

Figure S1. Gating strategy for white blood cells, T cells, B cells, natural killer cells, double-positive $CD4^+CD8^+$ T cells, $CD3^+PD-1^{low}$ T cells, $CD3^+PD-1^{low}$ non-T cells, and $CD25^-$ and $CD127^-$ -expressing T cells. PBMCs, peripheral blood mononuclear cells; NK, natural killer; DP, double-positive.

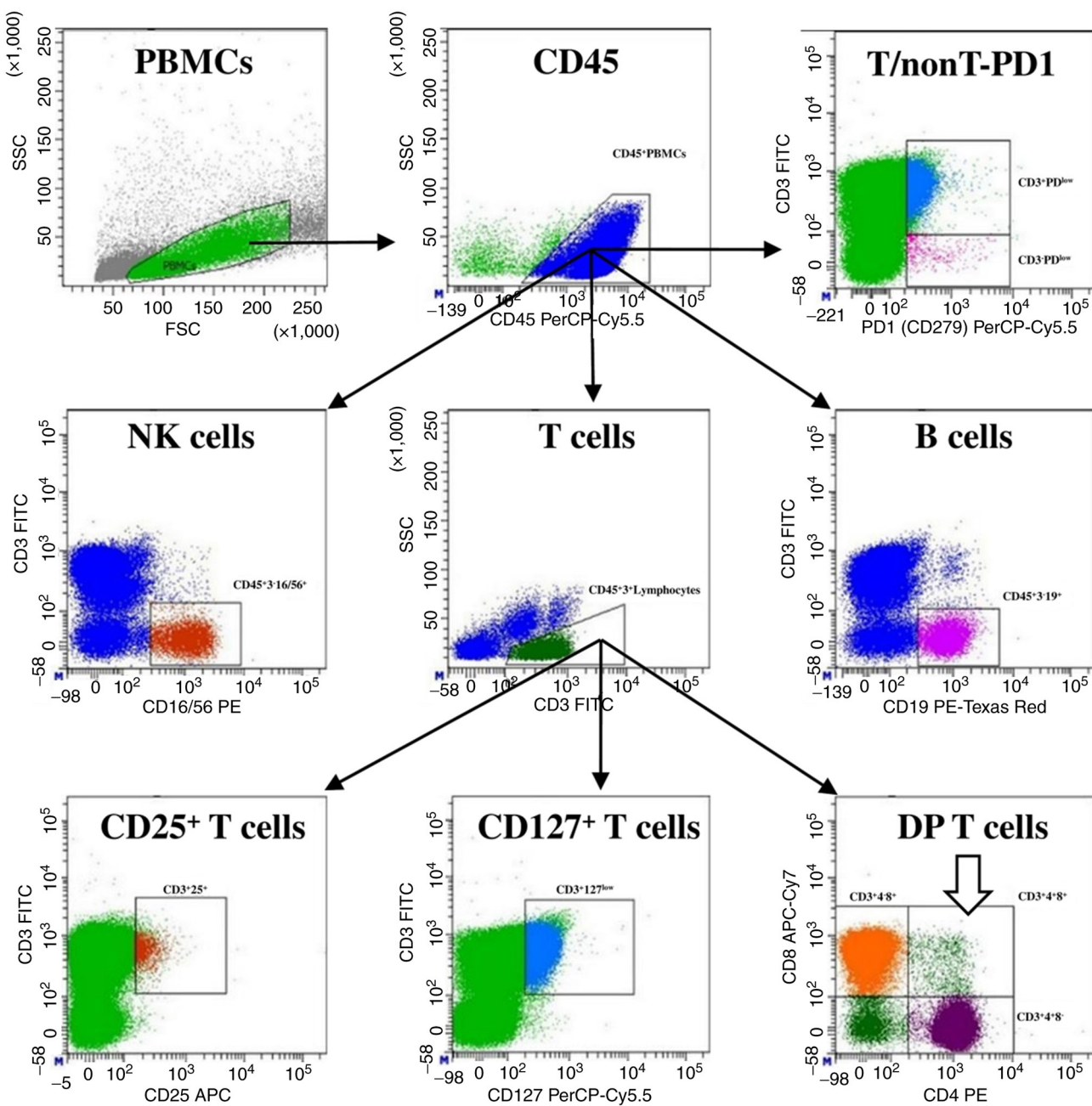


Figure S2. Gating strategy for subpopulations of CD4⁺ and CD8⁺ T cells (memory, effector, activated, senescent, exhausted, regulatory, and senescent memory). PBMCs, peripheral blood mononuclear cells; CTLs, cytotoxic T cells.

