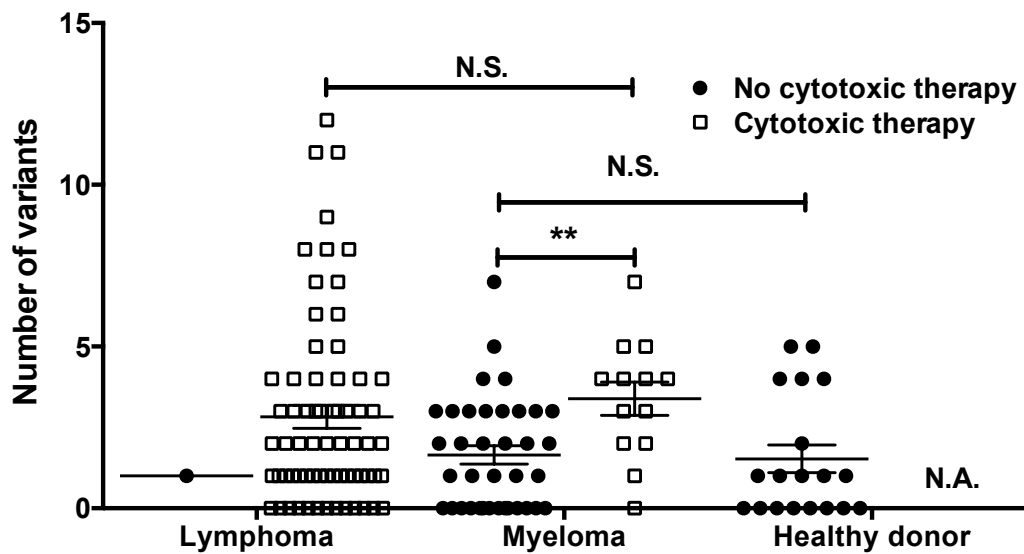
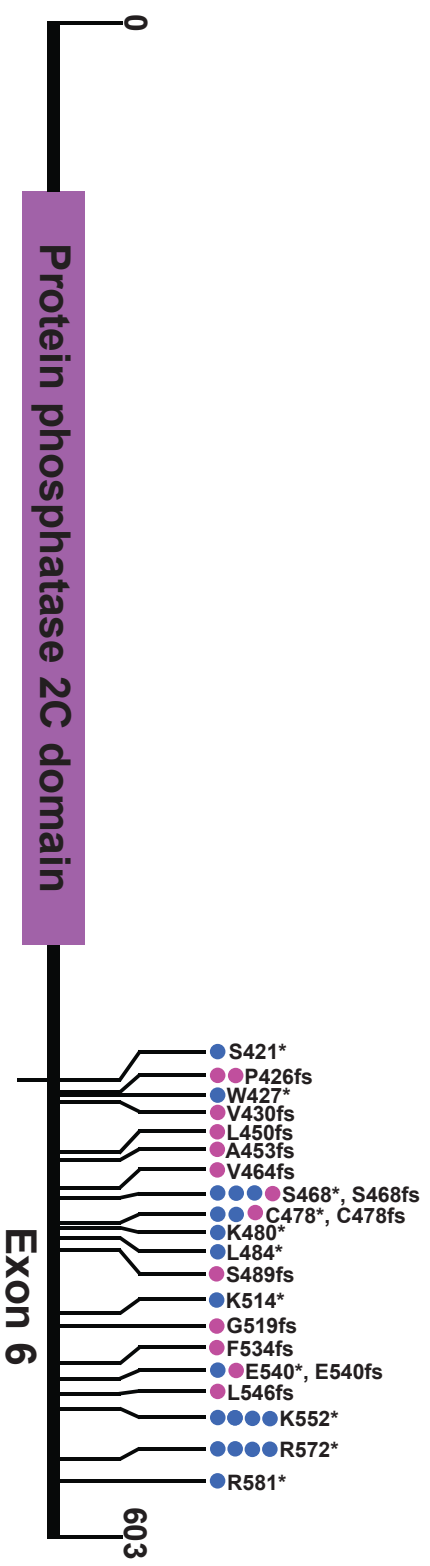


