Supplementary Figures

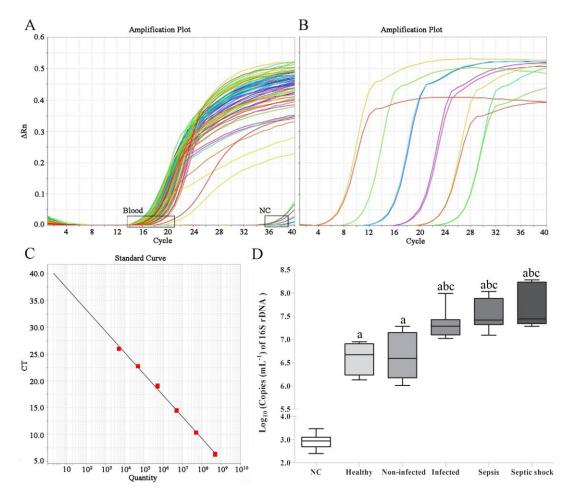


Figure S1. Determination of the bacterial 16S rDNA in blood samples by quantitative polymerase chain reaction (qPCR) assay. **A**, Amplification plots of qPCR obtained from blood samples and negative controls (NC). The assays were performed on the AB7500 real time PCR system (Life Technologies, CA). **B**, Amplification plots generating from a series of 10-fold dilutions from 5×10^3 to 5×10^8 of 16S rRNA gene copies per reaction. **C**, Standard curve generating from the standard dilutions. **D**, Comparison of the bacterial 16S rDNA concentrations in blood samples between patients and healthy controls (HC). The NC indicates the background signal from the reagents and consumables. a: p<0.001, vs. NC; b: p<0.01, vs. Healthy; c: p<0.01, vs. Non-infected.

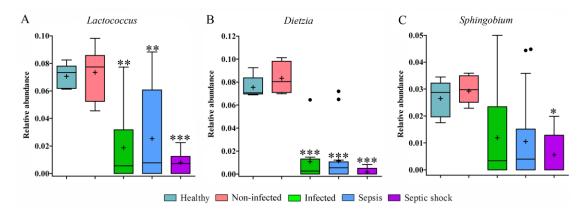


Figure S2. The blood bacterial genera showing significant reduction in their relative abundance in septic patients. * p<0.05, ** p<0.01, *** p<0.001,vs. Healthy.

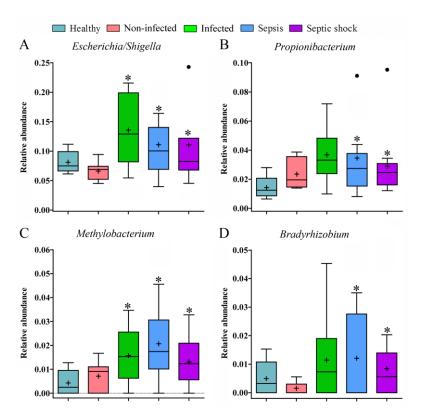


Figure S3. The blood bacterial genera showing significant enriched in septic patients. * p<0.05, vs. Healthy.

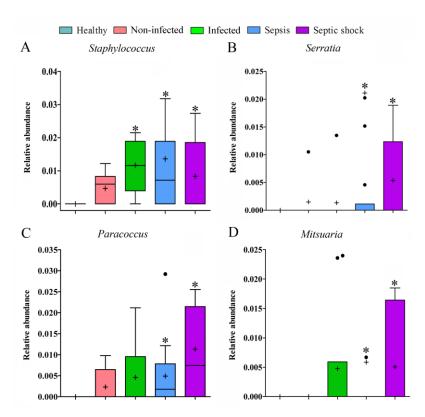


Figure S4. The blood bacterial genera presented in septic patients while absent in healthy individuals. * p < 0.05, vs. Healthy.

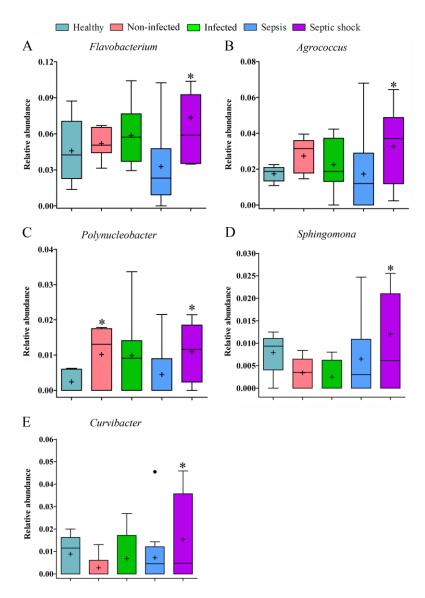


Figure S5. The blood bacterial genera significantly enriched in patients with septic shock. * p<0.05, vs. Healthy.