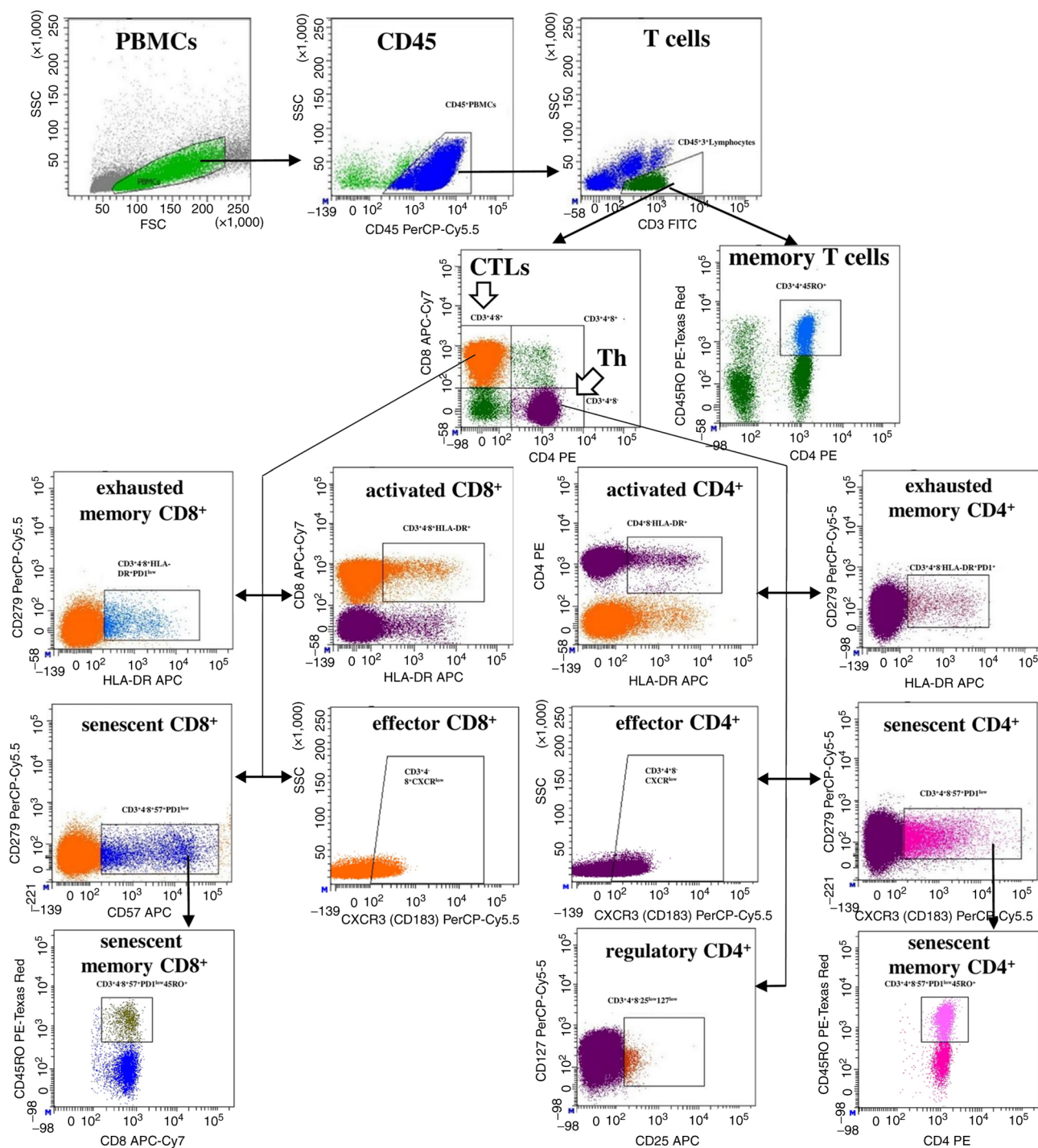


Figure S3. Gating strategy for myeloid mononuclear cells subsets: Monocytes, classical DCs, DCs, plasmacytoid DCs, regulatory DCs, inflammatory monocyte-derived DCs. PBMCs, peripheral blood mononuclear cells; DCs, dendritic cells; pDCs, plasmacytoid dendritic cells; Mo-DCs, monocyte-derived dendritic cells.

