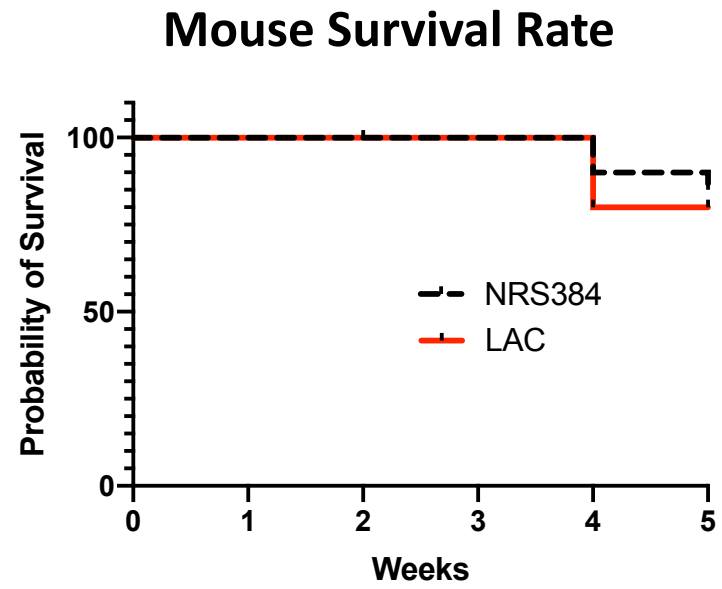
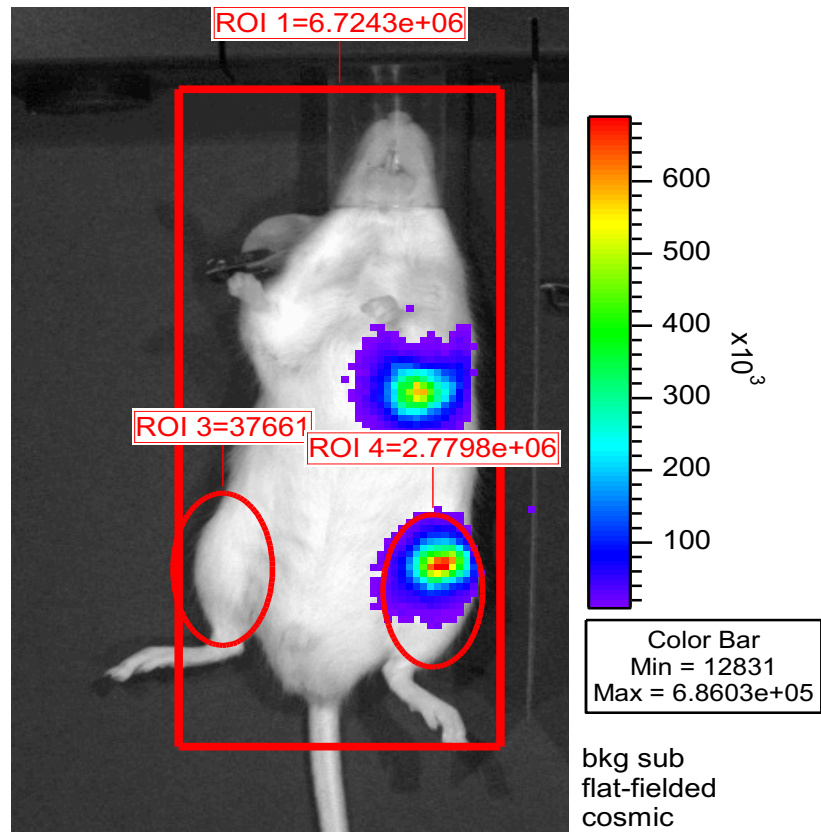