Supplementary Figure 1. Error-corrected HaloPlex sequencing allows for the detection of somatic variants at increased sensitivity. **a**, VAF distribution of the 327 variants identified by HaloPlex error-corrected sequencing in 138 pheresis specimens and the VAF distribution of those variants in commonly mutated genes. **b**, Characterization of the 272 SNVs detected in pheresis samples by HaloPlex error-corrected sequencing. **c**, Characterization of the 55 indels detected in pheresis samples by HaloPlex error-corrected sequencing. **d**, Trinucleotide context in which the SNVs identified in pheresis samples occurred either after exposure to cytotoxic therapy (n=185) or in the absence of cytotoxic therapy exposure (n=87). * The mutation is a C to T transition mutation occurring in the context of a CpG.



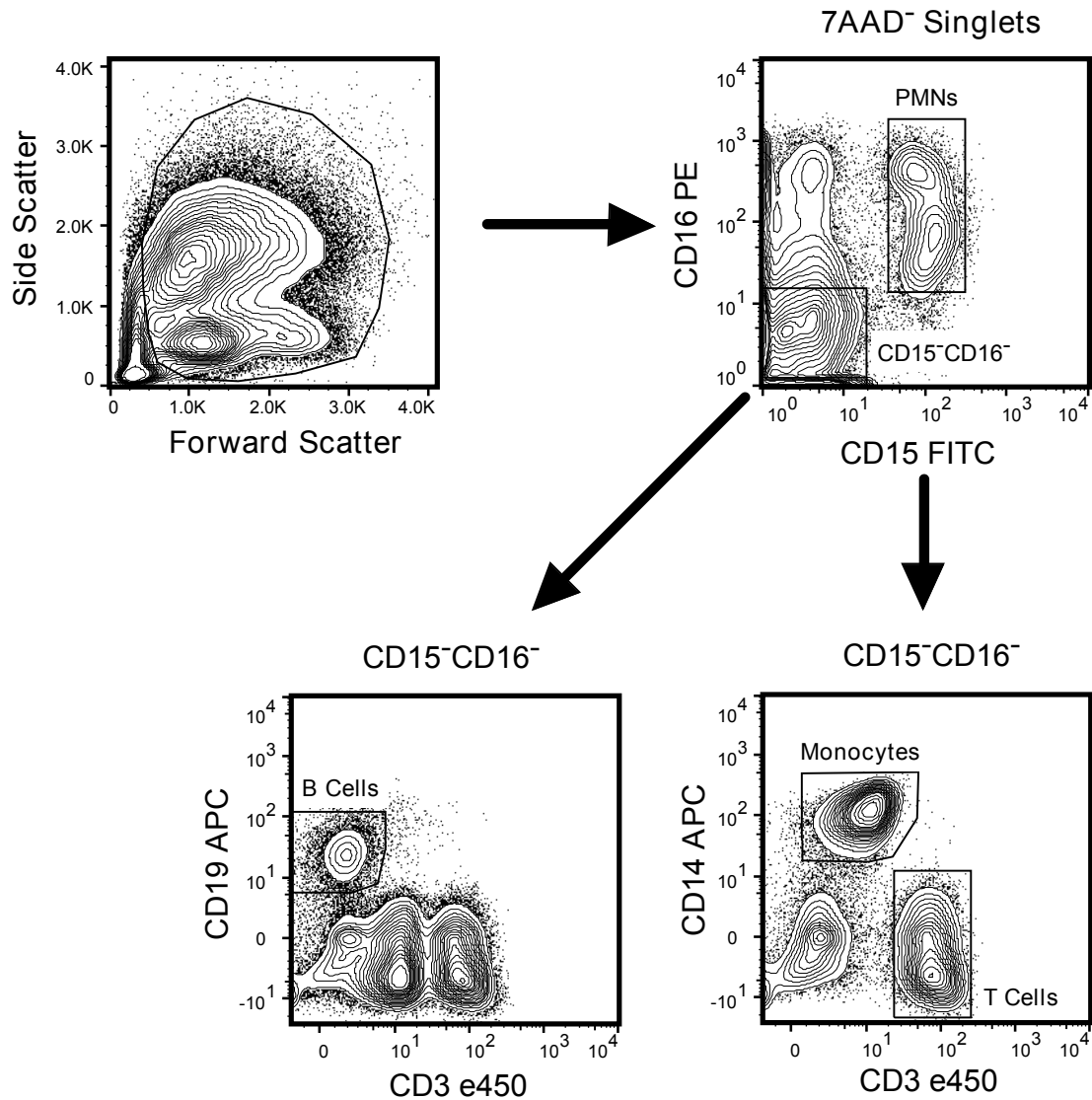
Supplementary Figure 2. Cytotoxic therapy exposure is associated with clonal hematopoiesis. The total number of clonal hematopoiesis-associated variants identified in lymphoma patients (n=69), myeloma patients (n=50), and healthy donors (n=19) grouped by whether or not these individuals previously received cytotoxic therapy. Myeloma patients receiving cytotoxic therapy (n=13) had significantly more variants identified than myeloma patients not receiving cytotoxic therapy (n=37) and were not statistically different from lymphoma patients receiving cytotoxic therapy (n=68). In contrast, myeloma patients not receiving cytotoxic therapy were not statistically different from healthy donors. N.S. Not significant. N.A. Not applicable. ** P<0.01. Significance was determined with a negative-binomial regression analysis. Data is represented as the mean \pm the standard error of the mean.