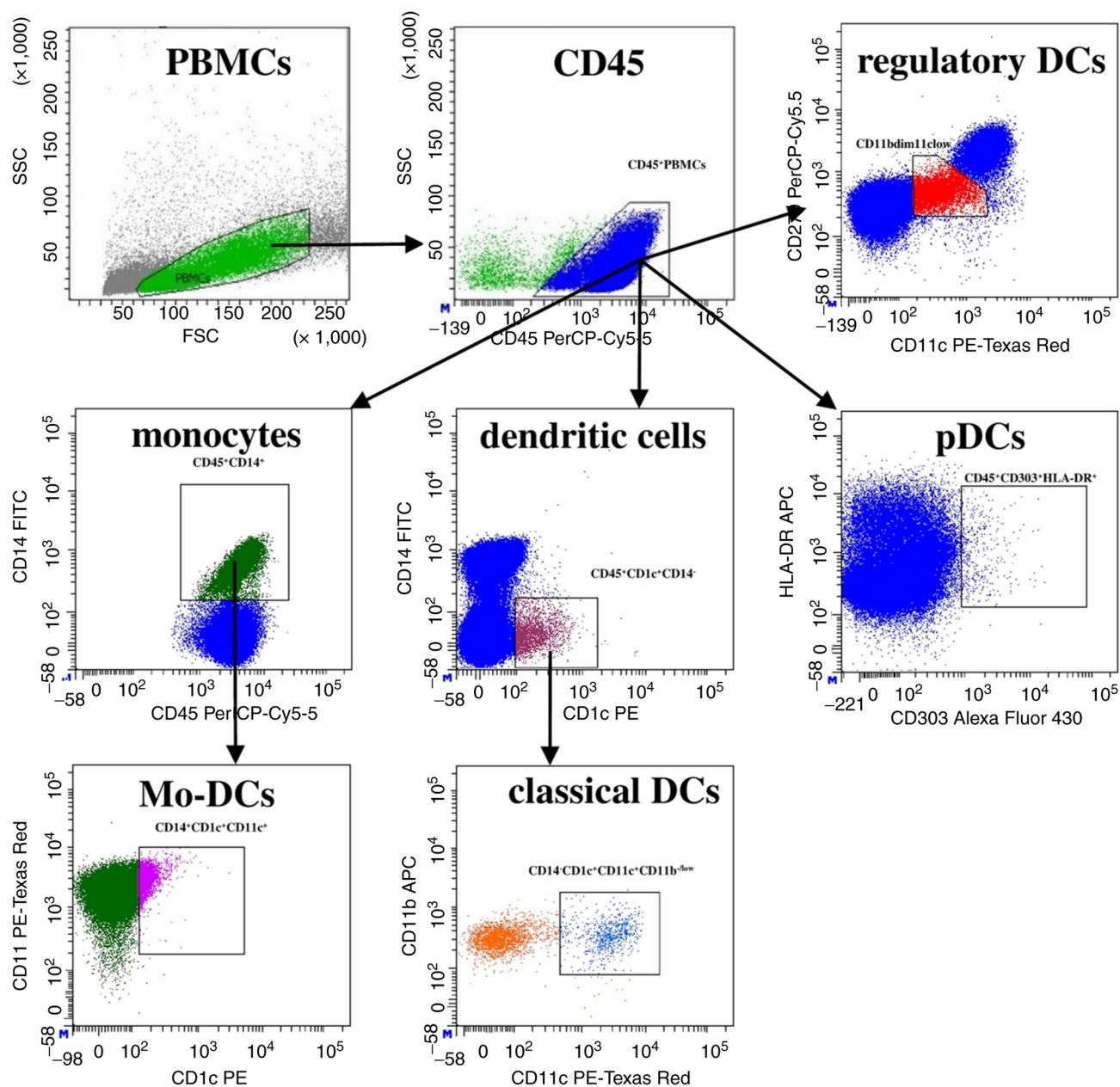


Figure S4. Correlations between lymphocyte subsets, cytokines, and microRNAs in COVID-19 patients. COVID-19, coronavirus disease 19; CT, computed tomography; ESR, erythrocyte sedimentation rate; IP-10, interferon γ -induced protein 10; MIP-1 α , macrophage inflammatory protein-1 α ; G-CSF, granulocyte colony-stimulating factor; miR, microRNA; WBC, white blood cells; CRP, C-reactive protein; DCs, dendritic cells; NK, natural killer.

