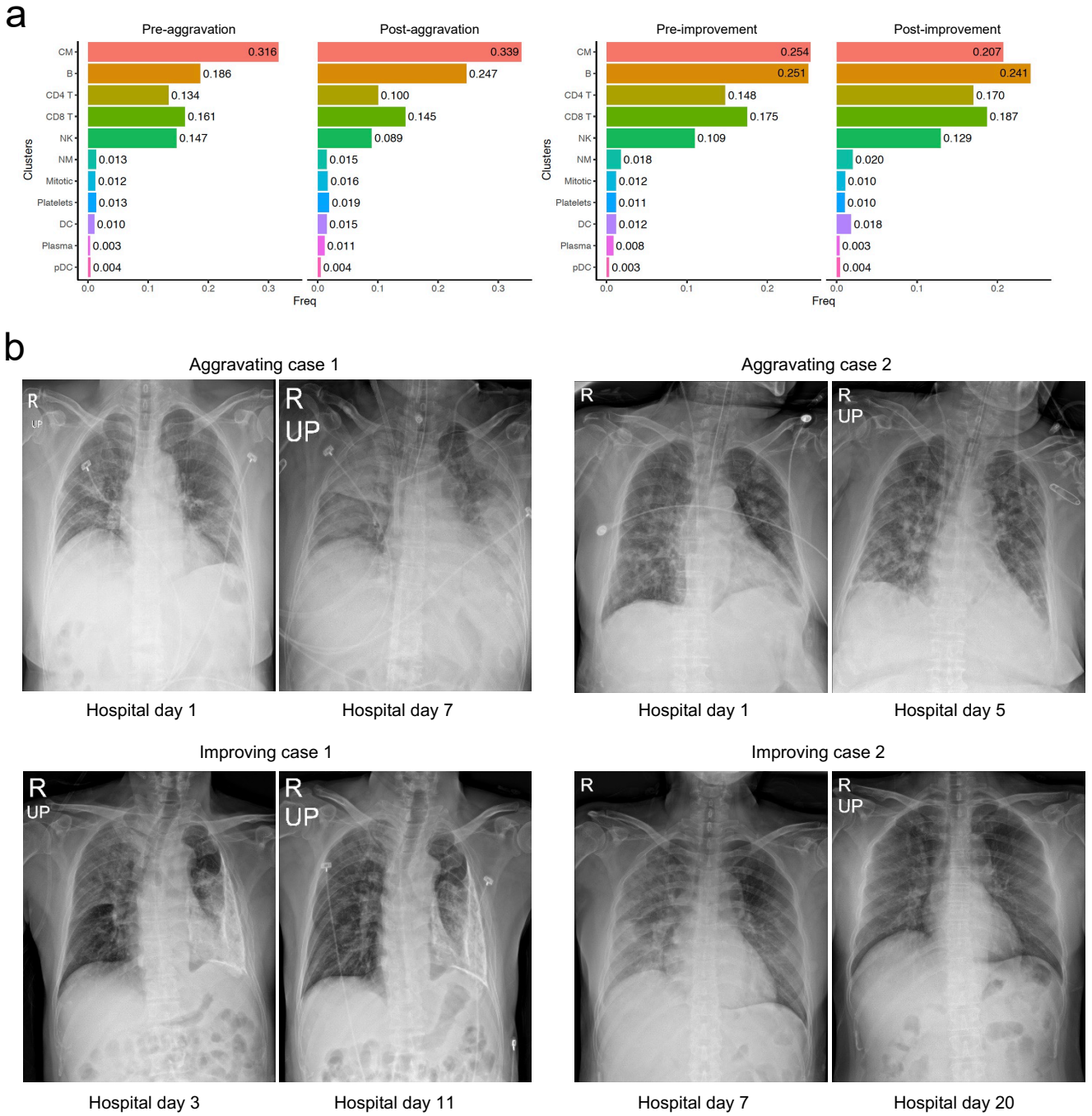
**Supplementary Figure 2.** Comparison of samples with different disease severity. **(a)** Cell type frequency of each group. **(b)** Six biological process Gene Ontology terms enriched in high risk or low risk patients' samples in each cell type. Dot size represents  $-\text{Log}_{10}$  (adjusted P-value).