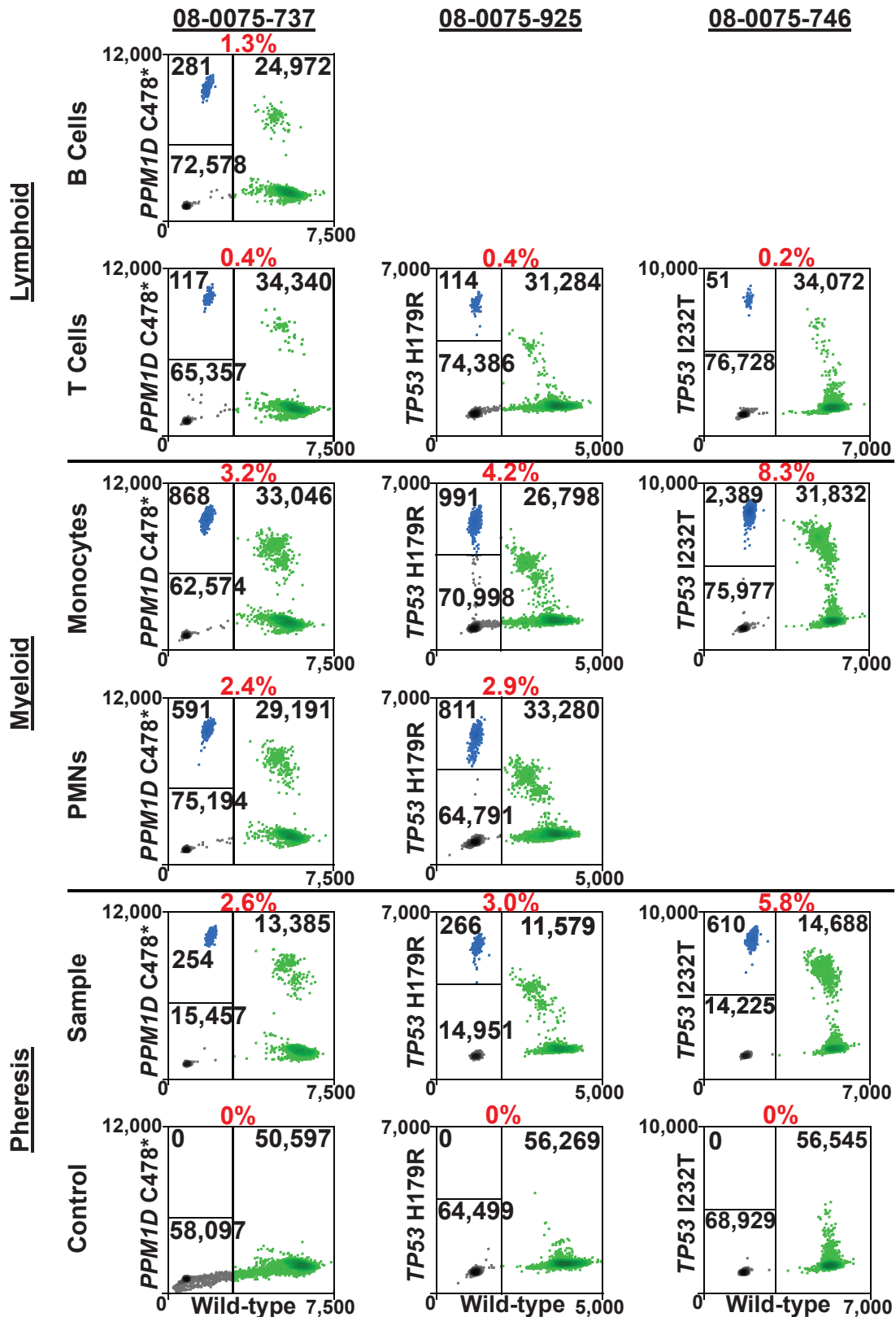
Supplementary Figure 3. Lollipop plot of *PPM1D* mutations. 33 *PPM1D* SNVs and indels were identified by HaloPlex sequencing in 138 pheresis specimens. Blue circle: nonsense mutation. Purple circle: frameshift mutation.