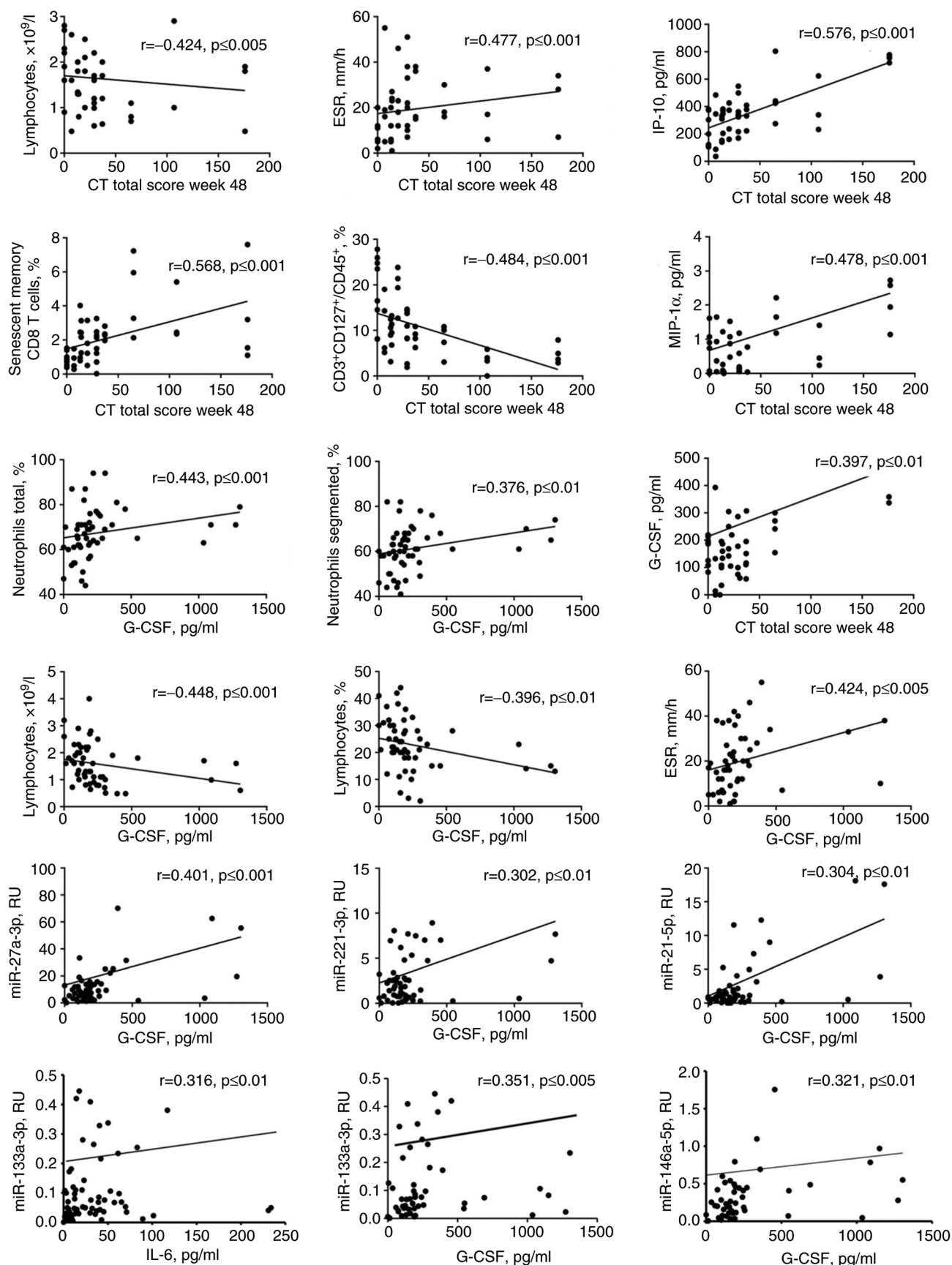


Figure S4. Continued.