# Supplementary Figure 3



**Supplementary Figure 3.** Hyperinflammatory hallmarks of myeloid cells in high risk COVID-19 patients. **(a)** UMAP plots depicting the expression of NEAT1 and MALAT1 in the myeloid cell population. Colors represent relative gene expression. **(b)** Bar plot showing the frequency of myeloid subtypes in different patient groups. **(c)** Ridge plots depicting the expression of NEAT1 and MALAT1 in different patient groups. **(d)** Volcano plot of differentially expressed genes between M\_Lnc and CM + IM. Blue dots, adjusted  $P < 0.05$ ; Red dots, adjusted  $P < 0.05$  and  $\text{Log}_2$  fold change  $> 0.25$ ; grey dots, adjusted  $P > 0.05$ . **(e)** Top enriched HALLMARK gene sets in M\_Lnc.

# Supplementary Figure 4

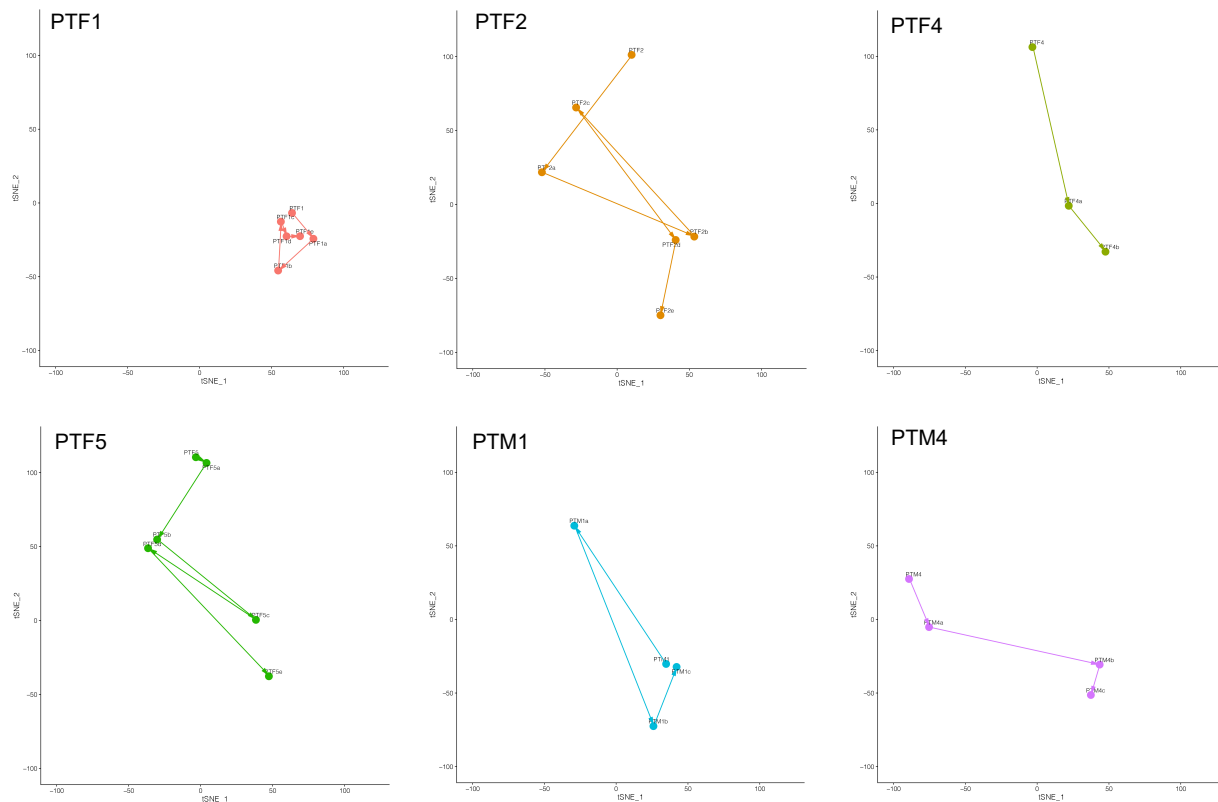


**Supplementary Figure 4.** Phenotypic changes during COVID-19 progression. **(a)** Cell type frequency of during disease aggravation and improvement. **(b)** Chest radiographs of representative cases of disease aggravation (top) and improvement (bottom). The day after hospitalization is shown for each patient. **(c)** Relationship of whole white blood cell (WBC) counts and lymphocyte frequency (%) with serum c-reactive protein (CRP) levels (mg/dl). Each dot represents a sample. **(d)** Box-and-whisker plots of CRP levels in select patient samples based on disease aggravation and improvement. The box of a boxplot starts in the first quartile and ends in the third, with a line inside that represents the median.