[illegible][illegible]

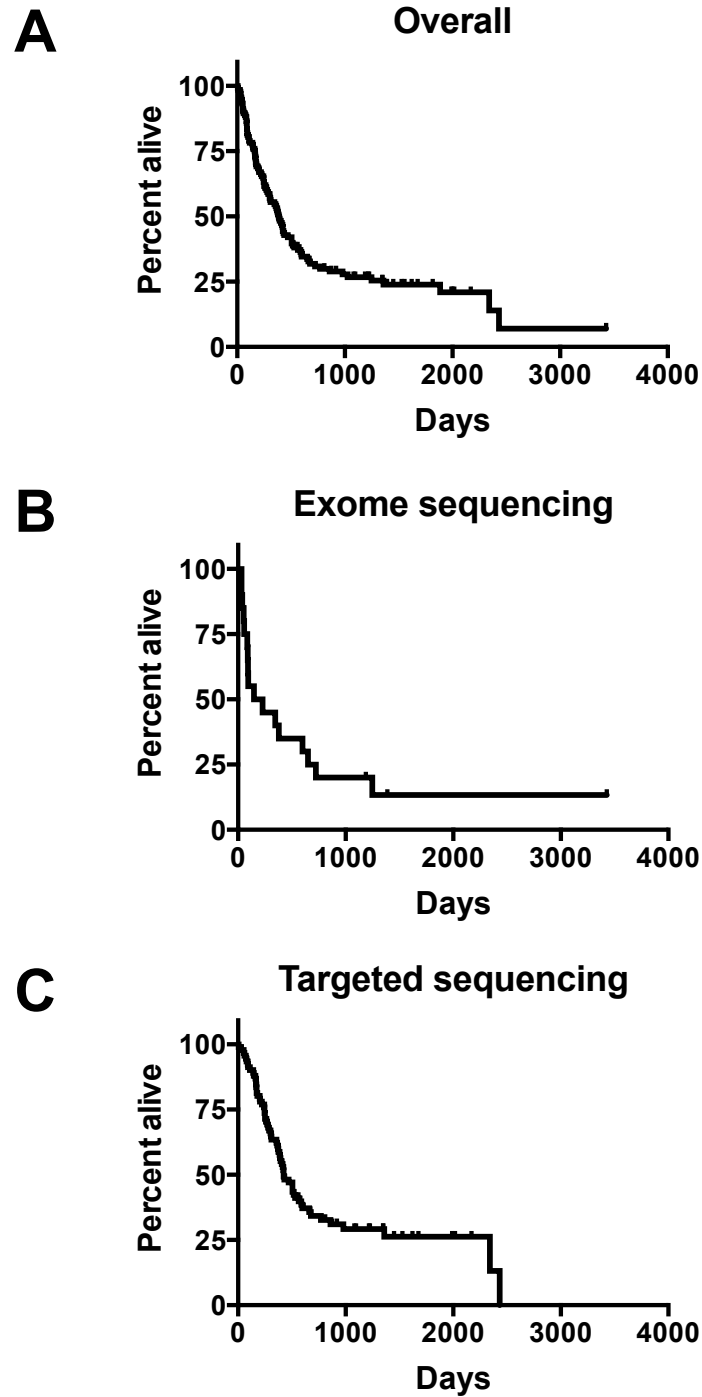
Highlighted are the gene-specific variants detected in pheresis samples with the total number of variants noted. Multiple variants are often present in individual patients after cytotoxic therapy, including multiple variants in the same gene (e.g. in *PPM1D*, *TP53*, etc.). Green: lymphoma patients. Blue: myeloma patients. Gray: healthy donors. Patients with expanded clones carrying mutations in DNA damage response genes (i.e. *PPM1D*, *TP53*, *ATM*, *SRCA*, and *BRCC3*) are on the left.



