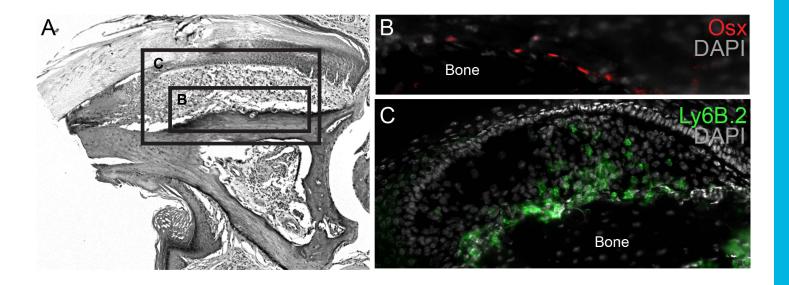
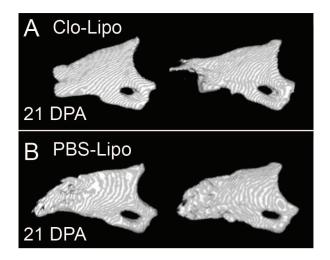
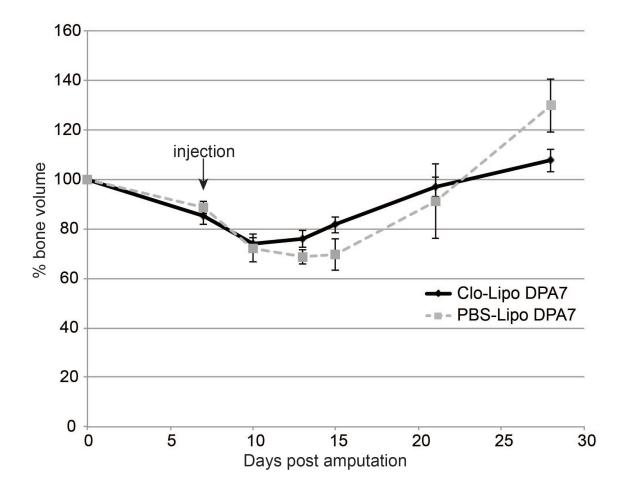
SUPPLEMENTAL FIGURES



Supplemental Figure 1. Clo-Lipo injections do not deplete osteoblast or neutrophil populations. (A) Map of amputated digit at 5 DPA showing area represented in images (B) and (C). **(B)** 1 day post Clo-Lipo injection, Osx+ cells are still present and line the periosteum of the amputated bone, however the Osx+ cells maintain a squamous morphology associated with quiescent osteoblasts. **(C)** Immunohistochemical stain for the neutrophil cell surface marker Ly6B.2. Neutrophils are still present at the injury site 1 day after the final Clo-Lipo injections (6 days post amputation).



Supplemental Figure 2. A single injection of Clo-Lipo or PBS-Lipo at 0 DPA immediately following amputation results in partial inhibition of regeneration. (A) 3D renderings of μ CT scans of Clo-Lipo treated digits at 21 days post amputation (DPA). 3 out of 8 digits treated with Clo-Lipo at 0 DPA show no degradation or new bone growth by 21 DPA whereas 5/8 digits show unpatterned bone growth. (B) Digits treated with PBS-Lipo at 0 DPA show patterned bone growth by 21 DPA.



Supplemental Figure 3. A single injection of Clo-Lipo at 7 DPA does not inhibit regeneration. Clo-Lipo or PBS-Lipo was injected at 7 DPA (arrow) when macrophages and osteoclasts are at peak activity. Clo-Lipo treated digits (black line) show a trend toward less bone growth compared to PBS-Lipo treated digits (grey dotted line) but differences in final volumes are not statistically significant (Two-way ANOVA main effect time, F=25.72, p<0.0001, and main effect treatment F=0.002, p=0.97). Y-axis = %bone volume / total volume at time of amputation. X-axis = Days post amputation