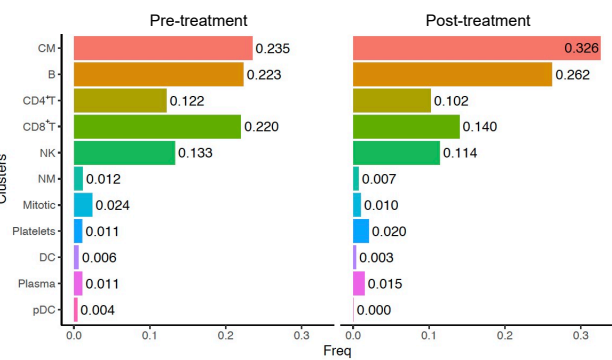


# Supplementary Figure 5

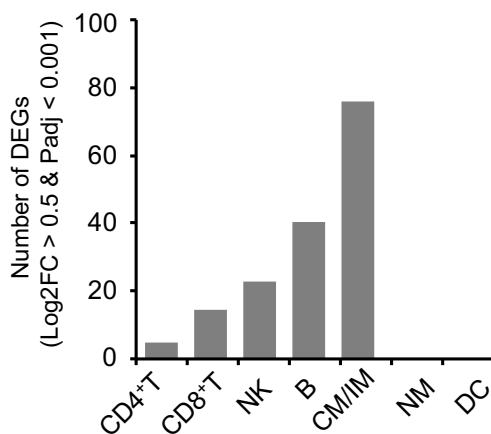
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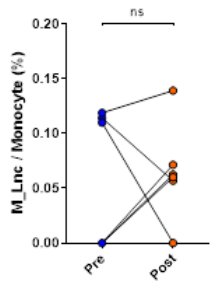
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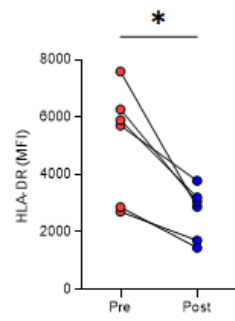
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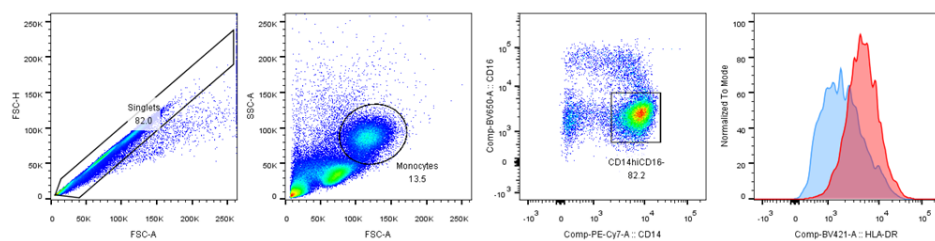
**d**