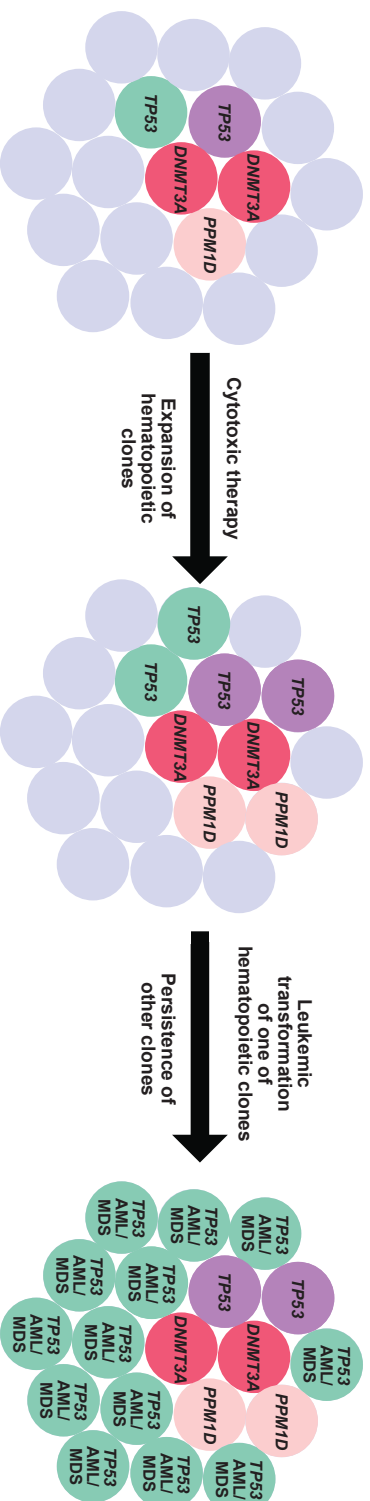
Supplementary Figure 5. Representative sorting strategy to isolate monocytes, neutrophils, B cells, and T cells. Monocytes were defined as CD15⁻CD16⁻CD14⁺ cells. Neutrophils (PMNs) were defined as CD15⁺CD16⁺ cells. T cells were defined as CD15⁻CD16⁻CD3⁺ cells. B cells were defined as CD15⁻CD16⁻CD19⁺ cells. Due to most patients receiving rituximab, B cells were only able to be isolated from one patient.



Supplementary Figure 6. Representative droplet digital PCR to determine the VAFs of variants of interest in sorted cell populations. Droplets containing only the mutant allele are highlighted in blue; droplets containing the wild-type allele (with or without the mutant allele) are highlighted in green; empty droplets are gray. The number of droplets in each gate is indicated. VAFs were determined using Poisson statistics and highlighted in red. PMNs: neutrophils.



Supplementary Figure 7. Overall survival for 134 t-AML/t-MDS patients. 20 patients had exome sequencing with one published previously. 92 patients had targeted sequencing with 19 previously reported on using a different gene targeting panel. 22 patients had previously published whole genome sequencing. **a**, Overall t-AML/t-MDS cohort (n=134). **b**, Exome sequencing cohort (n=20). **c**, Targeted sequencing cohort (n=92).



