**Supplementary File 1. Diagnostic criteria for severe sepsis and septic shock**

First: The patients should meet the diagnostic criteria sepsis. Sepsis=Infection (documented or suspected)+at least two of the following:

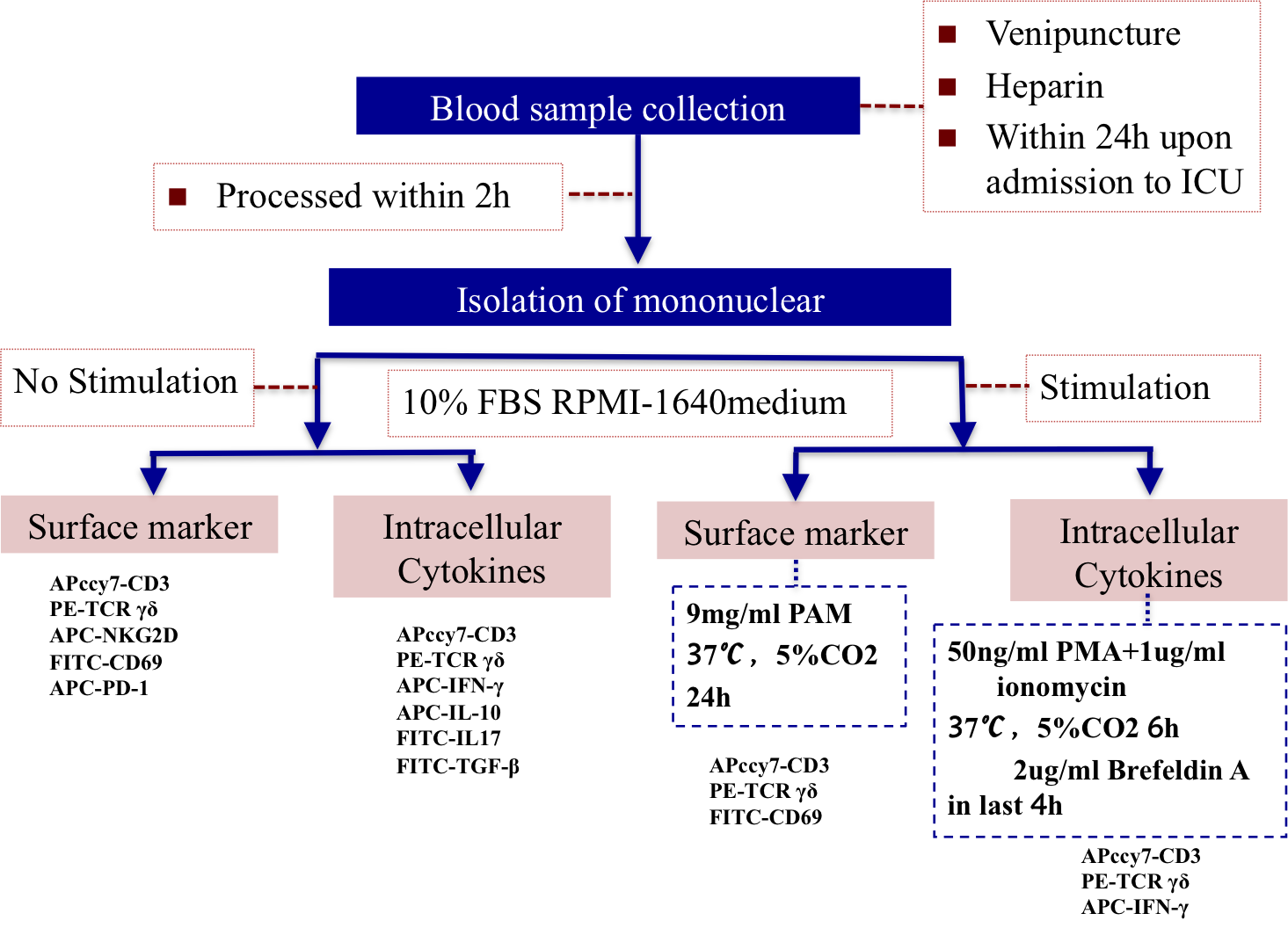
* Fever (> 38.3°C) or hypothermia (core temperature < 36°C)
* Heart rate > 90/min–1
* Tachypnea: RR>20/min or on mechanical ventilation
* Altered mental status
* Significant edema or positive fluid balance (> 20 mL/kg over 24 hr)
* Hyperglycemia (plasma glucose > 7.7 mmol/L) in the absence of diabetes
* Leukocytosis (WBC count > 12,000 μL-1) or Leukopenia (WBC count < 4000 μL-1) or normal WBC count with greater than 10% immature forms

Second: Severe Sepsis=Sepsis induced hypoperfusion or organ dysfunction. Sepsis+any one of the following:

