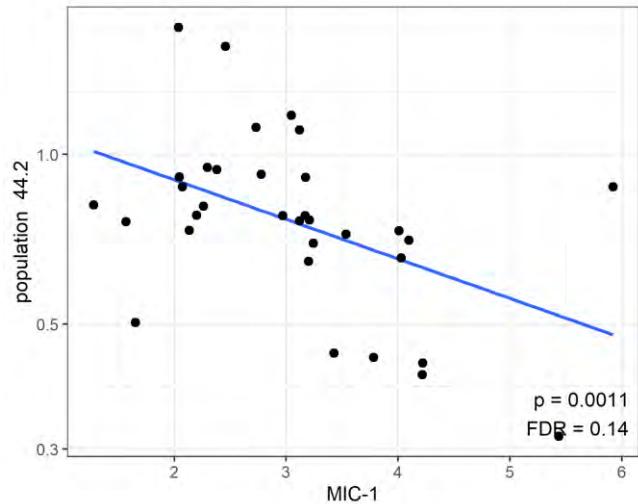
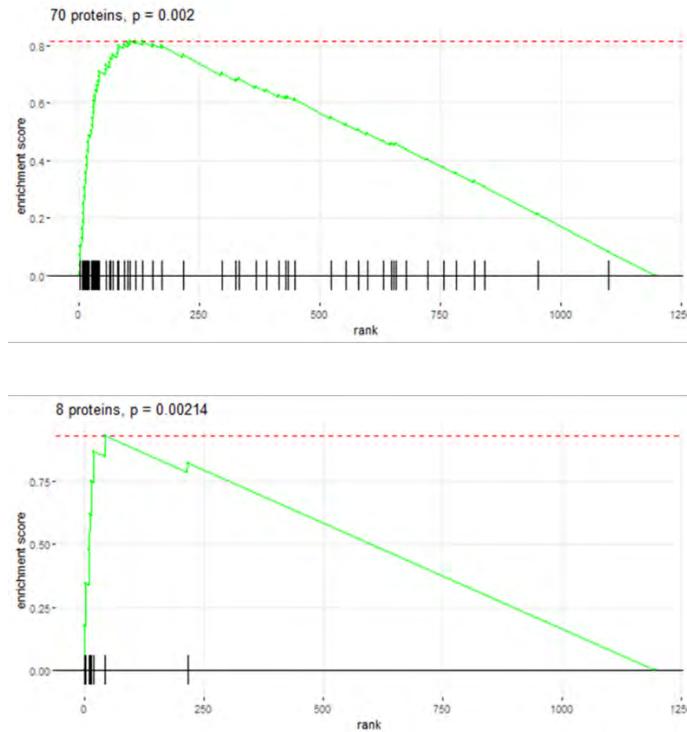