**f**



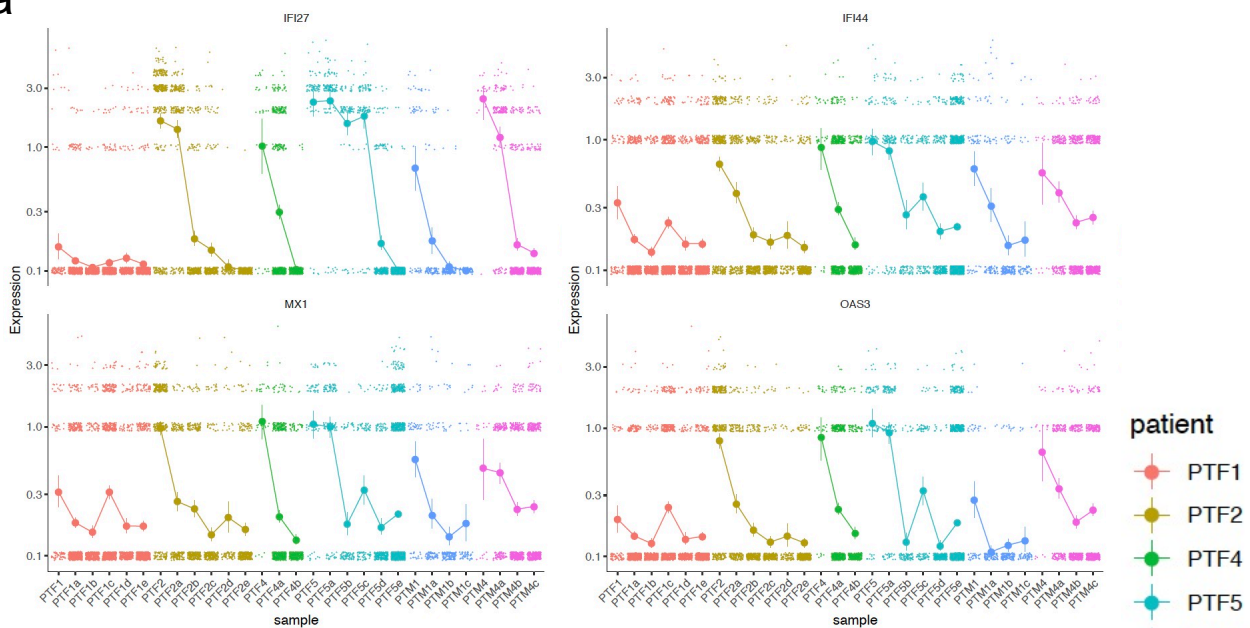
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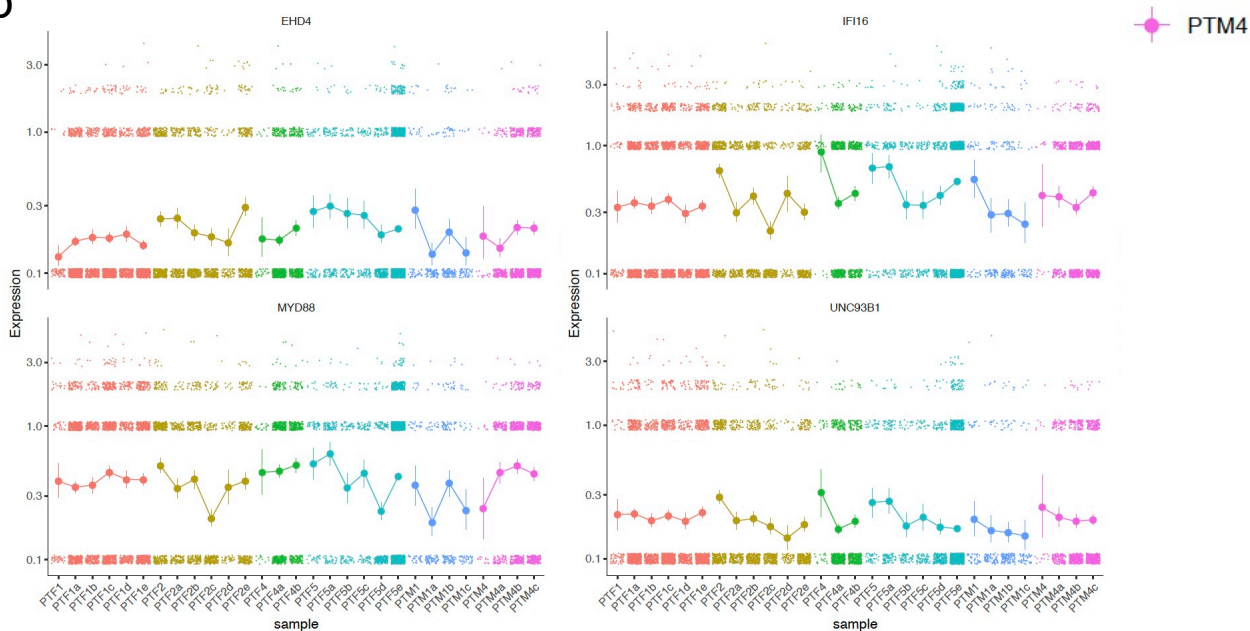
**Supplementary Figure 5.** Corticosteroid-induced changes in gene expression in PBMCs. **(a)** tSNE plot of pseudo-bulk gene expression values for CMs/IMs in each sample. Colors represent individual patients. Arrows indicate progression of time. Six patients with pre-treated conditions are labeled with text. **(b)** Cell type frequency in PBMCs from corticosteroid-treated patients pre- and post-treatment. PTM1, a patient with acute leukemia, was excluded from this analysis. **(c)** Number of significant differentially expressed genes (DEGs) in each cell type after corticosteroid treatment. **(d)** Frequency of monocyte\_Lnc among myeloid subclusters. **(e)** Representative dot blot presenting cell surface HLA-DR expression level of CD14<sup>+</sup>CD16<sup>-</sup> classical monocytes. **(f)** HLA-DR surface expression level of CD14<sup>+</sup>CD16<sup>-</sup> classical monocytes of pre- and post-CS treatment

