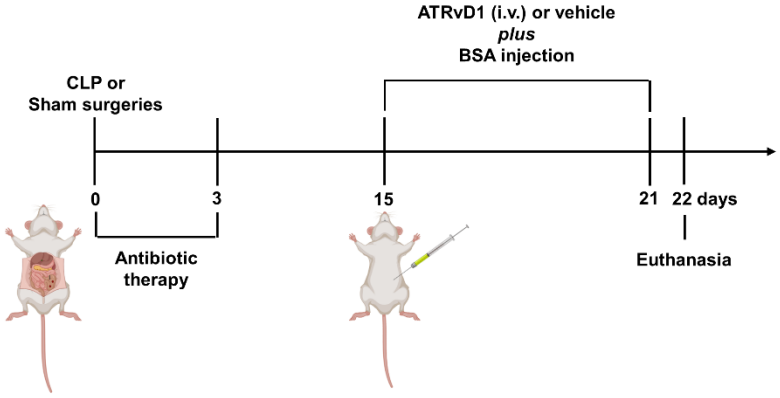

Figure S1. Subclinical Acute Kidney Injury model in sepsis-surviving mice and ATRvD1 Treatment. Polymicrobial sepsis was induced by Cecal Ligation and Puncture (CLP). Following anesthesia, the cecum of septic animals was punctured twice (21G) before returning to the abdominal cavity. Sham-operated mice (Sham) were subjected to an identical laparotomy but without CLP. All mice were i.p. treated with ertapenem antibiotic (75 mg/kg) during 3 consecutive days. At day 15 after surgery, sepsis-surviving and Sham animal were divided into groups and received 10 g/kg BSA (i.p.) for seven consecutive days. Mice received 50 µg/kg ATRvD1 (0.1% ethanol, i.v.) at day 15 post-surgery followed by 5 µg/kg (0.01% ethanol) 20 min prior to BSA challenge for six days. Control groups received 0.1 or 0.01% ethanol (vehicle, i.v.) at the same days and volumes (100 µL) as the ATRvD1-treated groups. At day 22, mice were anesthetized, and blood samples were collected by cardiac puncture. Kidneys were then immediately removed postmortem.

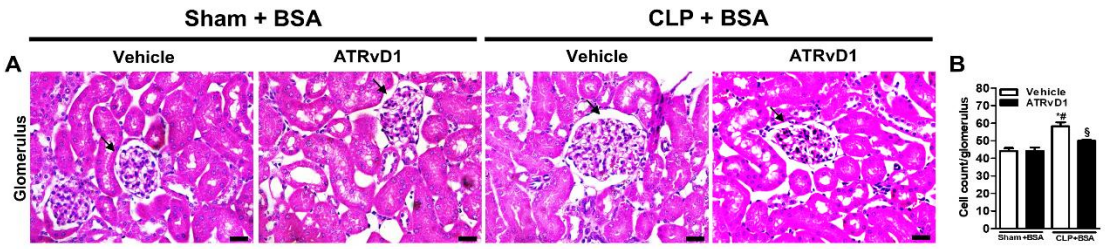

Figure S2. Aspirin-Triggered Resolvin D1 (ATRvD1) Treatment Reduces Glomerular Cell Number in BSA-Induced Kidney Tubulointerstitial Injury in Post-Septic Mice. Sham and cecal ligation and puncture (CLP)-surviving mice at day 15 were subjected to an intraperitoneal injection of 10g/kg bovine serum albumin (BSA) per day and treated with vehicle or ATRvD1 (i.v.) as described in the Material and Methods section. Kidneys were removed from animals on day 22 after surgery. (**A, B**) Glomerular cell number (40x) were estimated in kidney tissue sections after hematoxylin and eosin staining. Graphics represent means ± SE. $^{*}p<0.05$ compared with non-treated Sham+BSA group; $^{\#}p<0.05$ compared with Sham+BSA+ATRvD1; $^{\S}p<0.05$ compared with non-treated CLP+BSA.

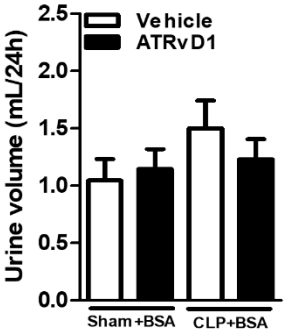

Figure S3. Aspirin-Triggered Resolvin D1 (ATRvD1) Treatment Ameliorates BSA-Induced Kidney Tubulointerstitial Injury in Post-Septic Mice. Sham and cecal ligation and puncture (CLP)-surviving mice at day 15 were subjected to an intraperitoneal injection of 10g/kg bovine serum albumin (BSA) per day and treated with vehicle or ATRvD1 (i.v.) as described in the Material and Methods section. Renal function was evaluated by urine volume in the different experimental groups (n=3-10 for each experimental group).