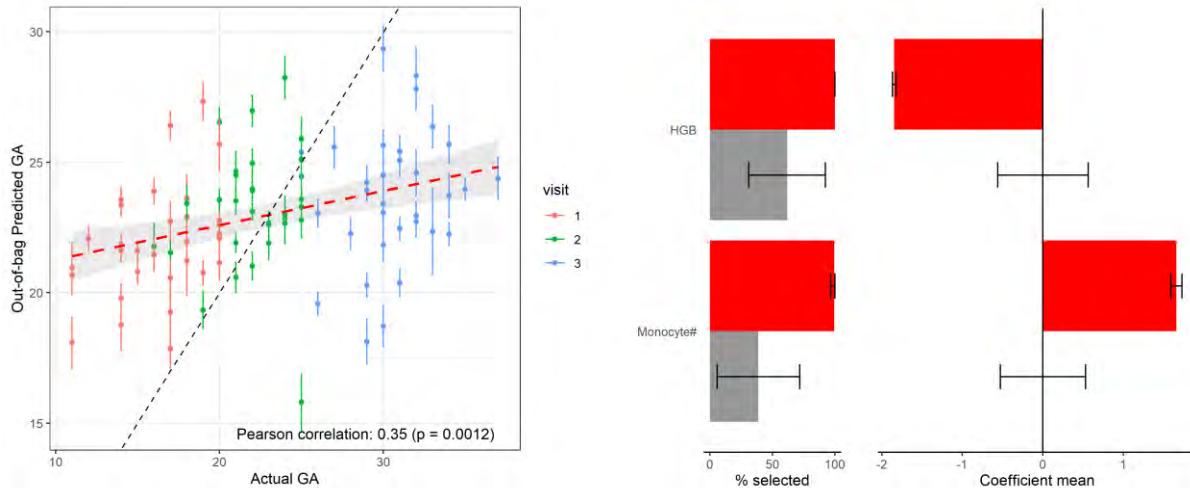
Supplementary data



Suppl Fig. 1: None of the correlations between immune populations and serum proteins that change during gestation is significant after correcting for multiple testing. 26 cell populations and 434 somamers differed between V1 and V3 significantly (FDR-adjusted $p < 0.05$). A subset of 18 cell populations and 129 somamers differed with fold changes higher than 1.2 or lower than 0.8. For every pairwise combination of these selected features, a Spearman correlation was computed for the change in cell population frequency, against the change in serum protein level, using all 33 subjects. For none of the correlations was FDR adjusted $p < 0.05$. The strongest correlation is shown in the plot.

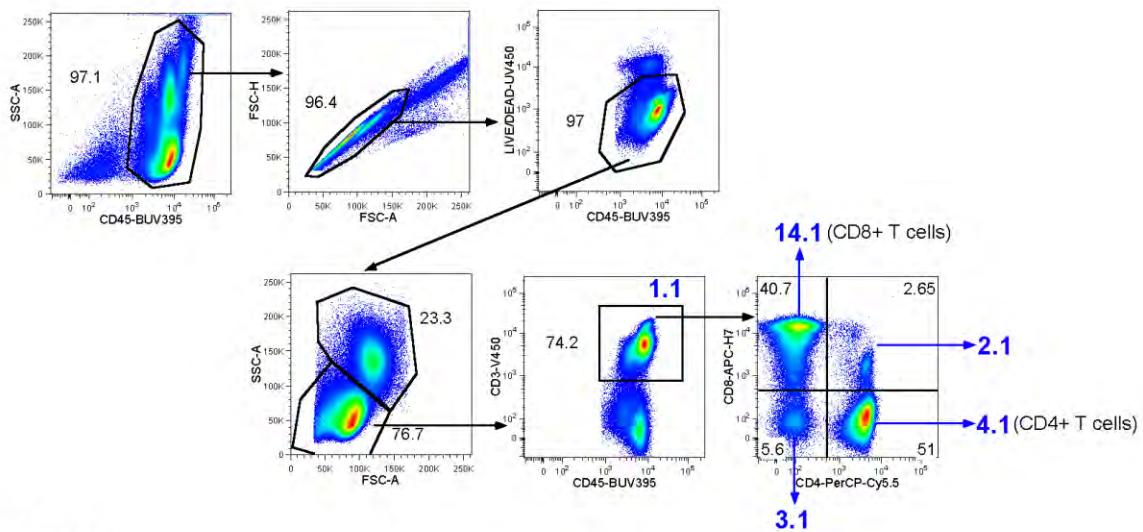


Suppl Fig. 2: Enrichment of the protein sets previously reported to predict GA in proteins ranked by their prediction power in our dataset. Ridge regression models to predict GA were generated using samples collected at 3 timepoints during pregnancy for the 33 women in our study. All somamers that passed QC (1194) were used as the features. Ridge regression was performed 100 times, each time using random 80% of samples as training set and remaining 20% as test set. The somamers were ranked by average coefficient from all models. The enrichment analysis was performed for previously reported 70 (top panel) and 8 (bottom panel) protein sets against this ranked list using fgsea Bioconductor package.

