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I'm hit, what now?

- 1 Determine **penetrating damage** by subtracting the effective DR from the damage received on the corresponding body part, take **Flexible Armor** and **Blunt Trauma** (B379, if no penetration with *cut, imp, any pi* suffer 1 injury/10 dmg, *cr* = 1/5) and **Armor Divisor** (B378) into account.
- 2 Determine **Injury** by applying **Wounding Modifiers** (B379) and effects from **Damage Type** (B399, B414, B433), **Hit Location** (B552), **Body Part Damage Threshold** and **Injury Tolerance** (B380) or look up the **Affliction** and corresponding **Condition** (Special Damage B416).
- 3 Consult the **Body Part Damage Threshold** table to determine the maximum amount of injury the hit bodypart can take before it is crippled. If the body part reaches the **maximum** sufferable **injury** in a **single blow**, it is **crippled**: see 11. Injury over the Crippling Threshold is lost (Exception: Eyes have no injury limit), look up further effects on the **Crippling Injury Effects** table. If damage to above limit is double necessary (Dismemberment, B421) to cripple, the body part is destroyed, counts as a permanent crippling. *Cut* and *exp* severs limb, otherwise it's crushed, burned... according to damage type. Every crippling injury is a **major wound** (B420, 5).
- 4 If you suffered enough injury to reach **-1xHP** you must make a HT roll to prevent **death** (B419), take **Hard to Kill** (B58), **Easy to Kill** (B134), **Fit and Very Fit** (B55) into account. Roll again at -2xHP, -3xHP -4xHP. Failure by 1 or 2 means you suffered a **mortal wound** (B423). If you have suffered **>= -5xHP** you **die immediately**. **>= -10xHP** means you have suffered **total bodily destruction**, eg. *burn* would leave nothing but an unrecognizable lump of charcoal.
- 5 Any **single injury >HP/2** and any **crippling injury** are called **major wounds** and call for a roll to avoid **knockdown and stunning**, see 6 (B420).
- 6 If you suffered a **major wound** or were hit in the **vitals, eyes, skull, face or groin on humanoid males** to cause shock: Roll against HT to avoid **knockdown and stunning**. Modifiers: Hit locations **Face, Vitals, Groin(humanoid males)** get **-5**, **Skull and Eye** **-10**. **+3 for High Pain Threshold**, **-4 for Low Pain Threshold**, **+1 per level of Hard to Subdue**. Take **Injury Tolerance** into account.
If you **fail** you are **stunned**, **fall prone** and **drop anything you were holding**, if you **fail** by **>=5** you fall **unconscious**.
- 7 If you are **stunned** your **Active Defenses** are at **-4** and you **can't retreat**. As long as you are stunned you must choose the **Do Nothing** maneuver then make a HT roll at the **end of your turn to recover** from stun. **Mental Stun** substitutes HT for IQ.
- 8 If you don't have **High Pain Threshold** you suffer **shock** and **reduce** your **DX** and **IQ** (Secondary Attributes do not suffer from this penalty, but Skills do) per HP you lost - to a **maximum of -4** on your next turn only. If humanoid male hit in the groin with *cr*, suffer up to -8 shock.
- 9 If you have **less than 1/3 HP** left, you **halve** your **Move** and **Dodge** (round up)
- 10 If you have **0 HP or less** you **halve** your **Move** and **Dodge** (round up) and you must make a HT roll (-1 per -1xHP, +1 per level of Hard to Subdue) at the **start of any turn** you choose a maneuver other than **Do Nothing** or fall **unconscious**.
- 11 **After combat**, make a HT roll to determine the **duration of Crippling Injuries** (B422). **Success** means **temporary crippling** (Effects last until all HP back), **failure** means **lasting crippling** (Roll 1d or number of months it takes for the injury to heal fully - subtract 1 from roll if treated by physician at TL5, 2 at TL6, 3 at TL7+), **crit. failure** means it's **permanent** - depending on setting, it may be curable. Dismemberment (destroyed body part) always means permanent crippling.

Incapacitating Conditions (B428)

All of these afflictions prevent you from taking voluntary action for the duration. In addition to their other effects, you're effectively **stunned (-4 to Active Defenses)**. In combat, you must **Do Nothing** on your turn. If an affliction lets you drop and if you are standing you can sit, kneel, go prone, etc.; or if kneeling or sitting go prone. If it lets you stagger, you can drop, change facing, or step or crawl one yard. In all cases, you are still effectively stunned.