# Figure S1

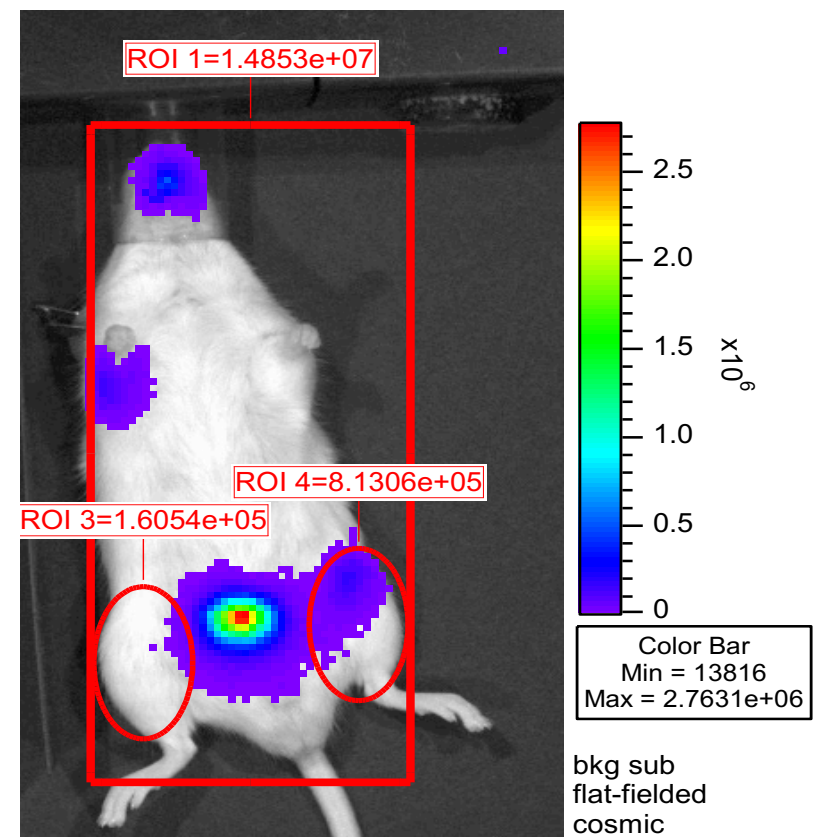


# Figure S2

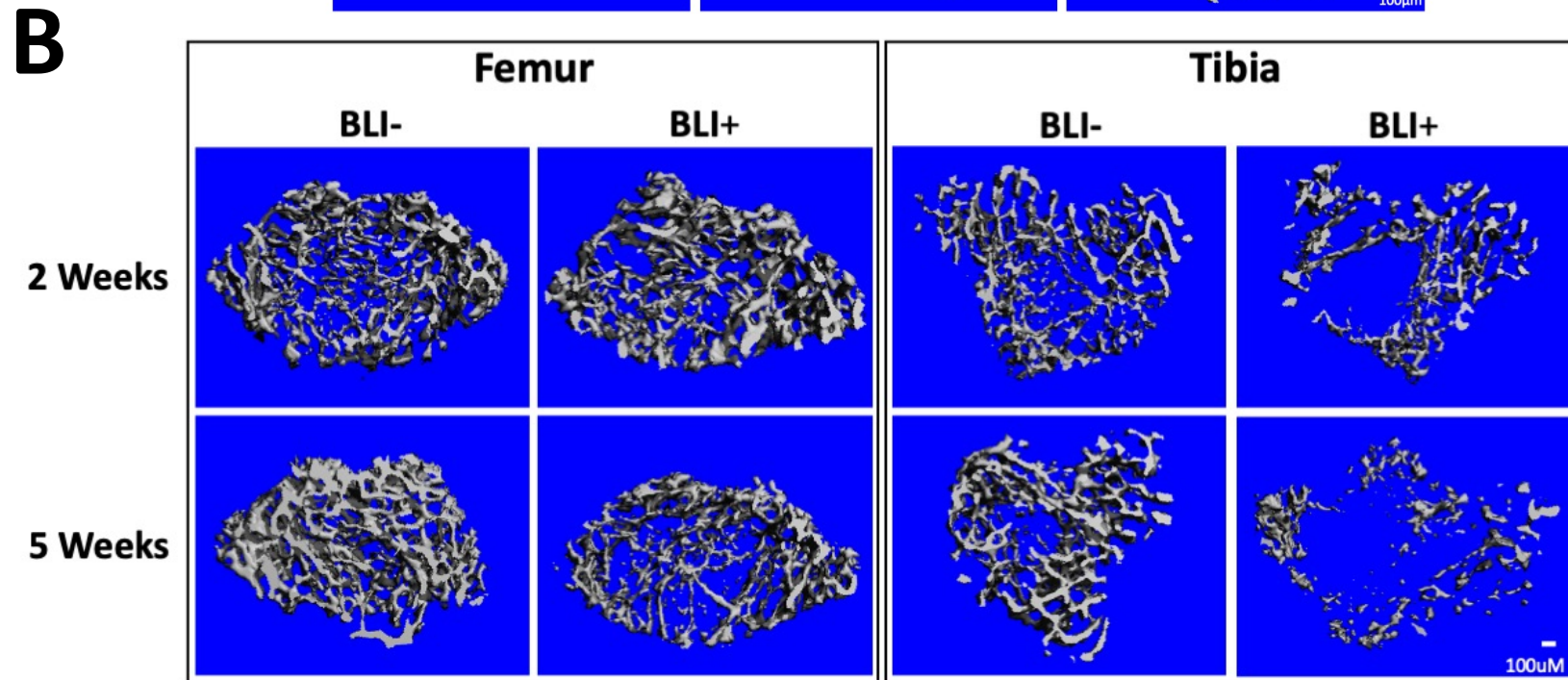
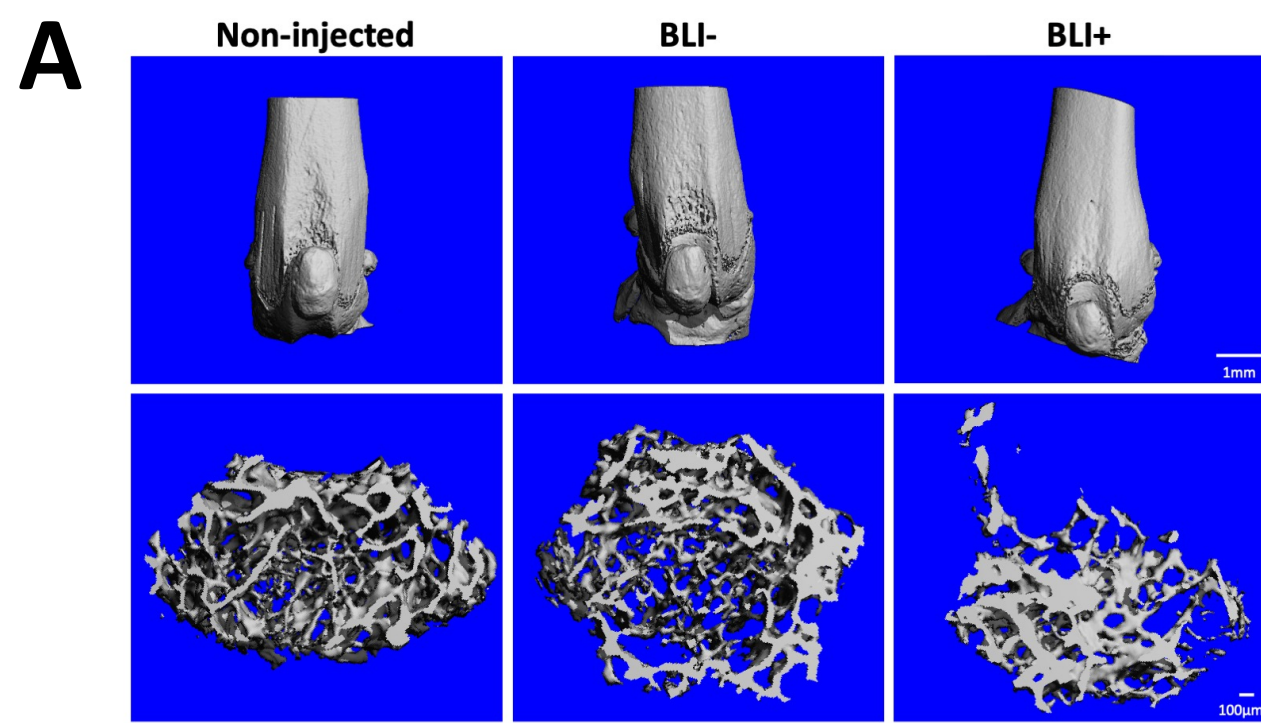
**A**