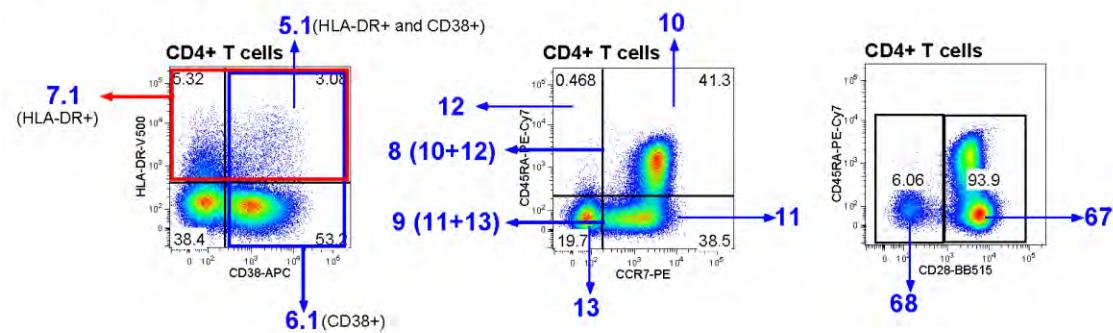


Suppl Fig. 3: Standard clinical phenotyping parameters from complete blood count (CBC) test can be used to predict gestational age. 9 parameters from CBC tests alone, without clinical flow cytometry, were used to generate an EN model of GA using data from 3 timepoints during pregnancy for the 33 women in our study. Predicted and observed GA correlated significantly ($p=0.0012$), where red dashed line is a linear regression with 95% confidential interval, and black dashed identity line marks equal GA (left). Frequency of selection and average weights are shown for the significant model features of hemoglobin level and monocyte count (right).

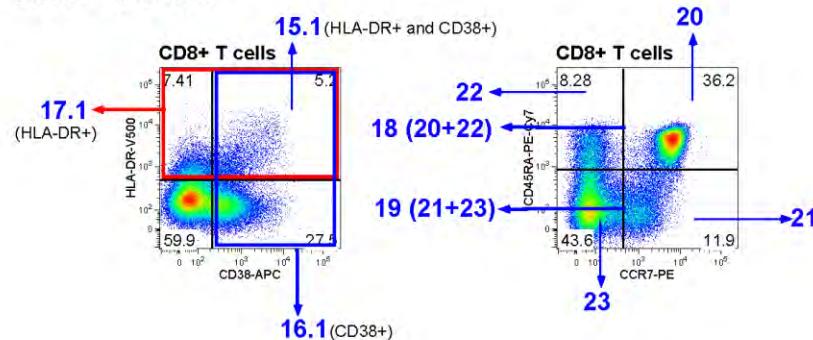
T cell Gating :