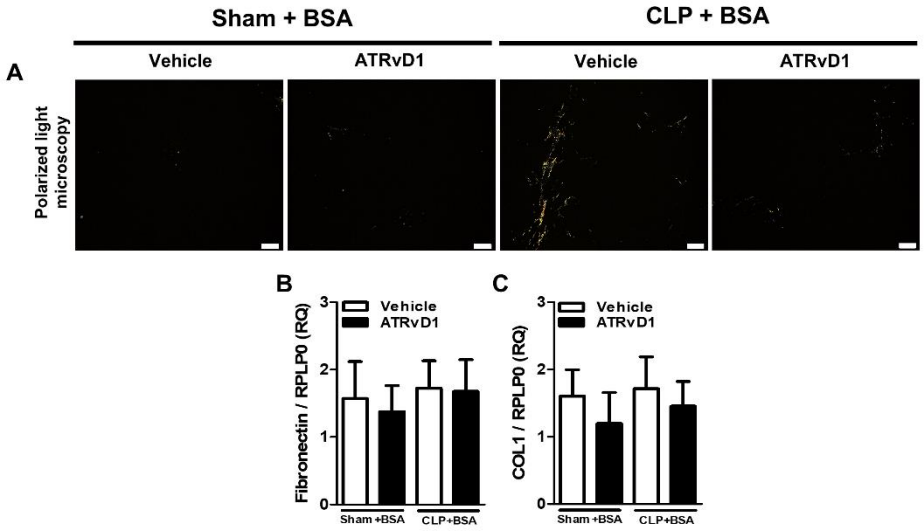

Figure S4. Collagen Deposition and Extracellular Matrix Expression After Aspirin-Triggered Resolvin D1 (ATRvD1) Treatment in BSA-Induced Kidney Tubulointerstitial Injury in Post-Septic Mice. Sham and cecal ligation and puncture (CLP)-surviving mice at day 15 were subjected to an intraperitoneal injection of 10g/kg bovine serum albumin (BSA) per day and treated with vehicle or ATRvD1 (i.v.) as described in the Material and Methods section. Kidneys were removed from animals on day 22 after surgery. (**A**) Polarized light micrographs (10x) of the renal tissue. Images are representative of each group (n=3-5). (**B, C**) Relative mRNA expression of fibronectin and COL1 with RLP0 as endogenous control. (n=3-10 for each experimental group).

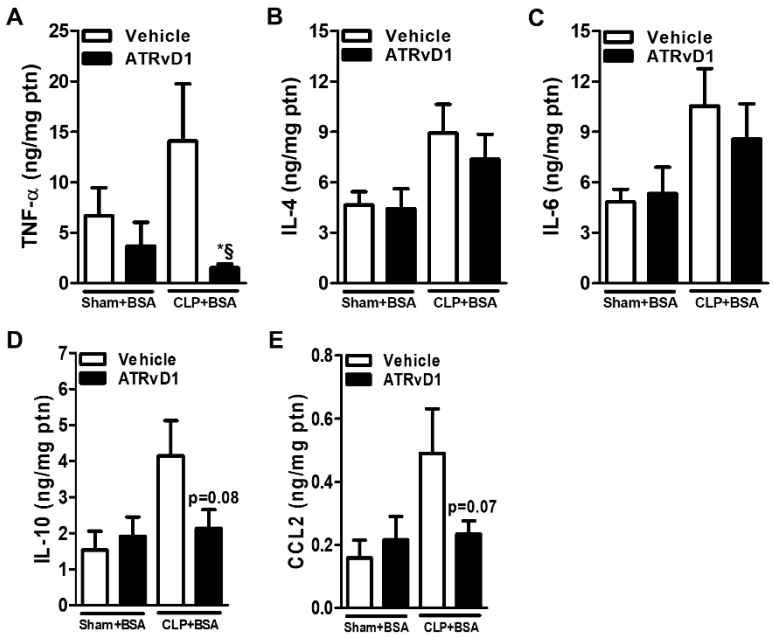

Figure S5. Cytokine Production After Aspirin-Triggered Resolvin D1 (ATRvD1) Treatment in BSA-Induced Tubulointerstitial Injury in Post-Septic Mice. Sham and cecal ligation and puncture (CLP)-surviving mice at day 15 were subjected to interperitoneally injection of 10g/kg bovine serum albumin (BSA) per day and treated with vehicle or ATRvD1 (i.v.) as described in the Material and Methods section. Kidneys were removed from animals on day 22 after surgery, homogenized, and processed as described in Material and Methods. (**A-E**) TNF-α, IL-4, IL-6, IL-10 and CCL2 were determined by ELISA. (n=3-10 for each experimental group). Graphs represent means ± SE. $^{*}p<0.05$ compared with non-treated Sham+BSA group; $^{\S}p<0.05$ compared with non-treated CLP+BSA.