

1 Description of Additional Supplementary File

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3 **File Name:** Supplementary Data 1

4 **Description:**

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6 Table 1 Demographic and clinical comorbidities of patients hospitalized with COVID-19
7 in the discovery cohort separated by the development of AKI (stage 2 or 3) during their hospital
8 course.

9 Table 2 Validation of AKI-associated proteins. Strength of association of proteins
10 significantly associated with AKI (stage 2 or 3) in both the discovery (adjusted $P < 0.05$) and
11 validation cohort ($P < 0.05$) are provided. Significance was determined by fitting a linear model
12 adjusted for age, sex, history of CKD, and maximum oxygen requirement at the time of blood
13 draw.

14 Table 3 Association of AKI-associated proteins with post-discharge eGFR. A mixed
15 effects linear model adjusted for age, sex, history of CKD, baseline creatinine, AKI stage
16 during the COVID admission and number repeated eGFR measurements was fit. Proteins
17 significantly associated with eGFR (adjusted $P < 0.05$) are provided.

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19 **File Name:** Supplementary Data 2

20 **Description:** Proteins that were significantly associated with AKI stage 2 or 3 (adjusted $P < 0.05$)
21 in the discovery cohort are provided. Statistical significance was estimated by fitting
22 a linear model adjusted for age, sex, history of CKD, and maximum oxygen requirement
at the time of blood draw using the Limma R package⁵³. Protein expression data was
log₂ transformed. P values were adjusted for multiple comparisons using the Bonferroni correction.

23 **File Name:** Supplementary Data 3

24 **Description:** Full data table detailing longitudinal eGFR values for discharged COVID patients.
25 Subject_ID is the individual patient ID.
Value is the raw value of serum creatinine collected at that instant.
eGFR is the estimated glomerular filtration rate (eGFR) calculated from the serum creatinine value
for each timepoint listed in the resultinstant column.