# Supplementary Figure 6

a

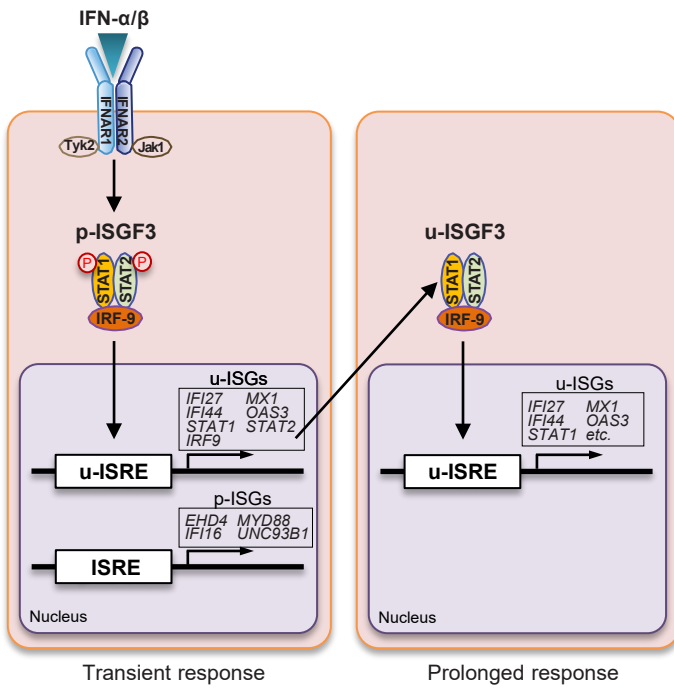


b



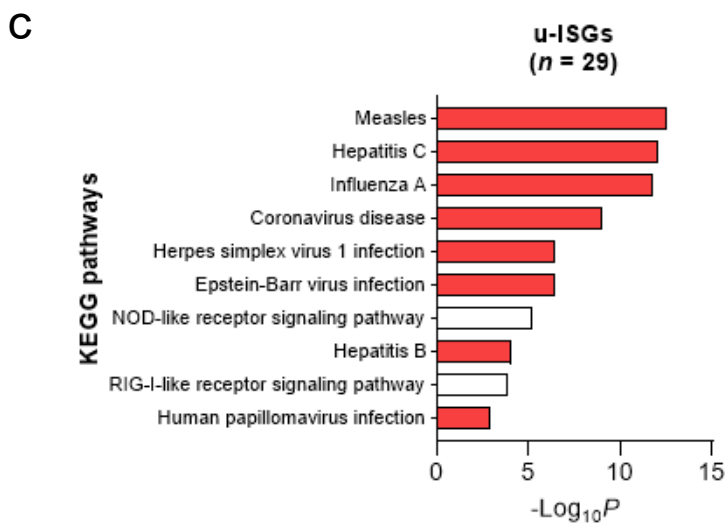
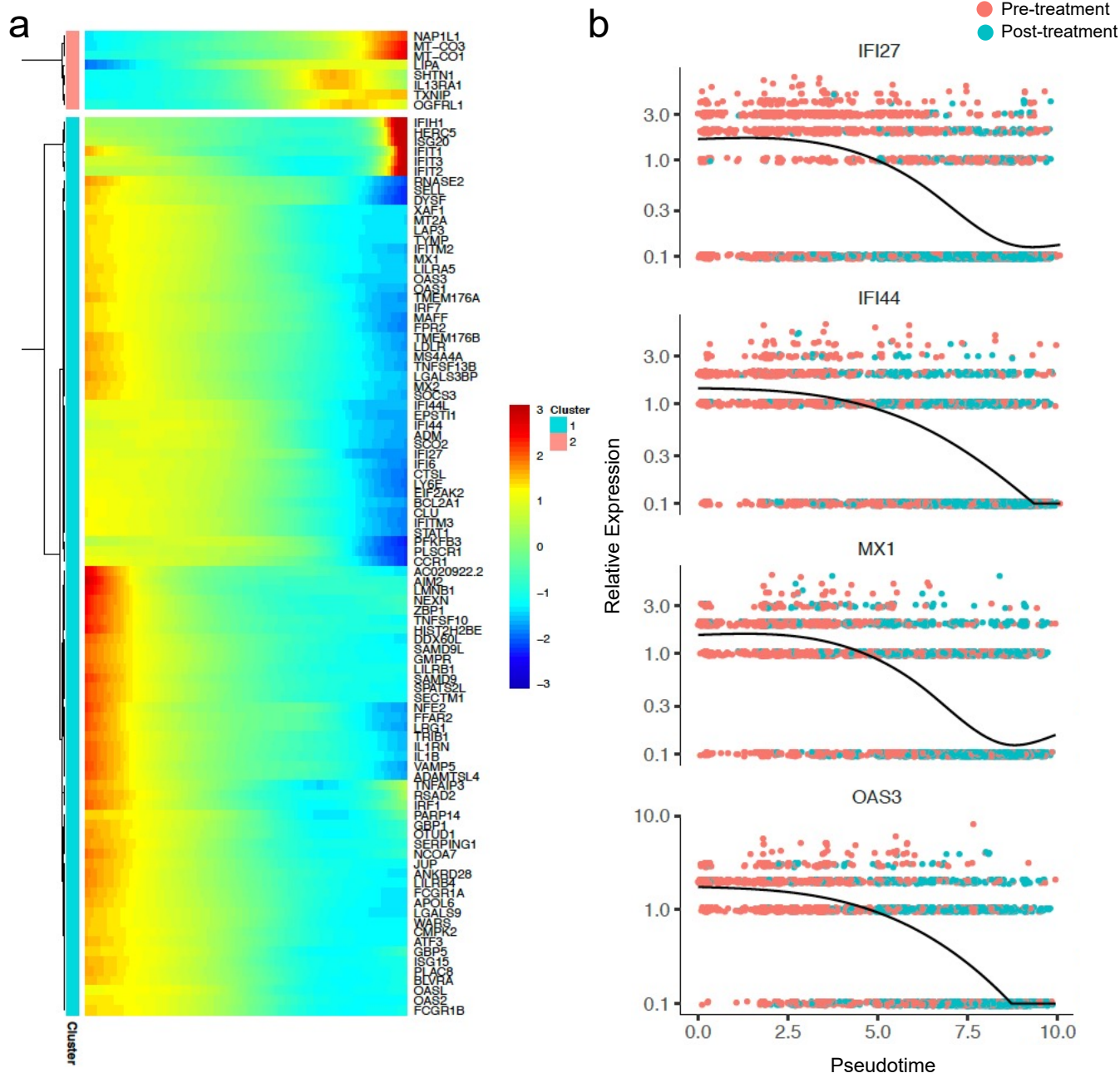
**Supplementary Figure 6.** Corticosteroid treatment suppresses a subset of u-ISG expression. **(a)** Expression of down-regulated or **(b)** unchanged genes in longitudinal samples obtained during the course of corticosteroid treatment. Colors represent individual patients. Error bars indicate SD.

# Supplementary Figure 7



**Supplementary Figure 7.** Upregulation of p-ISGs and u-ISGs by type I IFNs. Type I IFN stimulation induces phosphorylation of tyrosine residues in STAT1 and STAT2. p-STAT1, p-STAT2, and IRF9 form p-ISGF3, which induces transient expression of p-ISGs by binding to the IFN-sensitive response element (ISRE). Up-regulated STAT1, STAT2, and IRF9 can form u-ISGF3 even without tyrosine phosphorylation, and u-ISGF3 induces prolonged expression of u-ISGs by binding to u-ISRE3.

# Supplementary Figure 8



**Supplementary Figure 8.** Pseudotime analysis of classical monocytes/intermediate monocytes with u-ISGs. **(a)** Heatmap of differentially expressed genes by pseudotime. Cells were ordered by the expression of u-ISGs. Colors indicate the relative expression of each gene. **(b)** Expression of selected genes by pseudotime. Colors represent samples of pre- and post-corticosteroid treatment. **(c)** Top 10 enriched KEGG pathways of u-ISGs ( $n = 29$ ), red bars indicating viral infection associated pathways.