### SUPPLEMENTARY APPLEDIX FOR THE STUDY:

Spatiotemporal ATP dynamics during acute kidney injury predicts renal prognosis

#### **Supplementary material table of contents**

Supplemental Figure 1. Areas analyzed in monitoring ratios (A), and immunostaining of AQP2 and GFP in the collecting duct of GO-ATeam2 mice (B).

Supplemental Figure 2. Analysis of FRET ratios at different temperatures *in vitro* (A) and *in vivo* (B).

Supplemental Figure 3. Kidney function and histological alterations of wild-type and GO-ATeam2 mice after IR injury.

Supplemental Figure 4. Vacuolization in S2 PTs after reperfusion.

Supplemental Figure 5. Histological analysis of the kidneys one hour and one day after the induction of reperfusion.

Supplemental Figure 6. ATP dynamics after warm 30 minute-IR treated with NO-donor, AICAR, or NMN

Supplemental Video 1. Time series of ratio images in PTs after induction of warm ischemia.

Supplemental Video 2. Time series of ratio images in DTs and CDs after induction of warm ischemia.

Supplemental Video 3. Time series of ratio images during reperfusion after warm 15-minute ischemia.

Supplemental Video 4. Time series of ratio images during reperfusion after warm 30-minute ischemia.

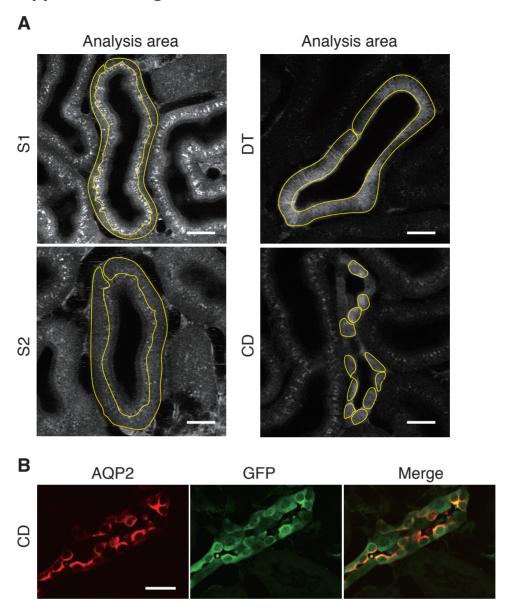
Supplemental Video 5. Time series of ratio images during reperfusion after warm 60-minute ischemia.

Supplemental Video 6. A 5-minute time series of peritubular capillary flow just after the induction of reperfusion following warm 15-minute ischemia.

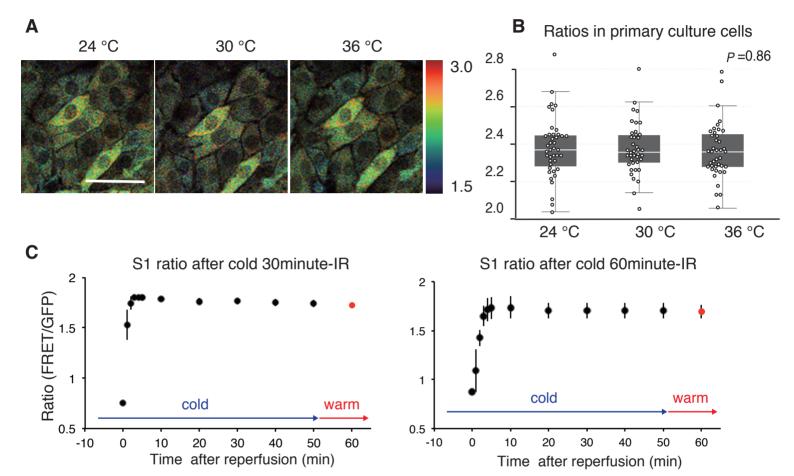
Supplemental Video 7. A 5-minute time series of peritubular capillary flow just after the induction of reperfusion following warm 30-minute ischemia.

Supplemental Video 8. A 5-minute time series of peritubular capillary flow just after the induction of reperfusion following warm 60-minute ischemia.

