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Supplemental information

Mds1^{CreERT2}, an inducible Cre allele specific

to adult-repopulating hematopoietic stem cells

Yi Zhang, Kathleen E. McGrath, Edward Ayoub, Paul D. Kingsley, Hongbo Yu, Kate Fegan, Kelly A. McGlynn, Sarah Rudzinskas, James Palis, and Archibald S. Perkins



Supplemental Figure 1. *Mds1^{lacz}* labeling and *Runx1* immunohistochemistry relating to Figure 1H.

A-D. Photomicrograph of E10.5 (A, B) or E11.5 (C, D) aorta, left is ventral. β -galactosidase-positive cells (A, C) that also express Runx1 detected by immunocytochemistry (B, D) are indicated by arrows. Size Bars= 20um



Supplemental Figure 2. Gating strategies and support data for Figure 2. A. Gating strategy for E11.5 AGM and circulating pre-HSC. Live (DAPI-), FSC/SSC gated cells were further gated Kit+ Ter119-, then CD31+ (PECAM), and finally gated as VEcadherin+ (VEC) with CD45 used to help visualize the populations. **B.** Gating strategy for EMP in the yolk sac or bloodstream. Live (DAPI-), FSC/SSC gated cells were further gated as Ter119- VEcadherin- (to exclude circulating pre-HSC). Then Kit+ CD41^{mid} cells were further gated as CD16/32+. CD45 was used to help further visualize the EMP population. **C.** Analysis of E11.5 *Mds1^{CreERT2} Rosa26^{LSL-YFP}* fetuses after TAM delivery at E8.5. Analyses were performed as in Figures 2H,I, with YFP+ cells in the paws serving as a positive control for *Mds1^{CreERT2}* expression in these fetuses. Average ±SEM of 3 individuals are plotted. **D.** Gating strategy for cells in fetal blood quantitated in Figure 2I, J and below panel E. Primitive erythroid cells (EryP) are gated out of Kit-Live (DAPI-) blood as Ter119⁺. **E.** Gating strategy for fetal liver quantitated in Figure 2I, J and below panel E. Live (DAPI-), FSC/SSC gated cells were further gated as Kit⁺, CD11b⁺, Kit-CD11b⁺. CD11b⁺ were further gated as GR1+, and Kit-CD11b⁺ that are gated by Ter119+ and FSC to gate maturing definitive erythroblasts (EryD). YFP gating demonstrates positivity found Kit+ cell, but not EryD or GR1+ populations. **F.** After RBC lysis, adult peripheral blood cells were initially gated by live (DAPI-) FSC/SSC then gated as CD11b⁺ myeloid cells, CD19+ B-cells and from the double negative CD3e+ T-cells. Then each population was gated for YFP+.



Supplemental Figure 3. Gating strategies utilized in Figure 3. A. Example of gating for Figure 3A, B and C. Fetal liver cells were gated to assay YFP positivity of progenitors starting with FSC/SSC, lineage (Ter119, GR-1, CD19, CD3e) negative, live (DAPI⁻) cells that were then gated as Kit⁺ Scal⁻ (LK) or Kit⁺ Sca⁺ (LSK). LK were further gated as CD127+ (CD127+), and then Kit+ CD127- cells were further gated into CD16/32+ and - populations. **B.** Maturing lineages within the fetal liver or blood were gated from a population of FSC/SSC live (DAPI-) Kit- cells (middle graph) as Ly6G+ or Ter119+ or double negative cells. In the liver, Ter119+ cells were further refined for high SSC/FSC (right) to gate erythroblast versus circulating erythrocytes (See C for gating of blood erythrocytes). The double negative cells were future discriminated (left) into CD19+ or Ly6C+ cells. Note that this gating strategy removes the lower Ly6C+ granulocytes (Ly6G+) allowing gating of the Ly6C+ monocytes. **C.** Gating of circulating erythrocytes. Due to the decreasing Rosa expression in erythroid cells as they mature (note the already lower value of liver erythroblasts versus other precursors) the gating of low YFP positivity in erythrocytes above Cre-negative littermates is shown. **D.** Example of subgating of E16.5 LSK quantitated in Figure 3C. LSK were further refined into MPP4- CD135 (Flt3+, CD150-) or LT-HSC, ST-HSC, MPP2 and MPP3 out of the LSK Flt3- cells. **E.** Macrophages were identified by their F4/80 positivity in different tissues from FSC, SSC, live (DAPI-), Ter119- cells. In brain and liver additional CD11b positivity was used but not in fetal liver, which is highly erythropoietic as the macrophages associated with erythropoiesis do not express CD11b (Seu et al., 2017).



Supplemental Figure 4 Gating strategies utilized in Figure 4 and Summary. A. YFP positivity of more specified hematopoietic progenitors (top) in adult bone marrow was determine by first gating FSC/SSC, lineage (Ter119, GR-1, CD19, CD3e) negative, live (DAPI-) cells that were then gated as kit+ CD127+ (LK CD127+) and then kit+ CD127- further gated into CD16/32 hi and negative. More multipotent progenitors were gated first (middle) out of the Kit+ Sca+ population (LKS) and further refined into MPP4- CD135 (Flt3+, CD150-) or LT-HSC, ST-HSC, MPP2 and MPP3 out of the LSK Flt3- cells. YFP gating of all populations are shown below. **B.** Macrophages were identified by their F4/80 positivity in different tissues from FSC, SSC, live (DAPI-), lineage (Ter119, CD19, CD19, CD3e) negative cells. For most tissues, additional CD11b positivity was used but not in spleen and bone marrow because of evidence that CD11b- macrophages are involved in erythropoiesis in those tissues (Seu et al., 2017). **C.** Overlapping temporal waves of primitive hematopoietic progenitors and erythro-myeloid progenitors (EMPs) emerge in the yolk sac, followed by hematopoietic stem cells (HSCs), which emerge in the aorta-gonad-mesonephros region (AGM). Differentiated progeny of the primitive hematopoietic lineages enter the newly forming bloodstream beginning at E8.25. EMPs, and then the HSCs, colonize the fetal liver, where they differentiate to produce hematopoietic cells that also enter the circulation. Lineage tracing with Mds1Cre^{ERT2} induced at E9.5 with TAM labels HSC (blue), but not primitive hematopoiesis (Prim. red) or EMP (green) and demonstrates that HSC-derived hematopoiesis increases over time in the fetal liver and in the circulation.