CD4+ T cells

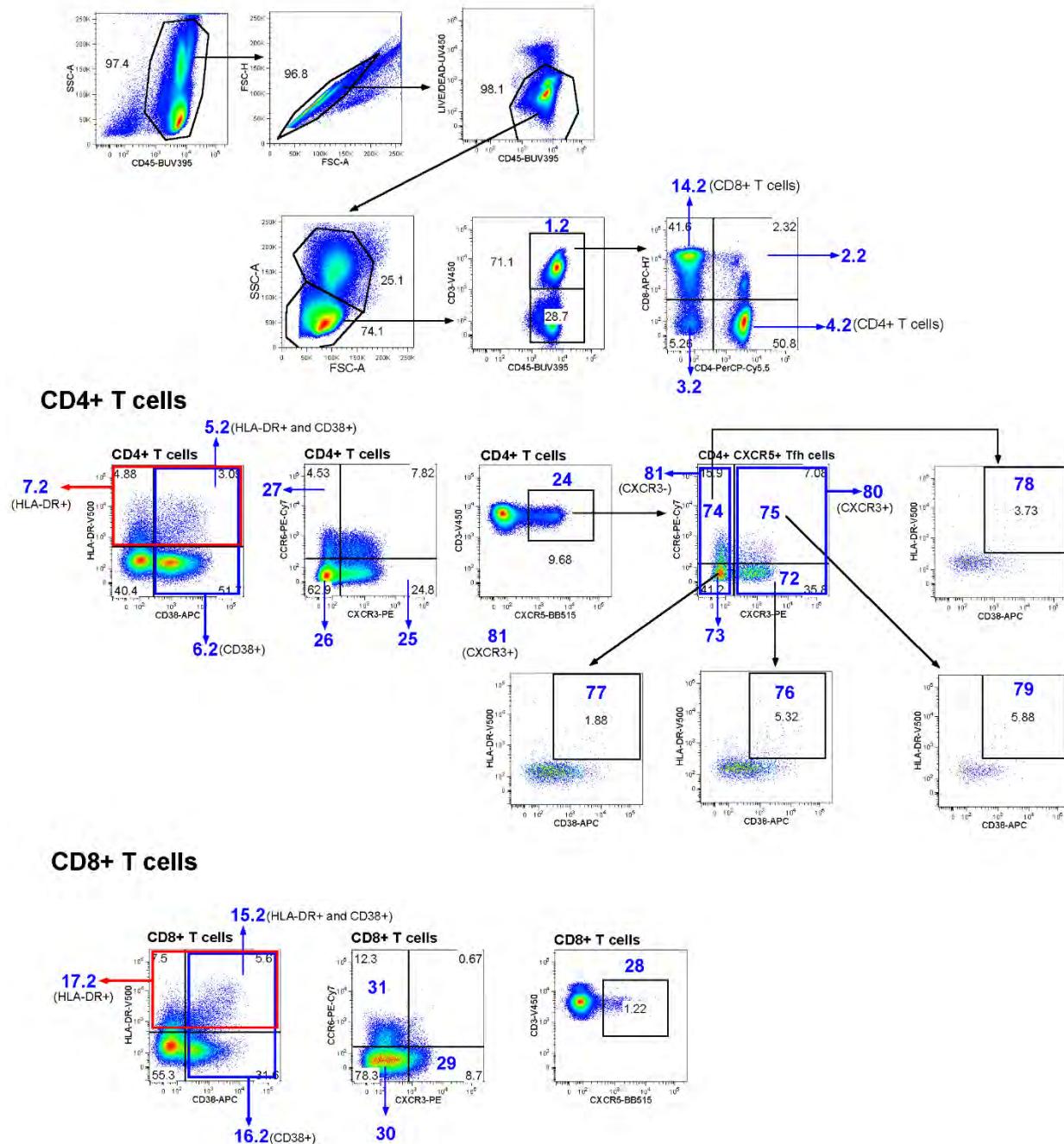


CD8+ T cells



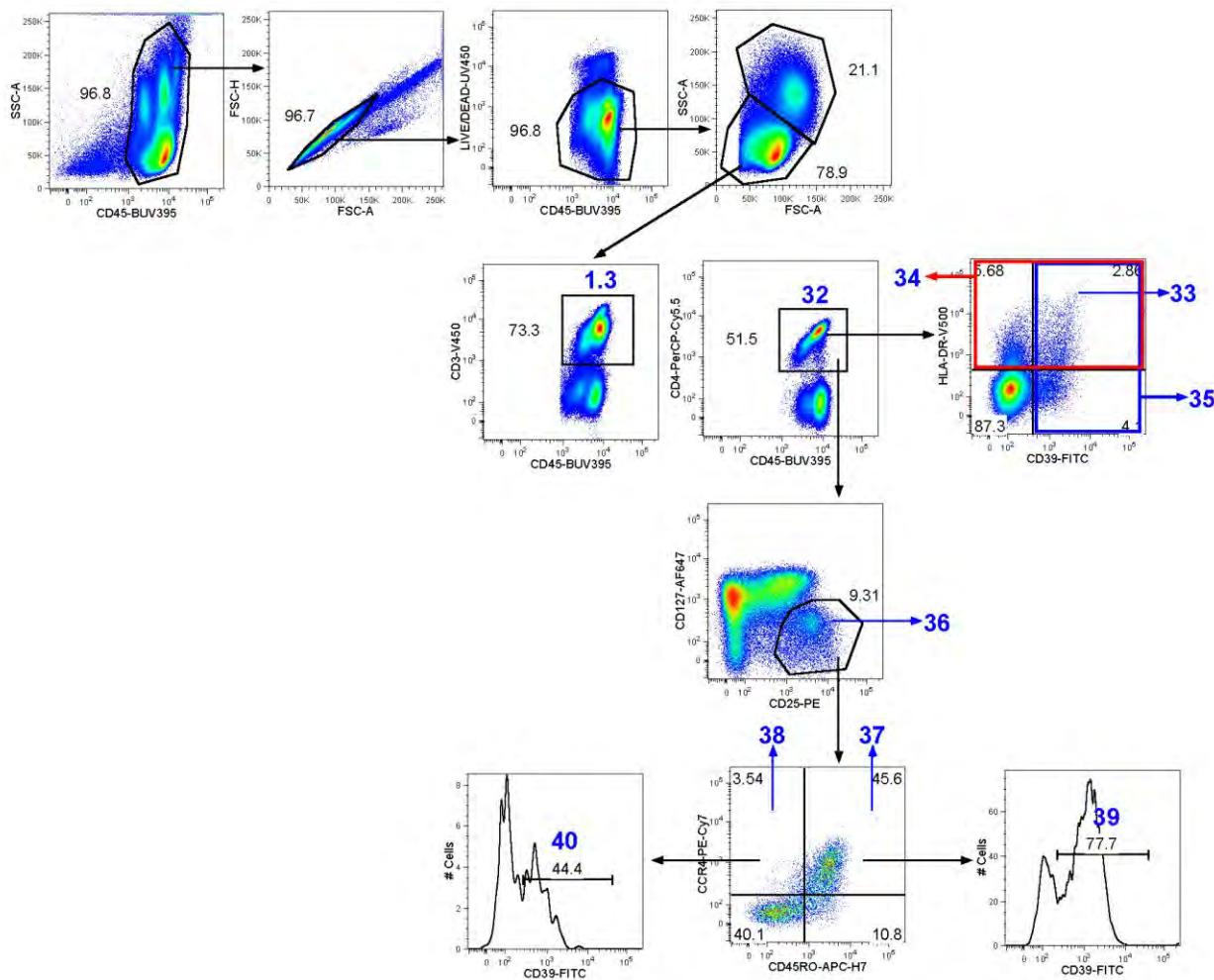
Suppl Fig. 4: Representative gating for populations identified by the T cell panel of the high parameter flow cytometry analysis (refer to Suppl Tab. 1,2).

T helper cell Gating :



