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# Workflow for bulk RNAseq of human fallopian tube and uterine endomyometrium

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## OPEN ACCESS

#### יוטם

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### **ABSTRACT**

Described here is the workflow used by the Female Reproductive Tissue Mapping Center at UCSD to generate bulk RNAseq data from human fallopian tube and uterine endomyometrium.

## **Tissue preparation**

1 As soon as possible after sterilization (salpingectomy or tubal ligation), prepare fallopian tube tissue according to the following protocol:

Human Pregnant Fallopian Tube Tissue Collection and Preservation Methods - UCSD Female Reproductive TMC

At the time of C-section, prepare uterine endomyometrium tissue according to the following protocol:

<u>Human Pregnant Uterine Myometrium Tissue Collection and Preservation Methods - UCSD</u> Female Reproductive TMC

For this protocol, use tissue that has been collected in RNAlater.

## **Total RNA isolation**

2 Isolate total RNA using a bead beater to disrupt the tissue, followed by organic extraction and ethanol precipitation. Use the following protocol, which was originally written for placenta:

Total RNA extraction from frozen placenta tissue

After passing quality control, proceed to library construction.

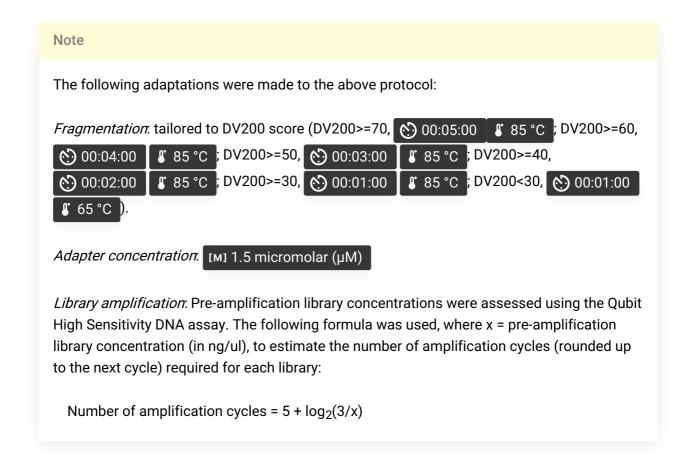
#### Note

In our hands, RIN scores for fallopian tube and uterine endomyometrium were quite low. Bioanalyzer DV200 scores (the percentage of fragments >200 nucleotides) were instead used to assess RNA quality, and libraries were constructed according to a ribodepletion method which is more appropriate for low-quality RNA.

## **Library construction**

3 Construct libraries using the KAPA RNA HyperPrep Kit with RiboErase (HMR), according to the following protocol, which was originally written for placenta:

Library construction for human placenta bulk RNAseq



After passing quality control, proceed to sequencing.

## Sequencing

4 For HuBMAP bulk RNAseq samples, the multiplexed pool was sequenced on a NovaSeq 6000 S4 lane using a 100bp paired-end run configuration. Reads were aligned using STAR, and transcript abundances were quantified using RSEM.