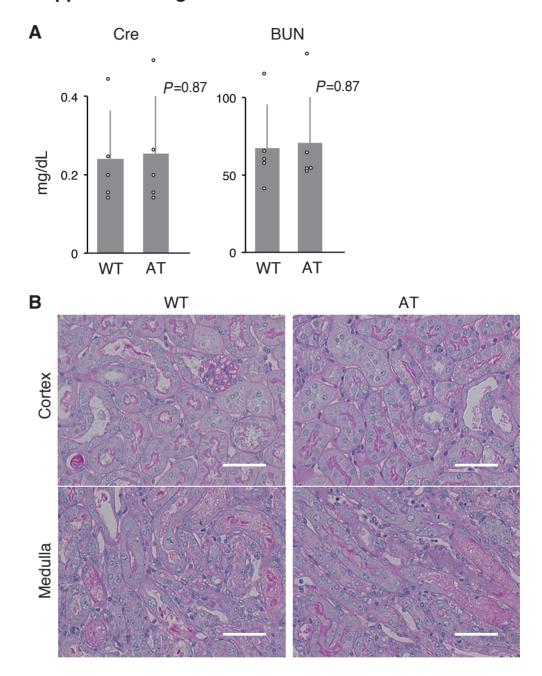
Supplemental Video 9. A 110-second series of peritubular capillary flow 5 minutes after the induction of reperfusion after warm 60-minute ischemia.



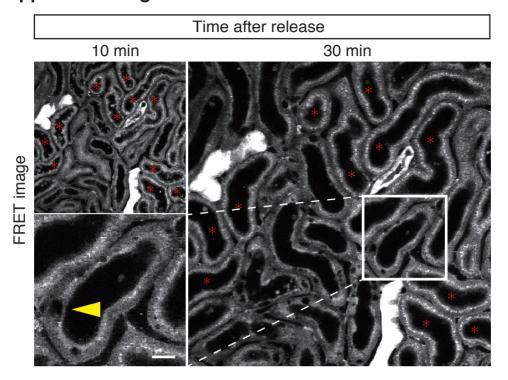
**Supplemental Figure 1.** (**A**) The areas surrounded by yellow line were analyzed in monitoring ratios in each segment. The apical lumen especially in S1 PTs was omitted to exclude high autofluorescence signals. (**B**) Immunostaining of AQP2 and GFP in the kidneys of GO-ATeam2 mice demonstrating that the cells with strong expression of GO-Ateam in CDs are mainly principal cells. Scale bars: (**A** and **B**) 20  $\mu$ m.



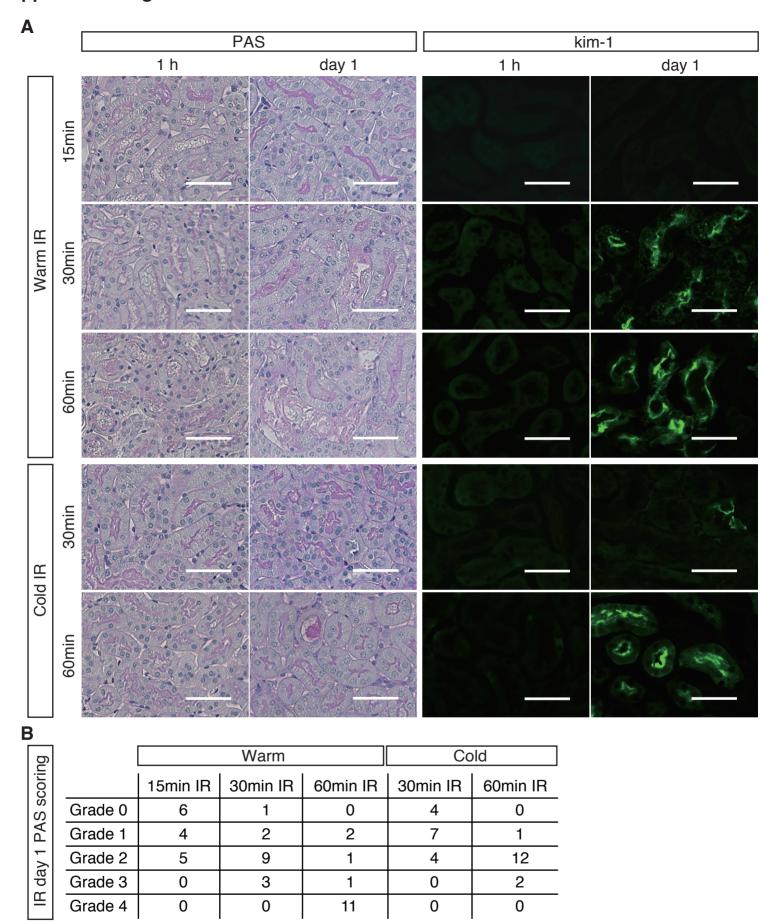
**Supplemental Figure 2.** (**A**) Ratio images of renal primary culture cells from the kidneys of GO-ATeam2 mice sequentially cultured under 24, 30, and 36 °C, showing similar ratios between groups. (**B**) Ratios were similar between groups, and there was no statistically significant difference. Statistical significance was assessed by ANOVA. \*P = 0.86 (**C**) Ratio graphs of PT S1 during cold 30 and 60 minute-IR, whose kidneys were warmed 50 minutes after reperfusion, showing that the temperature did not affect the ratio *in vivo* (n = 3 per group). Scale bars: (**A**) 50 µm.