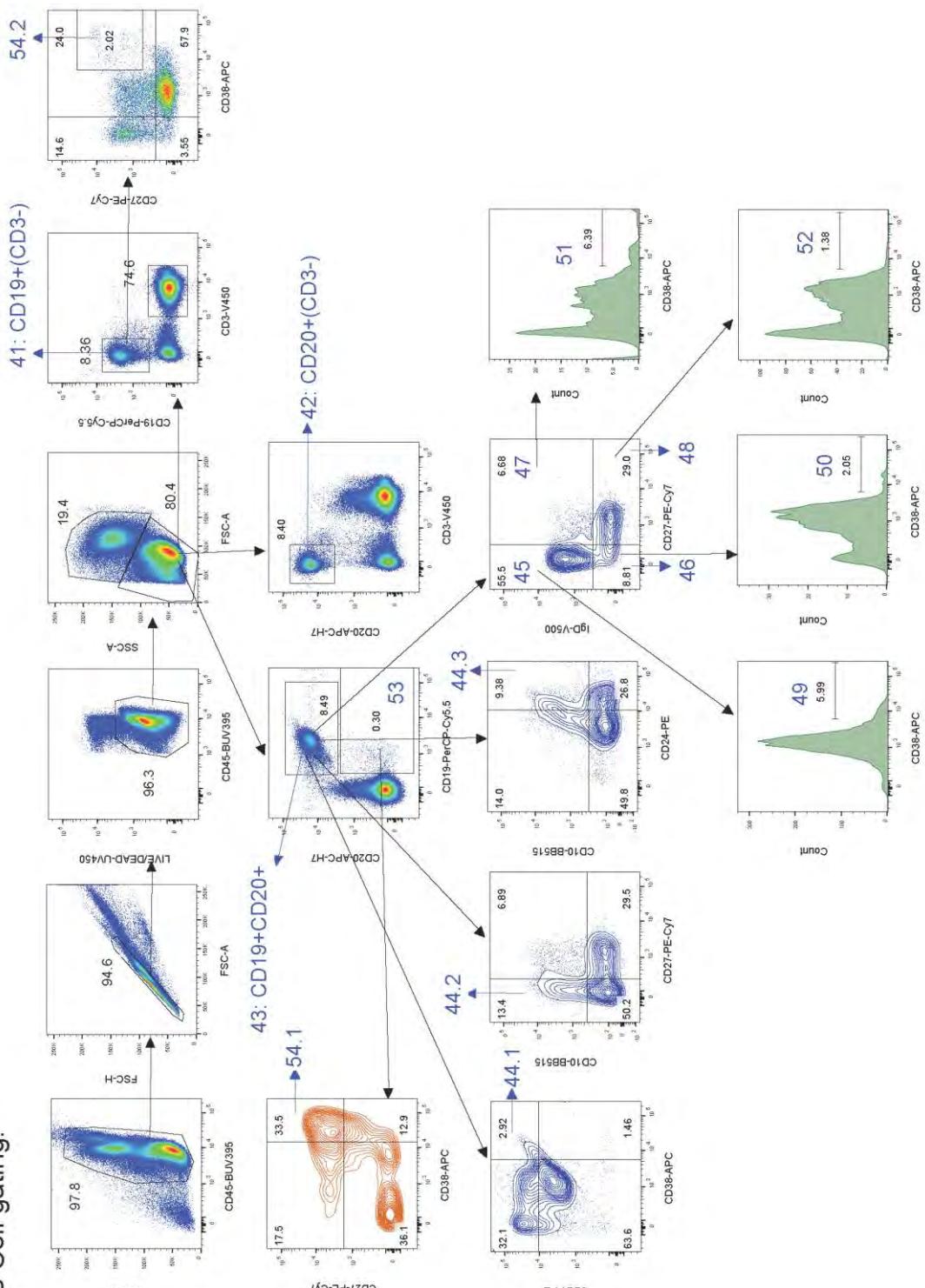
Suppl Fig. 5: Representative gating for populations identified by the T helper panel of the high parameter flow cytometry analysis (refer to Suppl Tab. 1,2).

T-reg Gating :



