First HSCT	Autologous PBSCT and BMT
Conditioning	BU + L-PAM
NCC	PBSCT: 15.6×10 <sup>8</sup> /kg, BMT: 0.8×10 <sup>8</sup> /kg*
$CD34^+$	PBSCT: $1.1 \times 10^6$ /kg
Day of neutrophil engraftment (day)	13
Second HSCT	Allogeneic CBT
Conditioning	Flu $(150 \text{ mg/m}^2)$ + L-PAM $(140 \text{ mg/m}^2)$ + TBI 12 Gy
Donor source	Unrelated donor
	5/8 (HLA-A, B, C mismatch)
HLA matching	Patient: A 02:06/33:03, B 15:18/44:03, C 08:01/14:03, DR:09:01:13:02
	Donor: A 02:01/33/03, B 40:01/44:03, C 15:02/14:03, DR 09:01/13/02
NCC	$10.4 \times 10^7 / \text{kg}$
$CD34^+$	$2.90 \times 10^{5}$ /kg
Day of neutrophil engraftment (day)	17
GVHD prophylaxis	FK: 0.03 mg/kg (from day -1) + MTX: 7 mg/m <sup>2</sup> (day +1), 5 mg/m <sup>2</sup> (day +3, +6)
GVHD	Grade 3 (skin: stage 3, liver: stage 1, gut: stage 2)

Blood Cell Therapy – The official journal of APBMT Post-HSCT PVOD following RSV infection

Table S2. Clinical information regarding 1st and 2nd HSCT in the patient

\*The patient was unable to obtain sufficient numbers of PBSCs even with 4 rounds of harvest. Therefore, bone marrow was harvested from the patient and added to PBSCs.

Abbreviations: BMT, bone marrow transplantation; BU, busulfan; CBT, cord blood transplantation; FK, tacrolimus; Flu, fludarabine; GVHD, graft-versus-host disease; HLA, human leukocyte antigen; HSCT, hematopoietic stem cell transplantation; L-PAM, melphalan; MTX, methotrexate; NCC, nuclear cell count; PBSCT, peripheral stem cell transplantation; TBI, total body irradiation