**B**

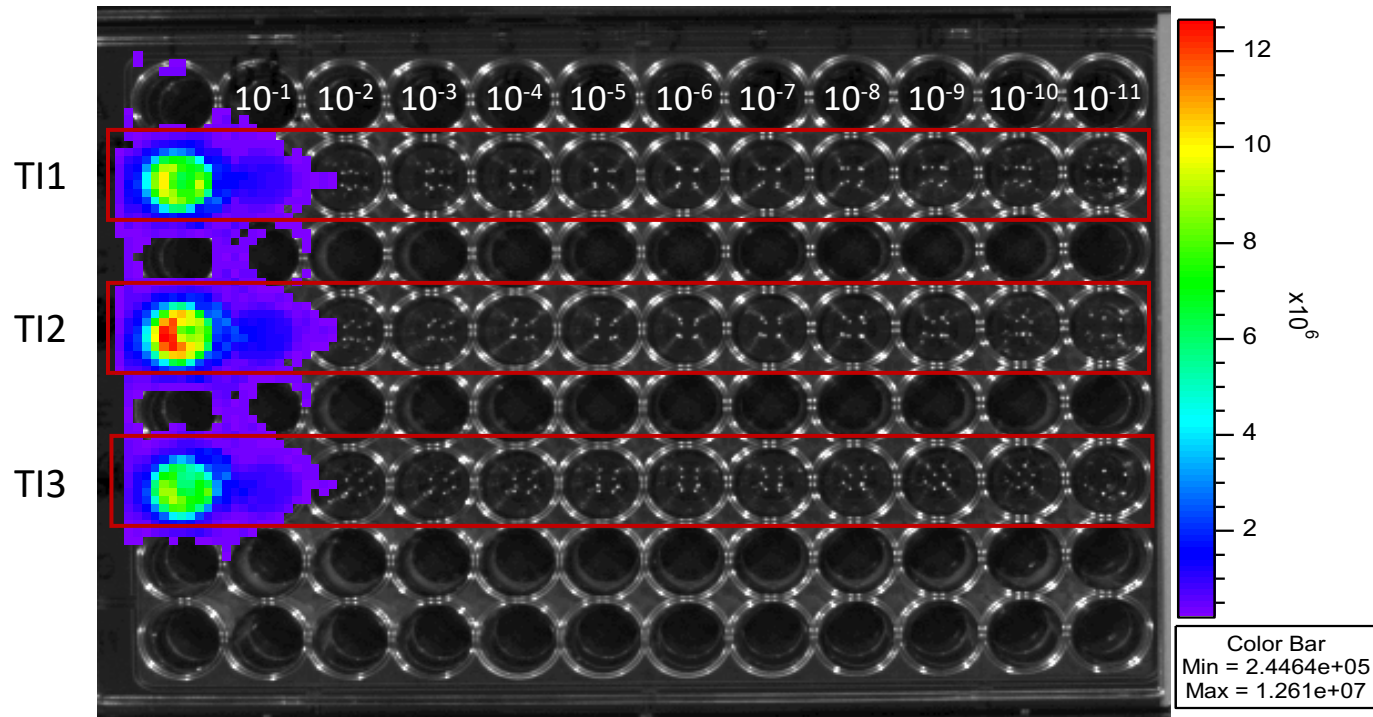


# Figure S3

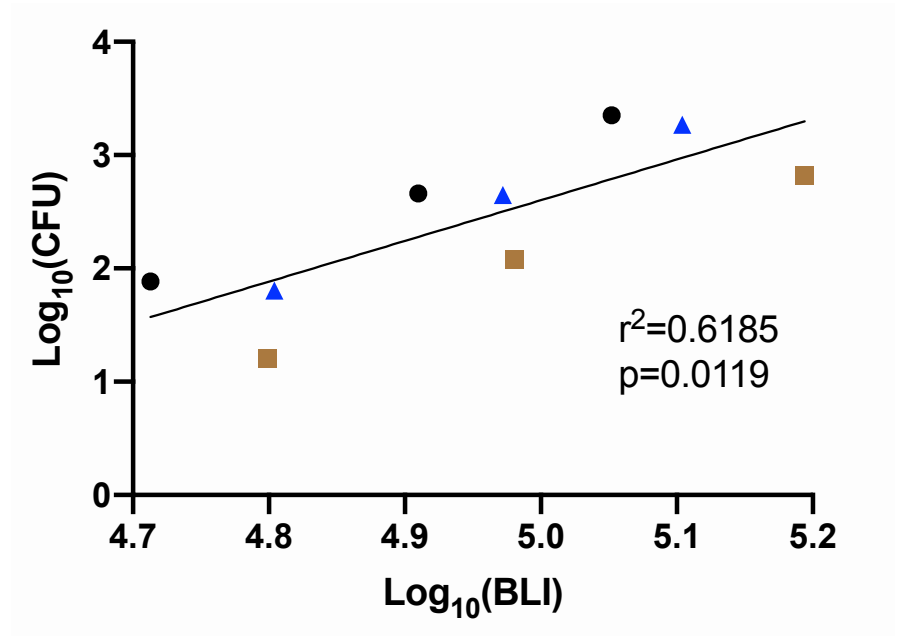