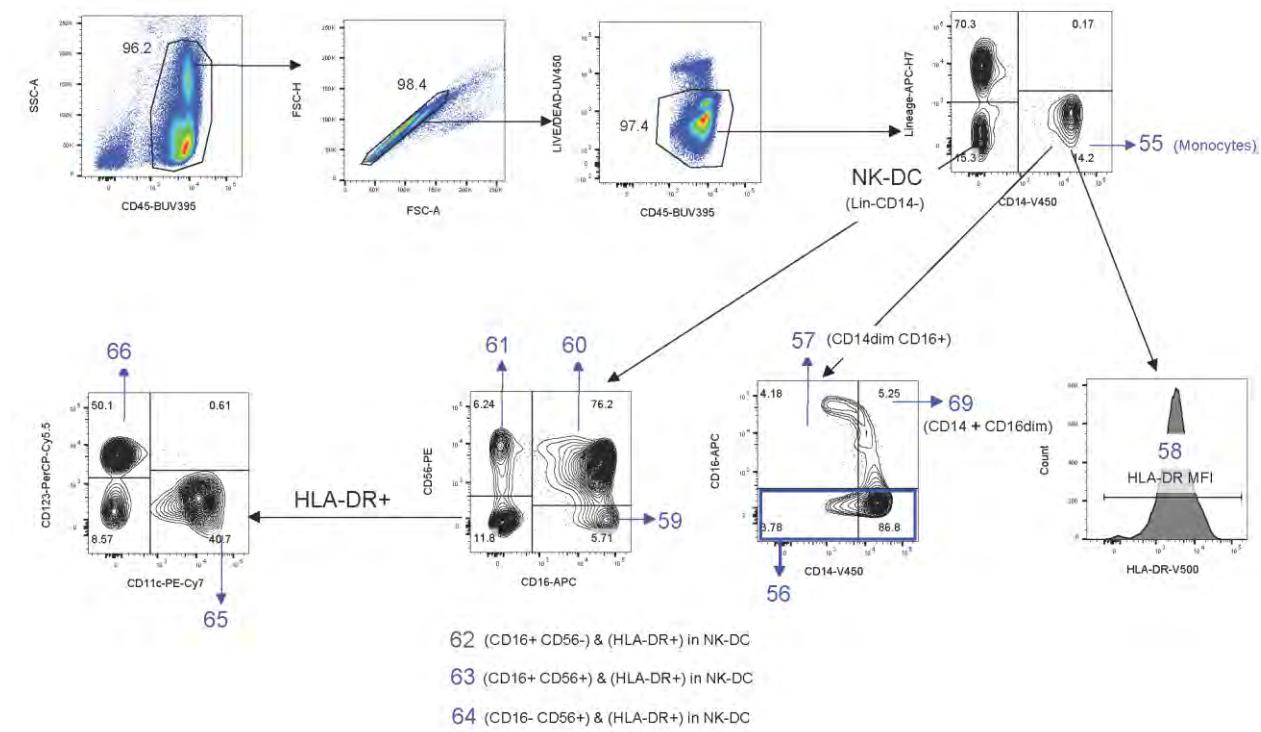
Suppl Fig. 6: Representative gating for populations identified by the T Reg panel of the high parameter flow cytometry analysis (refer to Suppl Tab. 1,2).

B Cell gating:



Suppl Fig. 7: Representative gating for populations identified by the B cell panel of the high parameter flow cytometry analysis (refer to Suppl Tab. 1,2).

DC Mon NK Cell gating:



Suppl Fig. 8: Representative gating for populations identified by the DC/Mono/NK panel of the high parameter flow cytometry analysis (refer to Suppl Tab. 1,2).

HIPc-10c							
			T lineage		B lineage	Myeloid lineage	
Excitation wavelength	Fluorochrom	PMT name	T cell	Treg	Thelper	B cell	DC/Mono/NK
355 nm	BUV395	V450	CD45	CD45	CD45	CD45	CD45
			H130	H130	H130	H130	H130
	UV450	V545	Viability	Viability	Viability	Viability	Viability
	V450	V605	CD3	CD3	CD3	CD3	CD14
			UCHT1	UCHT1	UCHT1	UCHT1	MOP9
407 nm	V500	V655	HLA-DR	HLA-DR	HLA-DR	IgD	HLA-DR
			G46-6	G46-6	G46-6	IA6-2	G46-6
	FITC	B515	CD28	CD39	CXCR5	CD10	CD163
			CD28.2	Tu66	RF8B2	HI10a	GH1/61
	PcP-Cy5.5	B710	CD4	CD4	CD4	CD19	CD123
			SK3	SK3	SK3	SJ25C1	7G3
488 nm	PE	G560	CD197	CD25	CXCR3	CD24	CD56
			150503	2A3	1C6	ML5	B159
	PE-Cy7	G780	CD45-RA	CCR4	CCR6	CD27	CD11c
			L48	1G1	11A9	M-T271	B-Ly6
	APC	R660	CD38	CD127	CD38	CD38	CD16
			HIT2	hIL-7R-M21	HIT2	HIT2	B73.1
532 nm	APC-Cy7	R780	CD8	CD45-RO	CD8	CD20	CD3+CD19+CD20
			SK1	UCHL1	SK1	2H7	SK7+SJ25C1+2H7