Supplementary Figure 8. Model of how cytotoxic therapy shapes hematopoietic clonal evolution. Cytotoxic therapy provides a fitness advantage to multiple hematopoietic clones harboring specific mutations (e.g. in *TP53*, *PPM1D*, etc.), allowing them to expand. These clones have differing leukemogenic potential with certain clones (particularly those with mutations in *TP53*) more likely to progress to AML/MDS than others. However, non-leukemic expanded clones are often long-lived and may co-exist with the malignant clone at diagnosis.

Supplementary Table 1 Detailed clinical data for myeloma patients assessed with error-corrected sequencing

Patient (UPN)	Gender	Age	Myeloma treatment prior to pheresis collection	Radiation? (Yes/No)	Cytotoxic therapy? (Yes/No)	Time from initial treatment to transplant (months)	Conditioning regimen
14	M	33	Thalidomide/dexamethasone x 6	Yes	Yes	6	Melphalan
18	F	47	Thalidomide/dexamethasone	No	No	27	Melphalan
27	F	39	Thalidomide/dexamethasone	No	No	5	Melphalan
76	M	43	Thalidomide/dexamethasone x 7 months; lenalidamide/dexamethasone x 2	No	No	16	Melphalan
103	M	45	Thalidomide/dexamethasone; lenalidamide/dexamethasone	No	No	14	Melphalan
120	F	45	Thalidomide/dexamethasone	No	No	5	Melphalan
339	M	26	VRD x 4	Yes	Yes	27	Melphalan
350	F	72	VRD x 3	No	No	4	Melphalan
405	F	66	VD x 3	No	No	4	Melphalan
415	M	72	VRD x 3	No	No	4	Melphalan
443	M	60	Doxil/dexamethasone/bortezomib x 3	No	Yes	5	Melphalan
457	M	68	RD; VRD	Yes	Yes	N.A.	N.A.
511	M	59	Thalidomide/dexamethasone	No	No	26	Melphalan
512	F	65	KRd x 5	No	No	unknown	Melphalan
546	F	64	VD x 4	No	No	5	Melphalan
559	F	57	VRD x 4	No	No	6	Melphalan
565	F	62	VD x 1; VRD x 3	Yes	Yes	3	Melphalan
570	F	59	VD x 8	Yes	Yes	19	Melphalan
573	M	67	VRD x 3	No	No	4	Melphalan
599	M	76	VD x 7; RD x 4; VD x 4; DVD x 2	Yes	Yes	21	Melphalan
601	F	72	RD x 7	Yes	Yes	unknown	Melphalan
602	F	57	VRD x 4	No	No	4	Melphalan
609	M	39	VRD x 4	No	No	5	Melphalan
656	M	51	VRD x 4	No	No	5	Melphalan
665	F	47	VD x 4; lenalidamide x 3	No	No	4	Melphalan
684	F	71	RD; VRD x 3; cyclophosphamide mobilization	No	No	12	Melphalan
700	M	64	VD x 1; VRD < 1; VD x 3	No	No	6	Melphalan
730	M	55	VD x 4	No	No	3	Melphalan
731	M	69	VRD x 3	No	No	4	Melphalan
739	M	66	VRD x 3	Yes	Yes	5	Melphalan
757	M	67	VD x 5	No	No	unknown	Melphalan
760	F	60	VRD x 4	No	No	5	Melphalan
782	M	66	VRD x 3	No	No	4	Melphalan
793	M	61	VRD x 3	No	No	3	Melphalan
794	M	71	VRD x 3	No	No	4	Melphalan
797	F	62	VD x 1; VRD x 4	No	No	5	Melphalan
798	M	68	VRD x 4	No	No	7	Melphalan
827	M	60	VD x 4	No	No	5	Melphalan
855	M	51	VRD x 4	No	No	4	Melphalan
879	M	64	KRd x 4	No	No	4	Melphalan
907	M	41	KRd x 4	Yes	Yes	6	Melphalan
908	M	72	VRD x 4	No	No	5	Melphalan
911	F	67	VRD x 4	No	No	4	Melphalan
931	M	54	KRd x 3	No	No	4	Melphalan
954	F	66	VD x 1; VRD x 3	Yes	Yes	5	Melphalan
968	M	55	VRD x 4	Yes	Yes	4	Melphalan
975	F	74	VRD x 3; RD x 1	No	No	8	Melphalan
987	M	72	VD x 2; VRD x 5	Yes	Yes	6	Melphalan
1002	M	67	VRD x 4	No	No	4	Melphalan
1030	F	64	VD x 6	No	No	9	Melphalan

