

An Alternative *In Vivo* Model to Evaluate Pluripotency of Patient-Specific hiPSCs

Supplementary Data

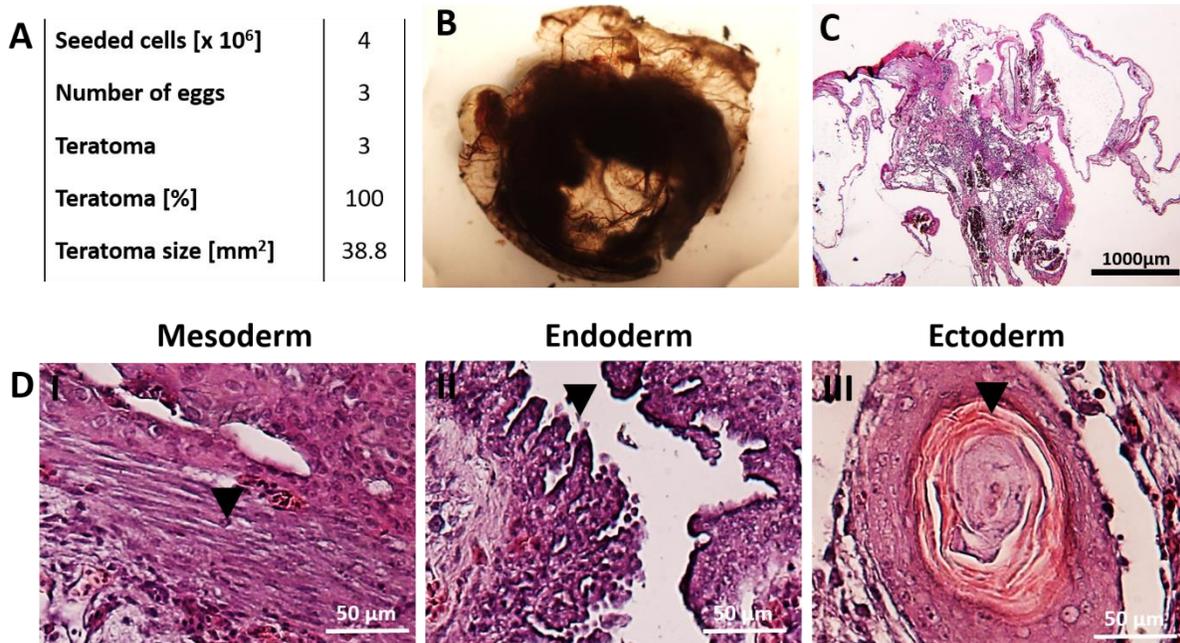


Fig. S1: Generation of teratomas by seeding 4×10^6 hiPSCs on CAMs

(A) Teratoma formation after seeding of 4×10^6 hiPSCs on CAM. (B) Explanted CAM with a teratoma. (C) Representative microscopic image of an H&E stained teratoma section generated from 4×10^6 hiPSCs showing (D) tissues of all three germ layers: mesoderm (I: smooth muscle tissue), endoderm (II: gut-like epithelium), and ectoderm (III: squamous epithelium). The arrows indicate the described germ layer-specific structures.

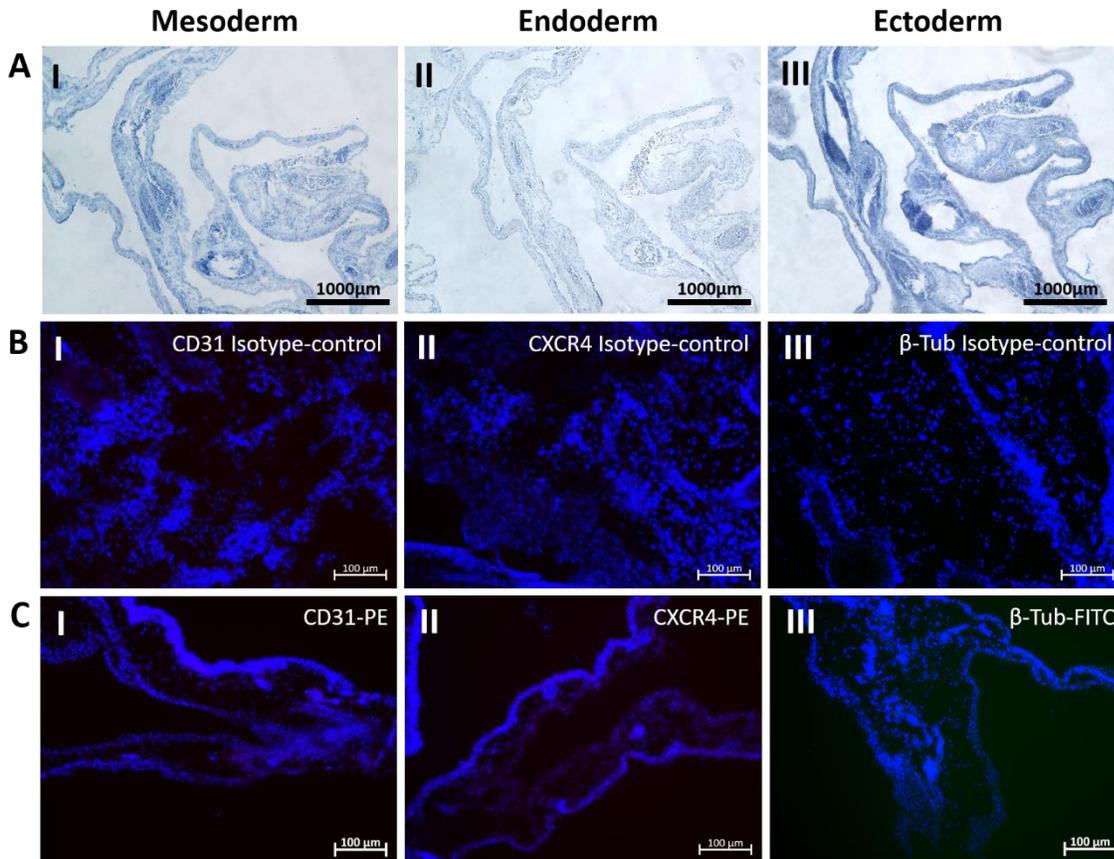


Fig. S2: Negative and isotype control staining of teratoma sections

(A) Representative images of CAMs seeded with 1×10^6 RECs after staining with (I) monoclonal mouse anti-human CD34, (II) monoclonal mouse anti-human SALL4, or (III) monoclonal mouse anti-human vimentin (V9) antibodies. No unspecific binding of antibodies to CAM without teratomas was detected. (B) Isotype control staining of teratomas generated by 2×10^6 REC-derived hiPSCs. Isotype controls showed no binding to the teratomas. Nuclei were stained with DAPI. (C) Staining of CAMs seeded with RECs with anti-human CD31, CXCR4, or β -tubulin antibodies. No specific binding of the antibodies was detected. Nuclei were stained with DAPI.