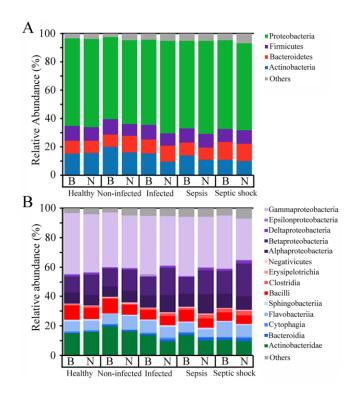


Figure S6. Bacterial composition of the blood and neutrophil-specific microbiotas. **(A)** Comparative analyses at the phylum level. **(B)** Comparative analyses at class level. The letters "B" and "N" represent the blood and neutrophil-specific microbiome, respectively.

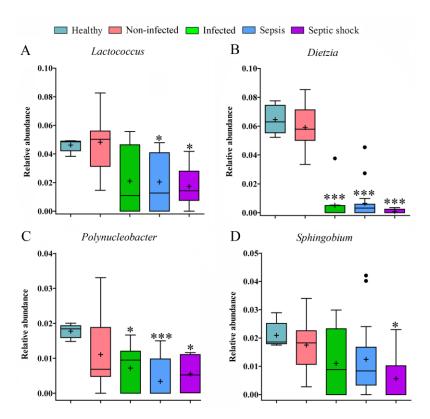


Figure S7. The predominant bacterial genera markedly declined in the neutrophils of septic patients. * p<0.05, *** p<0.001, vs. Healthy.

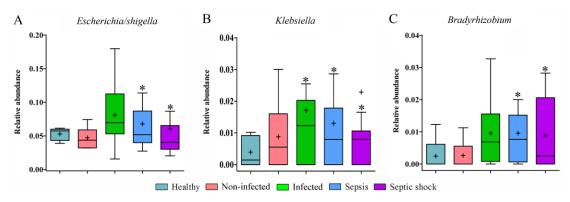


Figure S8. The predominant bacterial genera significantly enriched in the neutrophils of septic patients. p < 0.05, vs. Healthy.

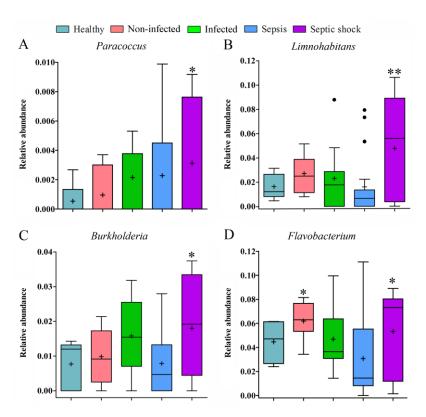


Figure S9. The bacterial genera significantly enriched in the neutrophils of patients with septic shock. p < 0.05, vs. Healthy subjects.

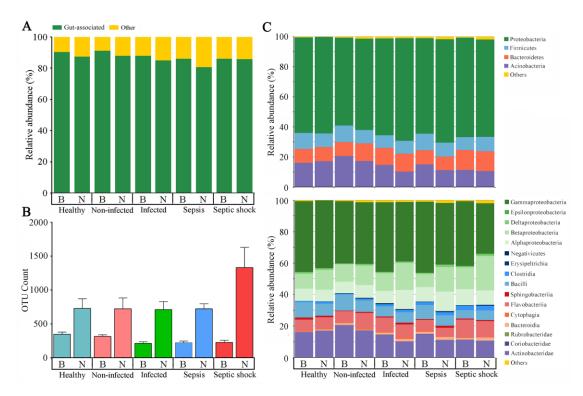


Figure S10. The gut-associated bacterial taxons in the blood and neutrophil-specific microbiomes. (**A**) The relative proportions of the gut-associated bacteria in the blood and neutrophil-specific microbiotas. (**B**) The counts of operational taxonomic units (OTUs) (97% identity) classified into gut-associated bacteria. (**C**) Comparative analyses of the gut-associated bacterial communities at the phylum and class levels. The letters "B" and "N" represent the blood and neutrophil-specific microbiome, respectively.



Figure S11. The potential relationship of the immunological changes with the bacterial genera. (A) Correlations between the immunological parameters of septic patients and the bacterial genera in blood microbiome. (B) Correlations between the immunological parameters of septic patients and the bacterial ingenera neutrophil-specific microbiome.