N.A.: not applicable; UPN: unidentified patient number

Treatment regimens are as follows:

DVD: doxil, vincristine, dexamethasone

KRd: carfilzomib, lenalidamide, dexamethasone

RD: lenalidamide, dexamethasone

VD: bortezomib, dexamethasone

VRD: bortezomib, lenalidamide, dexamethasone

Supplementary Table 2 Genes targeted by error-corrected sequencing

<i>ASXL1</i>	<i>EZH2</i>	<i>NRAS</i>	<i>SRCAP</i>
<i>ATM</i>	<i>FLT3</i>	<i>PHF6</i>	<i>SRSF2</i>
<i>ATRX</i>	<i>GNAS</i>	<i>PPM1D</i>	<i>STAG2</i>
<i>BCOR</i>	<i>GNB1</i>	<i>PTPN11</i>	<i>STAT3</i>
<i>BCORL1</i>	<i>IDH1</i>	<i>RAD21</i>	<i>TET2</i>
<i>BRCC3</i>	<i>IDH2</i>	<i>RUNX1</i>	<i>TP53</i>
<i>CBL</i>	<i>JAK2</i>	<i>SETBP1</i>	<i>U2AF1</i>
<i>CEBPA</i>	<i>KDM6A</i>	<i>SETD2</i>	<i>ZBTB33</i>
<i>CREBBP</i>	<i>KRAS</i>	<i>SF1</i>	<i>ZNF318</i>
<i>CSF3R</i>	<i>LUC7L2</i>	<i>SF3B1</i>	<i>ZRSR2</i>
<i>CUX1</i>	<i>MYD88</i>	<i>SMC1A</i>	
<i>DNMT3A</i>	<i>NPM1</i>	<i>SMC3</i>	

Supplementary Table 3 Association between patient clinical features and hematopoietic clonal expansion

	Age		Radiation therapy		Radiation therapy (age-adjusted)		Chemotherapy		Chemotherapy (age-adjusted)		Cytoreductive therapy		Cytoreductive therapy (age-adjusted)	
	IRR	P Value	IRR	P Value	IRR	P Value	IRR	P Value	IRR	P Value	IRR	P Value	IRR	P Value
Number of mutations	1.05	< 0.001	1.10	0.70	1.18	0.45	1.51	0.03	1.85	< 0.001	1.84	0.001	2.28	< 0.001
Presence of:	OR	P Value	OR	P Value	OR	P Value	OR	P Value	OR	P Value	OR	P Value	OR	P Value
Any Mutation	1.10	< 0.001	2.19	0.25	3.98	0.07	2.23	0.06	4.87	0.003	2.98	0.009	9.21	< 0.001
<i>DNMT3A</i>	1.04	0.003	1.95	0.19	2.20	0.13	1.13	0.85	1.32	0.54	1.89	0.10	2.34	0.03
<i>PPM1D</i>	1.03	0.26	0.91	1.00	0.95	1.00	19.54	<0.001	22.80	< 0.001	13.61	0.002	15.45	< 0.001
<i>TP53</i>	1.09	< 0.001	1.93	0.35	2.17	0.29	2.80	0.07	4.13	0.01	3.49	0.04	4.94	0.009
<i>SRCAP</i>	1.02	0.32	0.26	0.30	0.27	0.32	3.28	0.07	3.63	0.05	3.41	0.09	3.76	0.06
<i>TET2</i>	1.08	< 0.001	0.29	0.14	0.28	0.15	1.27	0.73	1.65	0.37	1.03	1.00	1.28	0.76
<i>ZNF318</i>	1.09	0.004	1.09	1.00	1.14	1.00	1.52	0.63	2.04	0.33	3.11	0.13	4.21	0.05
<i>ATM</i>	1.02	0.69	0.86	1.00	0.89	1.00	8.47	0.03	9.05	0.03	6.07	0.08	6.50	0.06