# Figure S4

## A

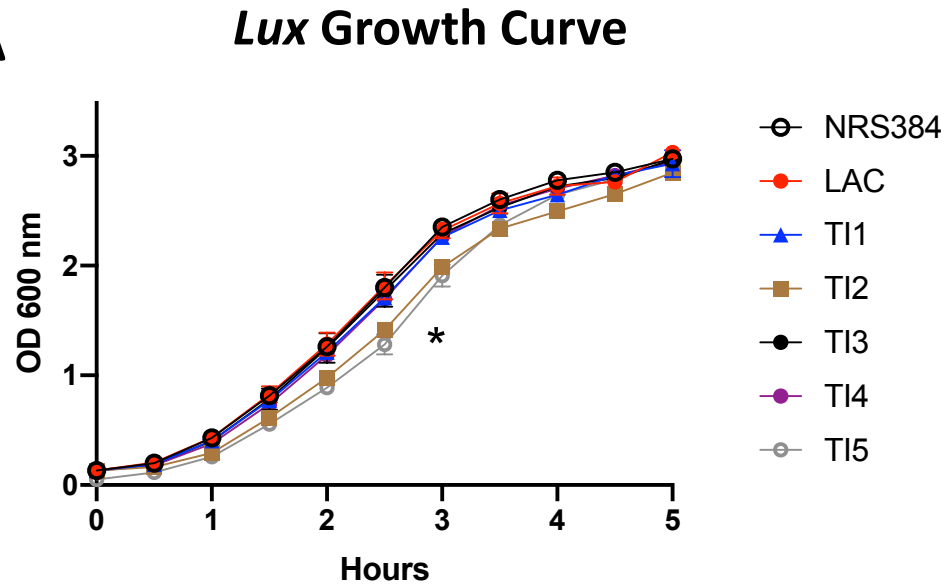


## B



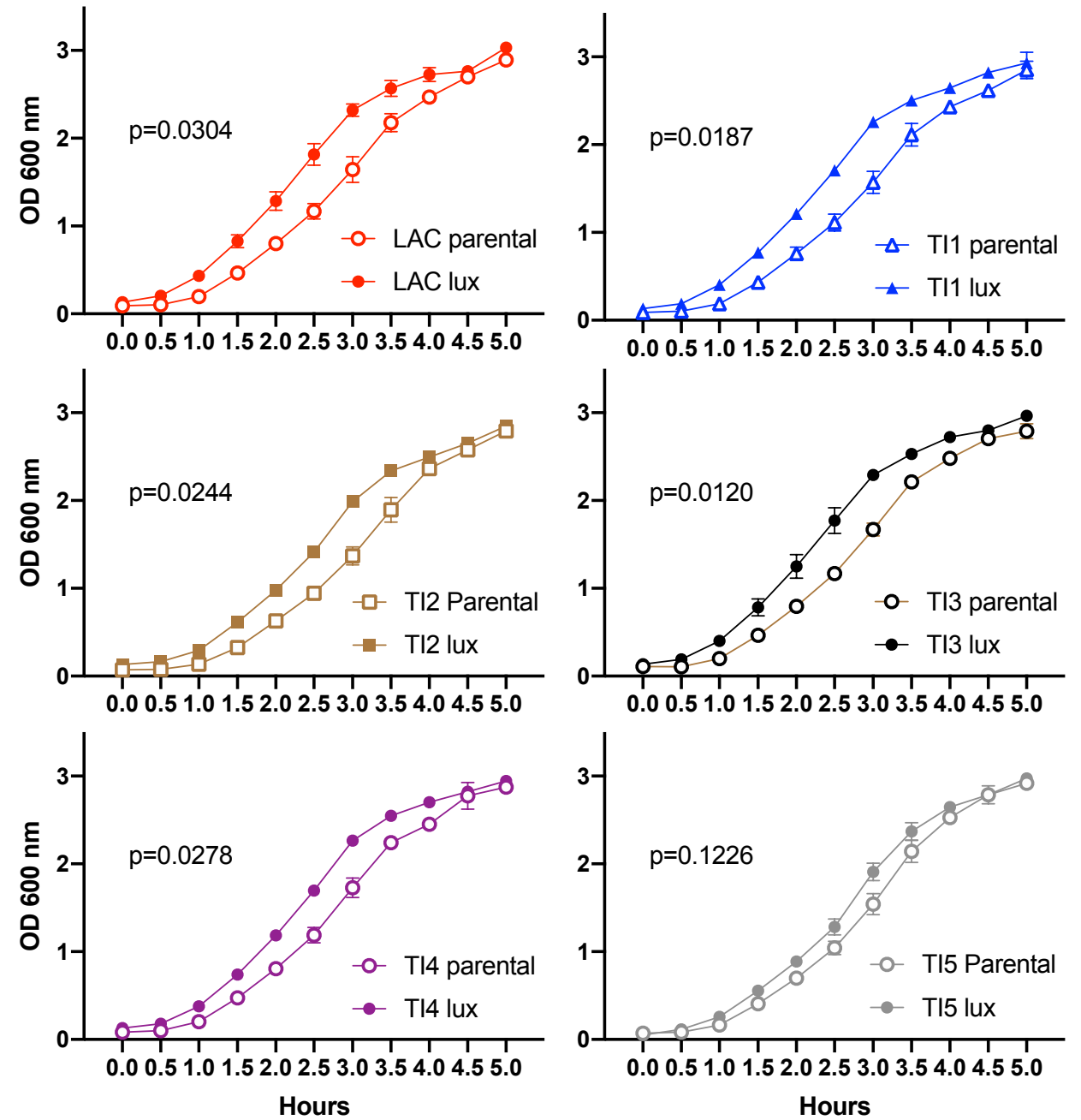
# Figure S5

## A