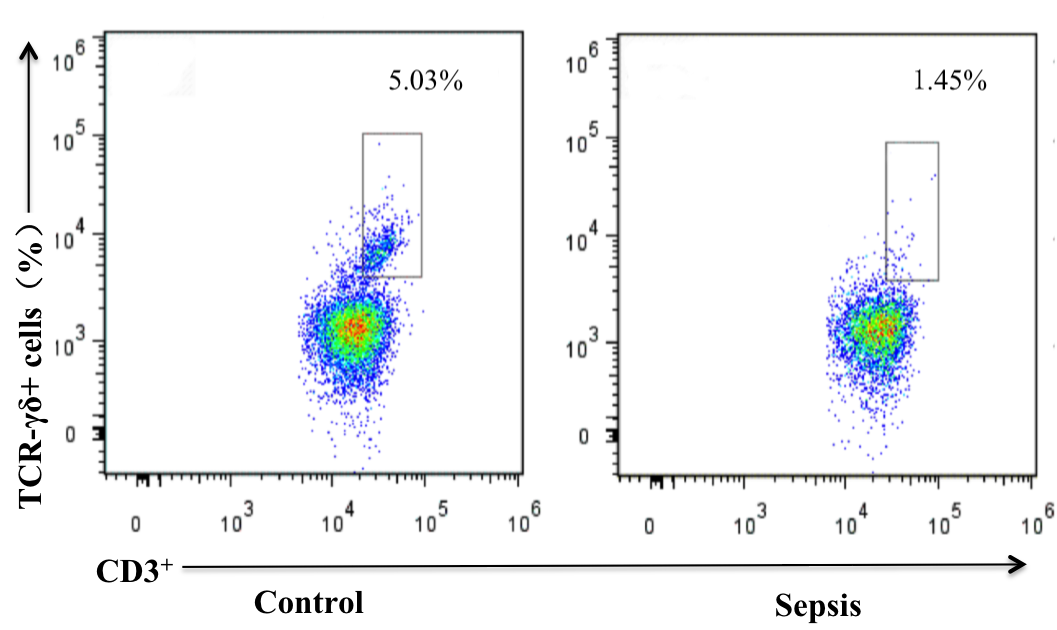
* Sepsis-induced hypotension: MAP<70mmHg
* Lactate≥2 mmol/L
* Urine output < 0.5 mL/kg/hr for more than 2 hrs despite adequate fluid resuscitation
* Acute lung injury with PaO2/FIO2 < 250 in the absence of pneumonia as infection source
* Acute lung injury with PaO2/FIO2 < 200 in the presence of pneumonia as infection source
* Creatinine > 176.8 μmol/L
* Bilirubin > 34.2 μmol/L
* Platelet count < 100,000 μL
* INR > 1.5

Septic shock is defined as sepsis-induced hypotension persisting despite adequate fluid resuscitation.

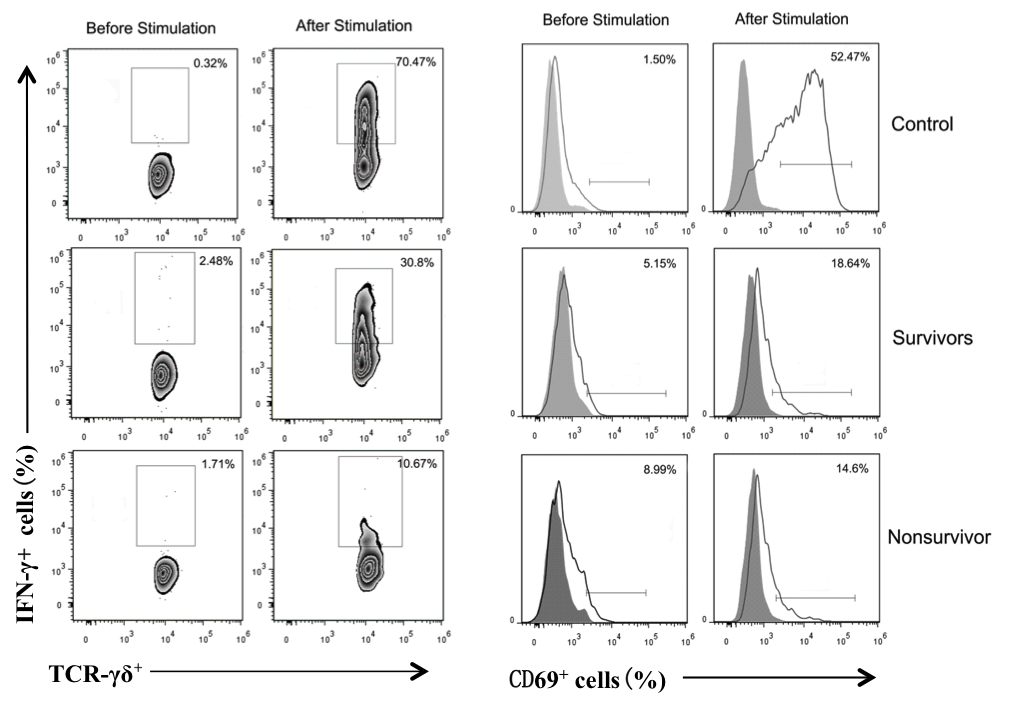
**Supplementary Fig. 1. A flow chart for processing and examining sample**