Suppl Table 1: Five parallel 10 color staining panels used for high parameter flow cytometry analysis.

Suppl Tab 2: 79 subsets of PBMC detected by high parameter flow cytometry analysis

Parameter	Group definition (n)	Cell populations			Serum proteins		
		p	q	ID	p	q	ID
Parity	1 (14) vs <1 (19)	0.055	0.710	X79	0.037	0.993	Transferrin
		0.090	0.710	X50	0.060	0.993	C6
		0.160	0.710	X75	0.067	0.993	FABP
Maternal age	<33 (10) vs >33 (10)	0.100	0.884	X50	0.003	0.764	OMD
		0.112	0.884	X79	0.004	0.764	FSTL3
		0.148	0.884	X1.3	0.012	0.998	Cystatin.C
Prev miscarriage	no (26) vs yes (7)	0.004	0.108	X50	0.010	0.840	HGFA
		0.021	0.213	X33	0.018	0.840	TSP4
		0.025	0.213	X49	0.022	0.840	CHL1
Gestation duration	<39 (10) vs >40 (10)	0.121	0.941	X50	0.013	1.000	VEGF.sR3
		0.235	0.941	X80	0.016	1.000	MMP.12
		0.248	0.941	X81	0.023	1.000	IL.13.Ra1
BMI at V1	<23 (10) vs >28 (10)	0.030	0.525	X1.3	0.022	1.000	granzyme.A
		0.040	0.525	X1.2	0.035	1.000	FABPL
		0.238	0.922	X44.2	0.054	1.000	HCC.4
Systolic BP at V1	<108 (10) vs >118 (10)	0.020	0.515	X44.2	0.009	0.851	DKK3
		0.107	0.746	X1.3	0.013	0.851	SLIK5
		0.128	0.746	X1.2	0.016	0.851	HCC.4

Suppl Table 3: Immune populations and serum proteins that change during gestation do not differ between individuals based on metadata characteristics. For each of the 26 flow populations and 434 somamers that changed between V1 and V3, the magnitude of change was compared between individuals segregated by metadata characteristics. The top 3 associations for each are shown for 6 characteristics, showing no FDR adjusted p<0.05.

Parameter	Range	Complete Blood Count	Clinical Flow Cytometry
Hemoglobin	11.2-15.7 g/dL	X	
Platelets	173-369 K/uL	X	
WBC	3.98-10.04 K/uL	X	
Neutrophil %	34-71.1%	X	
Neutrophil absolute	1.56-6.13 K/uL	X	
Lymphocytes %	19.3-51.7%	X	
Lymphocytes absolute	1.18-3.74 K/uL	X	
Monocyte%	4.7-12.5 %	X	
Monocyte absolute	0.24-0.86 K/uL	X	
CD3%	57-79%		X
CD3 absolute	615-2348 uL		X
CD4/CD3%	27-59%		X
CD4/CD3 absolute	334-1556 uL		X
CD8/CD3%	13-33%		X
CD8/CD3 absolute	149-787 uL		X
NK cells%	7-31%		X
NK Cells absolute	109-607 uL		X
CD19%	6-19 %		X
CD19 absolute	81-493 uL		X

Suppl Table 4: Parameters determined by clinical phenotyping analysis.