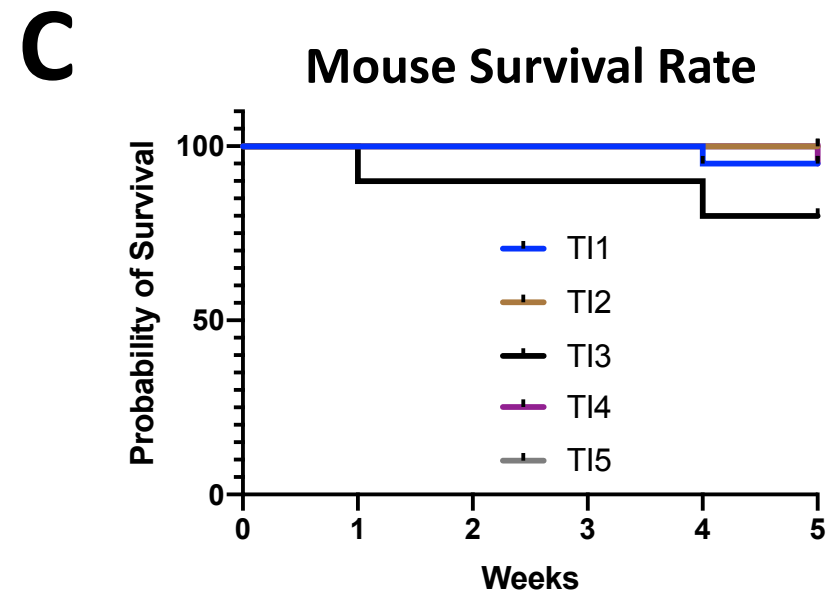
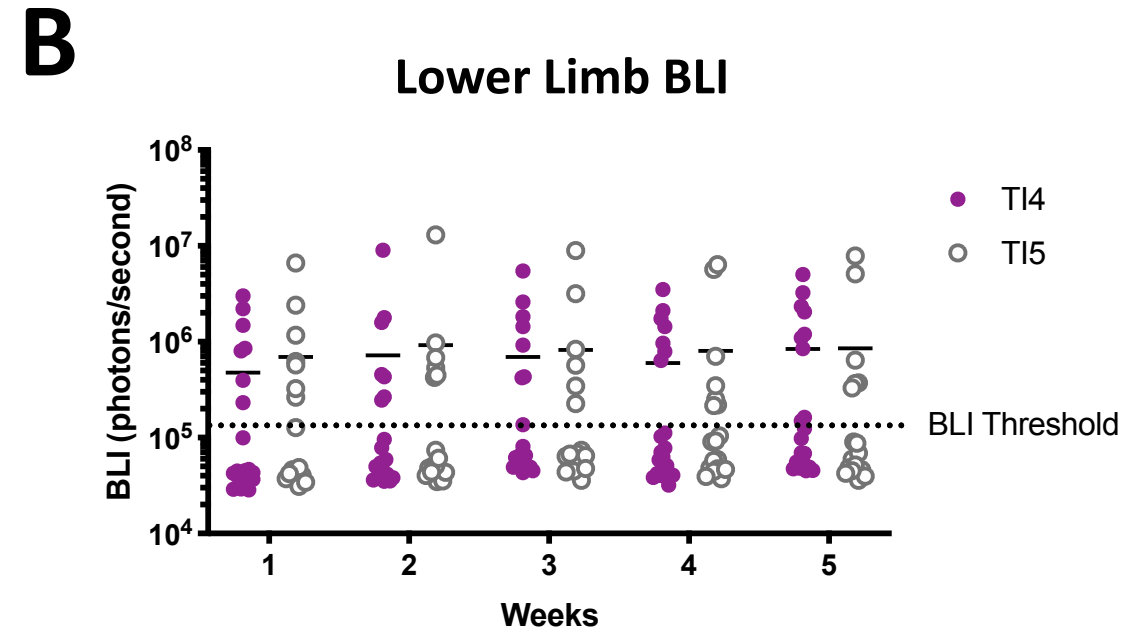
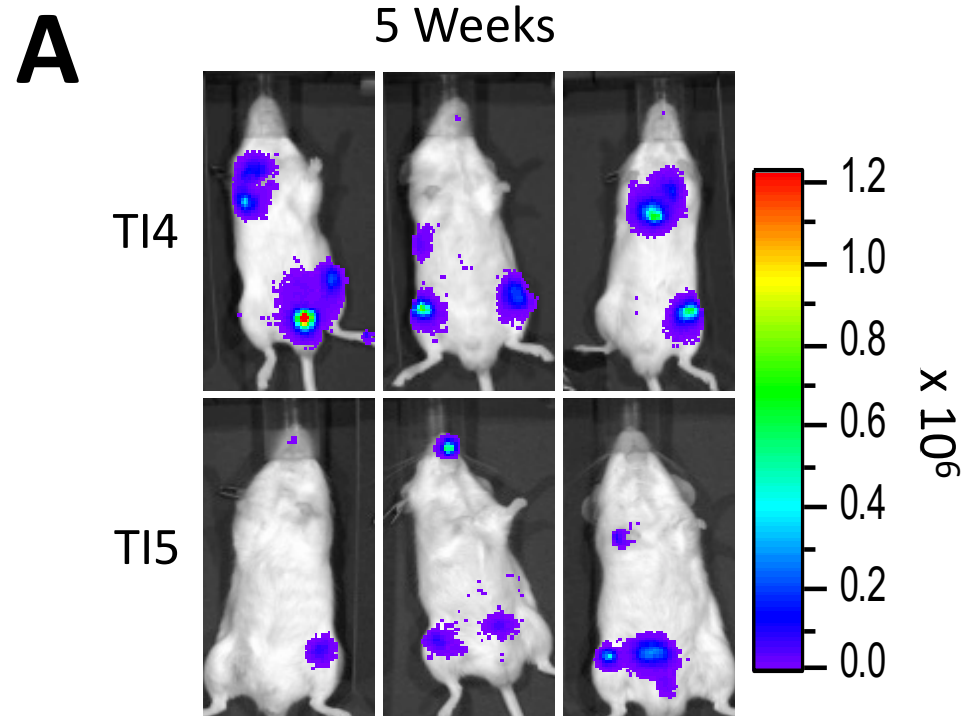