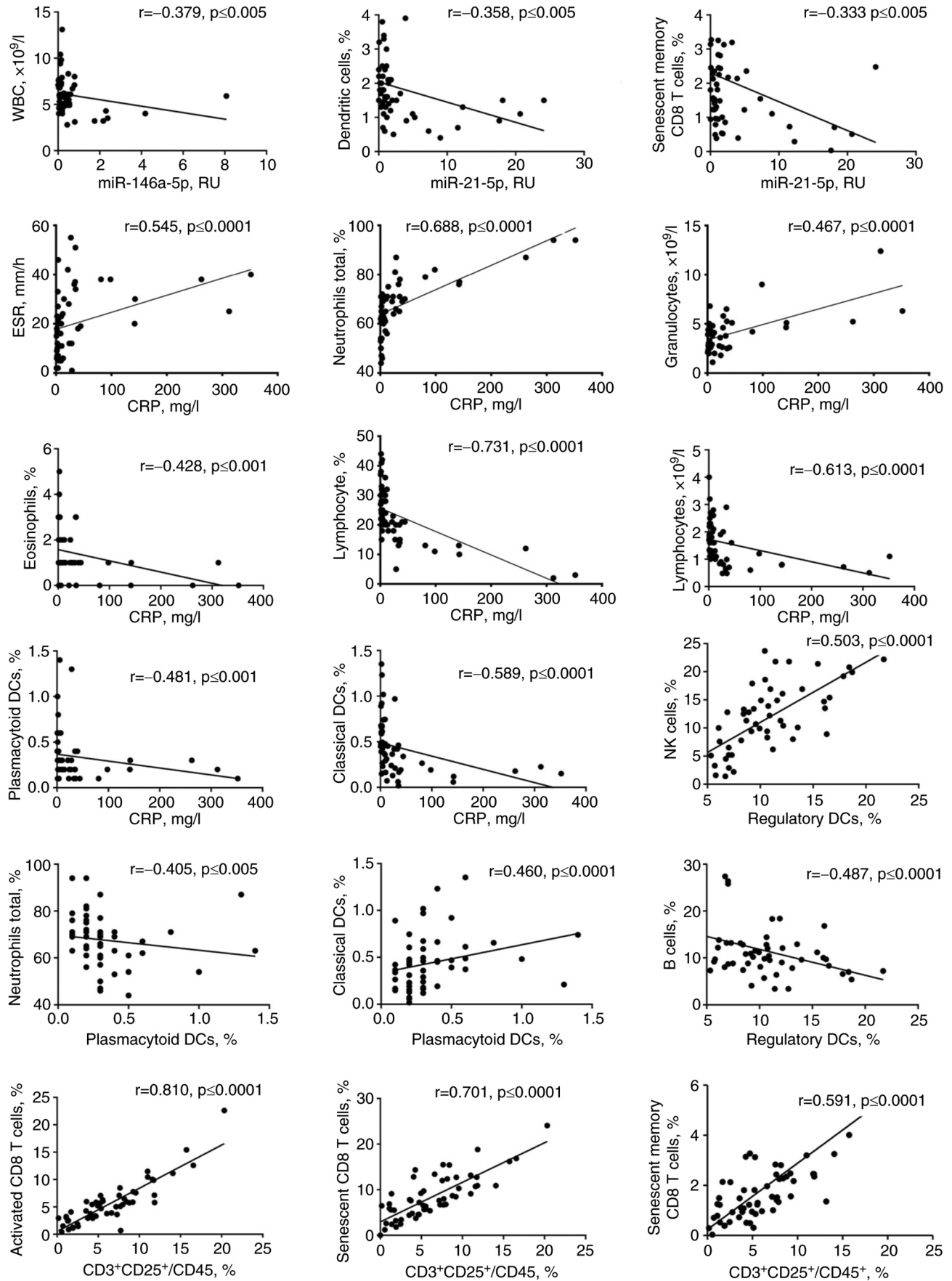


Figure S4. Continued.