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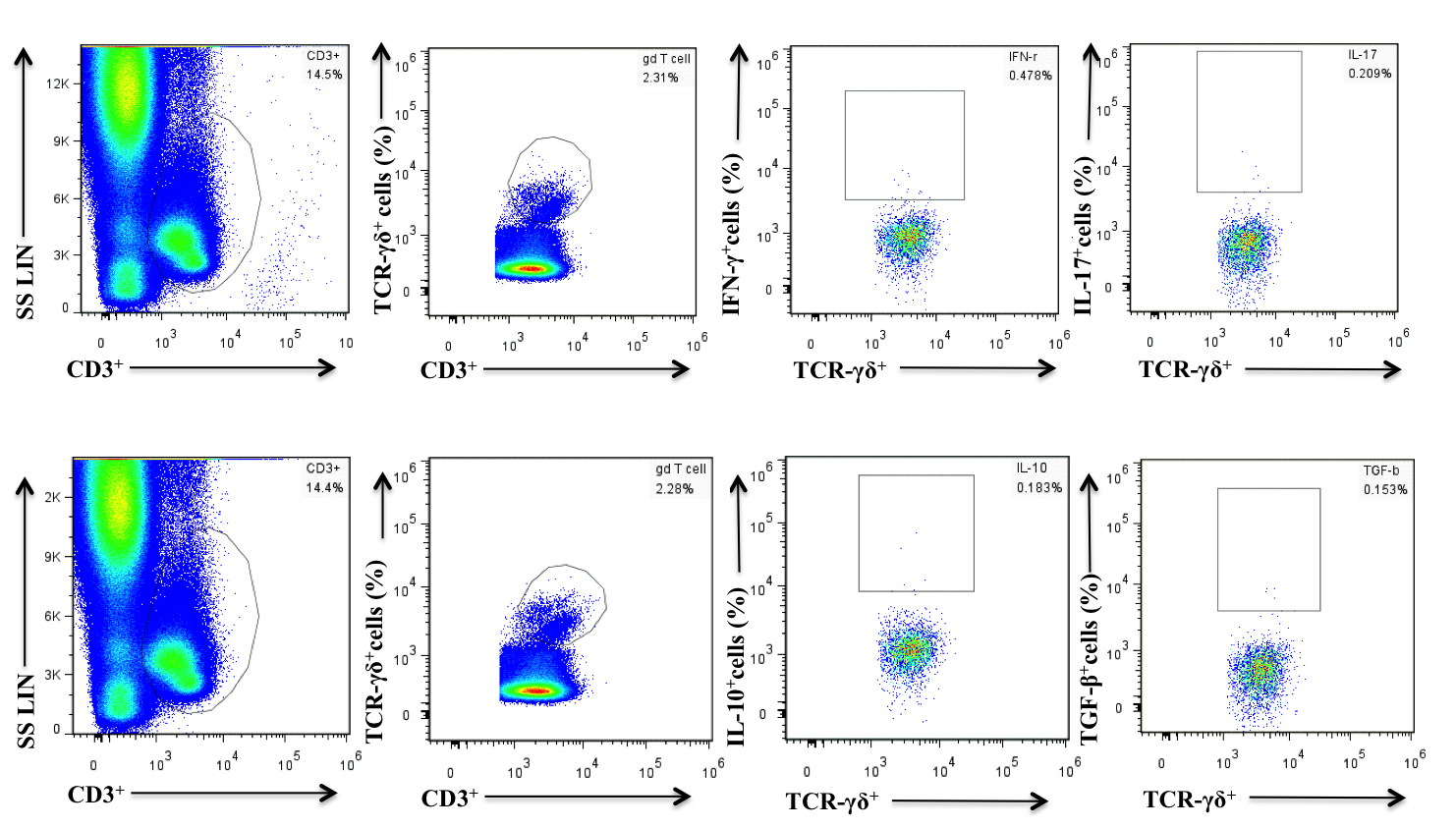
**Supplementary Fig. 2. Flow cytometry plot and gate for** **percentage of γδ T cells**

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**Supplementary Fig. 3.** **Flow cytometry plot of intracellular staining for IFN-γ (left panel) and histogram for surface staining of CD69 (right panel)**

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**Supplementary Fig. 4.** **An example for the gating strategy for intracellular cytokines production by γδ T cells exported from Flowjo software**

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