## B

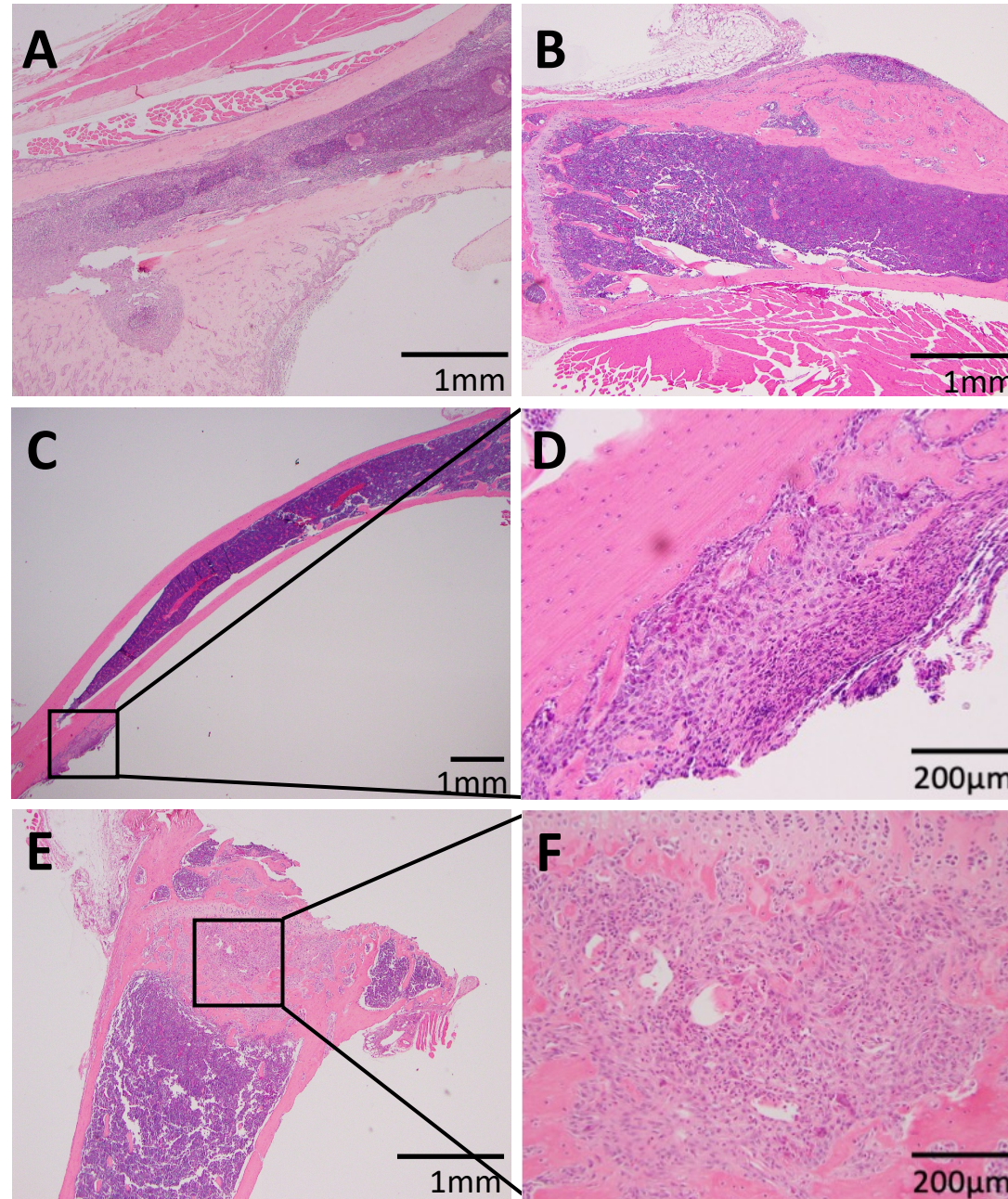
### Parental vs *Lux* Growth Curves



# Figure S6

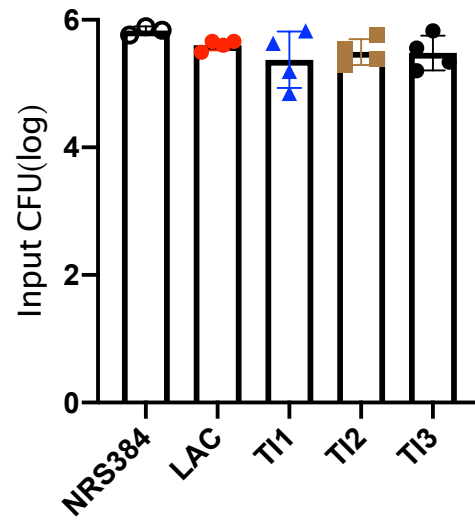


# Figure S7

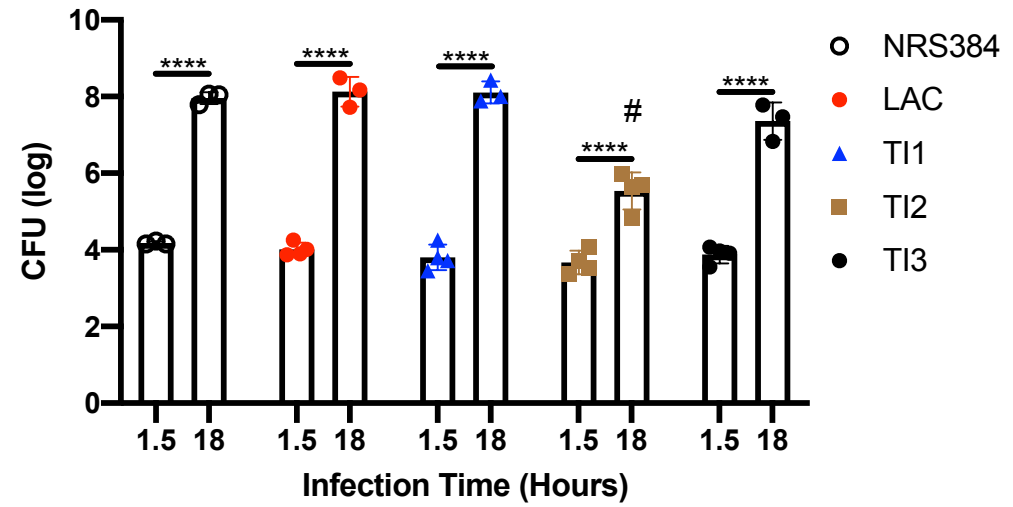


# Figure S8

## A

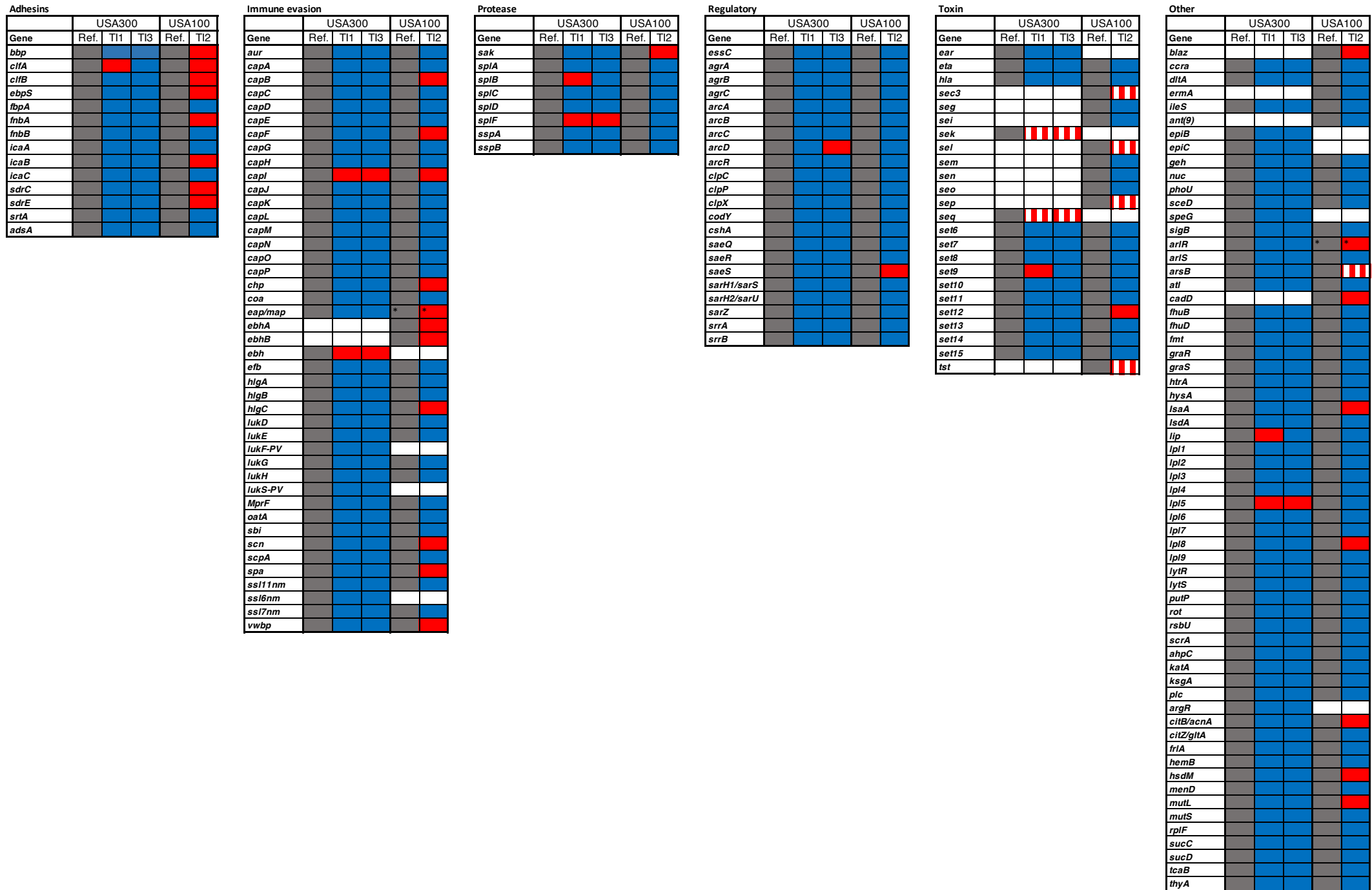


## B





# Figure S9



1 **Supplemental Figure Legends**

2

3 Figure S1

4 Percentage of mouse survival by week after injection with either NRS384 or LAC. Mice were  
5 sacrificed early (3 or 4 weeks post-injection) if lameness or hind-limb paralysis was observed.