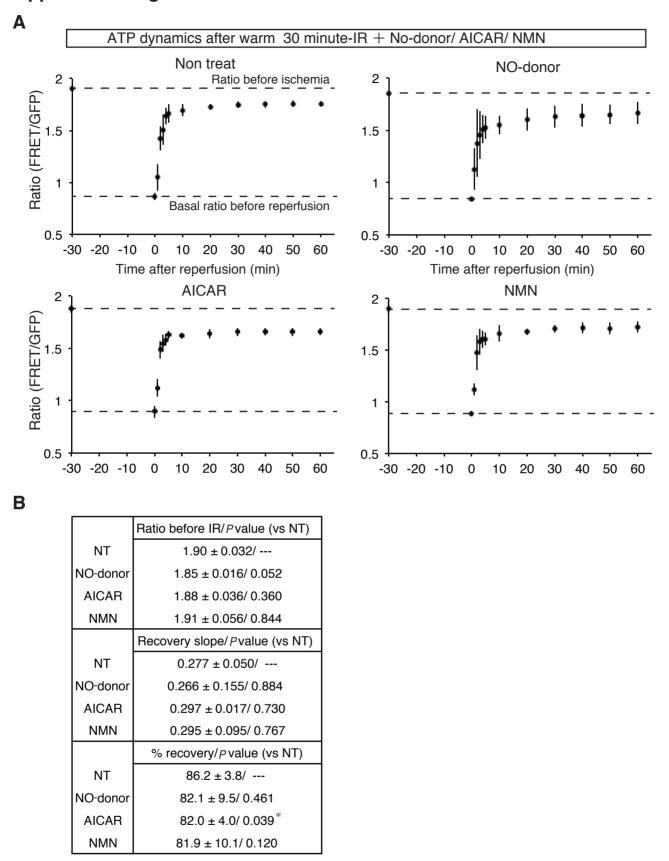
Supplemental Figure 3. (A) Serum creatinine and BUN of wild-type (WT) and GO-ATeam2 mice two days after unilateral warm 23 minute-ischemia reperfusion (IR) with contralateral nephrectomy three days before IR (n = 5 mice per group). There was no statistically significant difference between groups. Statistical significance was assessed by Student's t-test. (B) Representative images of Periodic acid-Schiff (PAS) staining of WT and GO-Ateam2 kidneys harvested at the same time point. The severity of kidney injury was comparable between groups. Scale bars: (B) 50  $\mu$ m.



**Supplemental Figure 4.** Images of FRET signals after warm 30-minute IR showing vacuolization in S2 PTs, but not in S1 PTs with high apical autofluorescence (asterisk). Inset is showing higher magnification of vacuolization (arrowhead). Scale bars:  $20 \mu m$ .



Supplemental Figure 5. (A) Histological analysis of acute kidney injury after IR. Periodic acid-Schiff (PAS) staining and immunostaining of Kim-1 of the kidneys harvested one hour, and one day after the induction of reperfusion after warm 15, 30, and 60 minute-ischemia and cold 30 and 60 minute-ischemia. In the kidney harvested one hour after the induction of reperfusion, neither obvious histological injury nor the expression of Kim-1 was observed even in the kidneys treated with warm 60 minute-ischemia. (B) Pathological scores of acute kidney injury in the kidneys harvested one day after warm 15, 30, and 60 minute-IR and cold 30 and 60 minute-IR. Five high-power fields in the cortex per each mouse were viewed and graded for tubular injury defined as tubular necrosis, tubular dilation, casts, brush border loss (0 = 0-1%, 1 = > 1-10%, 2 = 10-25%, 3 = > 25-50%, and 4 = > 50%) (n = 3 mice per group). All scoring was performed in a blind fashion by experienced nephrologists. Scale bars: (A) 50 µm.



**Supplemental figure 6.** (**A**) Ratio graphs of PTs S1 during reperfusion after warm 30-minute ischemia with NO-donor (n = 3 mice), AICAR (n = 3 mice), and NMN (n = 3 mice). None of compounds could elevate the ratio before IR and the ratio % recovery. (**B**) Table of each ratio before IR, recover slope, % recover, and P value. Differences between the groups (NT vs NO-donor / AICAR / NMN) in the ratio before IR and the % recovery were compared using Student's t-test. Those in the recovery slope were compared using ANCOVA. \*P < 0.05