IRR: Incident rate ratio; OR: exact odds ratio

Supplementary Table 4 Gene panel for targeted t-AML/t-MDS sequencing

ABCG2	CMYA5	FAM40B	IKZF4	MLL3	PPM1D	ST13P13
ABTB1	CNTN5	FAM47A	ILDR1	MROH5	PPP1R3A	STAG2
ADAM11	CNTNAP4	FAM57B	ITPR3	MTA2	PRAMEF2	STAT3
ADCY5	COL12A1	FAM5C	JAK1	MTMR8	PRPF4B	STC2
AKAP13	COL5A3	FAM65A	JAK2	MTUS2	PRPF8	STRN
ALPK3	CREBBP	FAM70B	JAK3	MUC16	PSME4	SUZ12
ANK2	CRISPLD1	FCGBP	KCNA4	MUC5B	PTCH1	SYNGAP1
APOB	CROCC	FKBP8	KCNH2	MYC	PTPN11	SYT15
ARAP2	CSMD1	FLG	KCNK13	MYH4	PTPRN	TCEAL3
ASXL1	CSMD3	FLRT2	KCNQ2	MYO5B	PTPRT	TCEAL6
ATG16L1	CUEDC1	FLT1	KCNT1	MYOC	RAD21	TET1
ATM	CUL1	FLT3	KCNU1	MYOM3	RBBP4	TET2
ATP10B	DCHS2	FOXP1	KDM3B	NALCN	RFC3	THRAP3
ATP2B3	DCLK1	FREM2	KDM6A	NAV1	RIMS1	TMEM104
BCOR	DDR2	FRYL	KDR	NF1	RNF213	TNC
BCORL1	DDX11	GALNTL4	KIAA0240	NLRC4	RUNX1	TOP3B
BMPER	DDX41	GAS6	KIAA1267	NMUR2	RUNX1T1	TP53
BOD1L	DIS3	GATA2	KIAA1529	NPM1	RYR1	TRA2B
BRCC3	DLC1	GBP4	KIAA1683	NR2E1	RYR3	TRPM3
BSN	DNAH5	GIGYF2	KIF2B	NRAS	SBF1P1	TTBK1
C10orf118	DNAH9	GJB3	KIT	NRXN3	SCAF8	TUBA3C
C10orf28	DNAI1	GNAS	KRAS	NTRK3	SCARB1	TYK2
C17orf97	DNMT3A	GNB1	KRT19	OR11H12	SCML2	U2AF1
C5	DNMT3B	GPR112	KRT79	OR13H1	SCN1A	UNC5B
CACNA1B	DOCK2	GPR183	KSR2	OR8B12	SEMA3A	USP9X
CACNA1E	DRD2	GRID1	LNX1	P2RY2	SEMA4A	VAR52
CACNA1G	DSCAM	GRIK2	LOC100129218	PCDHA13	SETBP1	VCAN
CACNA2D3	DST	GRIK4	LOC100132800	PCDHA6	SF3B1	WAC
CADM2	DYNC2H1	GRM3	LOC730032	PCDHB1	SHC1	WT1
CADPS	DYSF	GRM8	LRBA	PCDHB18	SHROOM2	XIRP1
CALR	E2F8	GSTK1	LRIT1	PDCD2L	SI	ZBTB33
CBFB	EDIL3	HECW1	LRP1B	PHACTR1	SLC12A3	ZC3H18
CBL	EED	HIVEP1	LRRC4	PHF6	SLC39A5	ZNF318
CCDC67	EEF1A1P29	HMCN1	MAGI2	PHIP	SMC1A	ZNF687
CD74	EGFR	HNRNPK	MAP1B	PKD1L2	SMC3	
CEBPA	EPHA10	HSP90B3P	MAP2	PKD2L1	SMG1	
CECR2	EPPK1	HYDIN	MED12	PKHD1	SPEG	
CELSR3	ETV6	IDH1	MEFV	PKHD1L1	SPEN	
CHD4	EZH2	IDH2	MEGF8	PLCE1	SRCAP	
CLEC18B	FAM154B	IGHG3	MIR142	PLEKHH1	SRSF2	

HaloPlex genes highlighted. HaloPlex genes not included in the t-AML/t-MDS targeted list: ATRX, CSF3R, CUX1, LUC7L2, MYD88, SETD2, SF1, and ZRSR2.