6

7 Figure S2

8 Explanation of BLI signal measurements. Regions of interest (ROIs) used to measure the BLI signal  
9 from each hind limb are shown. (A) An example of a mouse with one BLI+ (left) leg and one BLI-  
10 (right) leg. BLI+ designation relies upon a discrete BLI signal focus originating from the left leg  
11 exceeding a signal of 70,000 photons/second. (B) An example of a mouse with one BLI+ (left) leg and  
12 one BLI- (right) leg. The right leg of this mouse is designated as BLI- even though it has a BLI signal  
13 of  $1.6054 \times 10^5$  because there is no clear focus of signal originating from the leg and high BLI signal  
14 originating from the bladder at the edge of the leg ROI.

15

16 Figure S3

17 Effects of HOM on different bone compartments. (A) Representative microCT reconstructions of  
18 cortical (upper panels) and trabecular (lower panels) bone of femurs from control (Non-injected) mice  
19 or BLI- and BLI+ femurs after NRS384 injection. (B) Representative microCT reconstructions of  
20 trabecular bone of BLI- and BLI+ femurs and tibias from LAC injected mice measured at 2- or 5-  
21 weeks post injection. Scale bars 1 mm for cortical scans and 100  $\mu$ m for trabecular scans.

22

23 Figure S4

24 *In vitro* CFU and BLI correlation with *lux* operon in clinical isolates. (A) BLI image of serially diluted  
25 TI1, TI2, and TI3. Bacteria were grown overnight in TSB at 1:200 shaking at 220 rpm overnight and  
26 subcultured 1:100 for 2 hours before dilutions. (B) Correlation of the BLI signal from  $10^{-4}$ ,  $10^{-5}$ , and  $10^{-6}$   
27 dilutions (A and B) from each isolate and the CFU count for these dilutions. CFUs enumerated from  
28 sampling of each dilution grown overnight on TSA. Blue triangle, TI1; brown squares, TI2; black dots,  
29 TI3.

30

### 31 Figure S5

32 Bacterial growth assay. (A) The OD<sub>600</sub> of each *lux* strain and isolate was measured every 30 minutes  
33 for 5 hours to determine growth curves. \*p=0.0011, TI2 and TI5 compared to all other strains by  
34 repeated measures two-way ANOVA with Geisser-Greenhouse correction and Tukey's post-hoc test,  
35 n=2 repeats. (B) The OD<sub>600</sub> of each parental strain or isolate was measured every 30 minutes for 5  
36 hours and compared to its respective *lux* transformed strain or isolate by repeated measures ANOVA,  
37 n=2 repeats.

38

### 39 Figure S6

40 Characterization of additional clinical isolates of *S. aureus*. (A) *In vivo* bioluminescent imaging (BLI) of  
41 three representative mice for each isolate at 5 weeks post-injection. (B) The quantification of BLI  
42 signal measured in the hind limb of each injected mouse over the 5 weeks post-injection (n=20/strain;  
43 BLI Threshold 70,000 photons/second). (C) Percentage of mouse survival after injection with each  
44 clinical isolate. TI2, TI4, and TI5 injected mice all had 100% survival.

45

### 46 Figure S7

47 Unusual histological formations with HOM infections. (A) Abscess formed along the periosteum of the  
48 distal tibia with robust periosteal bone formation encompassing the abscess from a T13-injected  
49 mouse. (B-D) Inflammation with reactive bone formation on the periosteal surface of two tibias of  
50 LAC-injected mice (D is higher magnification of black boxed area in C). (E,F) Fibrosis and new bone  
51 formation directly under the growth plate of a tibia from a T12 injected mouse.

52

### 53 Figure S8

54 Osteoclast intracellular proliferation assay. (A) Confirmation of equivalent input CFU for each strain  
55 from the bacteria-containing media used to infect osteoclast cultures. (B) Intracellular CFU measured  
56 from lysed osteoclasts 1.5 or 18 hours post infection. Each dot represents a biological replicate (cells  
57 cultured from a different mouse on a different day). There is no difference in phagocytosis of bacteria  
58 (1.5 hour timepoint) in any strain. \*\*\*\* $p < 0.0001$ , 1.5 hour vs 18 hour timepoints, and # $p \leq 0.0003$ , 18  
59 hour T12 vs all other groups, by Two-way ANOVA with Tukey's post-hoc test.

60

### 61 Figure S9

62 Clinical isolate polymorphisms by gene. 173 virulence associated genes (modified from [\(31\)](#)) and their  
63 presence, absence, and sequence relative to the reference strain. USA300\_FPR3757 is the USA300  
64 reference genome, and N315 is the USA100 reference genome. Grey = present in reference genome,  
65 White = absent in reference genome, Blue = present and identical sequence to reference genome,  
66 Red = present with at least one SNP, and Red/White striped = absent in isolate but present in  
67 reference genome. \* denotes a truncated gene. Genes are organized by function, which is listed  
68 above each table.

69