Agony	You are in terrible pain, do nothing but moan or scream . If standing or sitting, you fall down. While affliction endures, lose 1 FP per minute or fraction thereof. After, anyone who can credibly threaten you with resumption of pain gets +3 to Interrogation and Intimidation. Low Pain Threshold doubles FP loss and torture bonus. High Pain Threshold lets you overcome agony enough to function, but at -3 to DX and IQ. You are unable to breathe or speak. You may do nothing but drop . While choking endures, suffer effects of suffocation (see below, B436). If object lodged in throat, make First Aid roll to clear it, -2 before TL7. Takes 2 seconds. Doesn't Breathe or Injury Tolerance (Homogenous) cannot choke!
Choking	You are conscious – if standing, remain upright – but you can do nothing . If you are struck, slapped or shaken, recover on next turn.
Daze	You're incapacitated with overwhelming pleasure . Like Agony, but neither Low Pain Threshold nor High Pain Threshold has any effect. Instead of a torture-bonus, someone offering to continue the pleasure gets +3 to any Influence roll. Killjoy is immune.
Ecstasy	You can try to act, but must roll vs. Will before each roll. On a success, you merely suffer 2d seconds of disorientation (-2 to rolls). On failure you actually hallucinate for 1d minutes (-5 to rolls). GM may specify details of your hallucinations, which need not be visual. Critical failure means you „freak out“ for 3d minutes - you might do anything! GM rolls 3d: the higher the roll, the more dangerous your action.
Hallucinating	You cannot move any voluntary muscles and fall over if you are not in a balanced position. You remain conscious and can still use advantages or spells that require neither speech nor movement.
Paralysis	You are vomiting or suffering dry heaves. You can try to act at -5 to DX, IQ, & Per and automatically fail at any action that requires a Concentrate maneuver. At the end of the retching spell , you lose 1 FP . Gain no benefit from recent meals or oral medication – you've thrown it up.
Retching	Your limbs tremble uncontrollably, fall down if standing, cannot speak or think clearly. You can do nothing , at the end of the seizure lose 1d FP .
Seizure	Failure by >=5 on knockdown roll, failed HT roll to stay conscious at 0 HP or less and many other things can leave you unconscious. Up to the GM to decide whether truly unconscious or just totally incapacitated by pain and injury. Either way, you can't do anything. You recover as follows: If you have 1 or more HP remaining, you wake automatically in 15 minutes. At 0 HP or worse , but above -1xHP , make a HT roll to awaken every hour. Once you succeed, you can act normally. No need to roll against HT every second to remain conscious unless you receive new injury, but since you are below 1/3 your HP, you are at half Move and Dodge. At -1xHP or below , you get a single HT roll to awaken after 12 hours. Succeed and regain consciousness to act as described above. But if you fail, you won't regain consciousness without medical treatment – use the rules given under Stabilizing a Mortal Wound (B424). Until you receive help, you must roll vs. HT every 12 hours; if you fail, you die.
Unconsciousness	

Mortal Conditions (B429)

Coma	Collapse just as if you were at -1xHP or below and pass out. You get a single HT roll to awaken after 12 hours. On a failure, you won't recover without medical treatment. Until you receive treatment, roll vs. HT every 12 hours. On any failure, you die. Your heart stops functioning (“cardiac arrest”). You immediately drop to -1xFP . Regardless of your current HP, you will die in HT/3 minutes unless resuscitated – see Resuscitation (B425). If you survive, you will be at 0 HP or your current HP, whichever is worse. Missing HP heal normally. If you die and it matters what your HP total was, treat this as death at -1xHP or your current HP, whichever is worse. Injury Tolerance (Diffuse, Homogenous, or No Vitals) grants immunity to this affliction.
Heart Attack	

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Injury & Recovery Cheat Sheet

v1.01



Body Part Damage Threshold (Crippling Injury B420)

Bodypart	Crippling Threshold
Arm, Leg	Over HP/2
Hand, Foot	Over HP/3
Eye	Over HP/10

Crippling Injury Effects (B421)

Hand	You drop anything you were carrying in that hand. If you were using two or more hands to hold an object, roll vs. DX to avoid dropping it. You cannot hold anything (e.g., a weapon) in that hand. You can wear a shield on that arm and use it to block, but you cannot attack with it. You get One Hand (B147). As for a crippled hand but while someone with a crippled hand could at least carry something in the crook of the arm, you cannot use a crippled arm to carry anything! You do not drop a shield on that arm (unless the arm is severed), but you cannot use it to block – and since it's just hanging in front of you, reduce its usual Defense Bonus by one. You get One Arm (B147).
Arm	You fall down! You cannot stand or walk without a crutch or something to lean on. You can still fight if you brace yourself against a wall. If you have nothing to lean on, you may assume a kneeling or sitting posture. You get Lame (Crippled Legs (B141)) .
Foot	You fall down! You can still fight if you assume a sitting or lying posture. You get Lame (Missing Legs (B141)) .
Leg	You are blind in that eye. You get One Eye (B147) – or Blindness (B124) if you lose all your eyes – unless you have some substitute for eyes.
Eye	

Irritating Conditions (B428)

Cough/Sneeze	-3 to DX and -1 to IQ . Cannot use Stealth.
Drowsy	Roll against Will/2h if inactive . Fail and fall asleep until awakened or full nights sleep. Success means -2 to DX, IQ and self-control rolls.
Drunk	-2 to DX, IQ and -4 to self-control rolls except Cowardice. Reduce Shyness by two levels. If you are only Tipsy , half the mentioned penalties.
Euphoria	-3 to DX, IQ, skill and self-control rolls .
Itching	-2 to DX duration of itch. Scratching for one full second relieves the itch, but he can do nothing else while scratching; in combat Do Nothing . -2 to attributes and skills . -1 to Active Defenses . Make HT roll after eating , exposed to foul odor , fail Fright Check , stunned , every hour in free fall , any situation where suffer motion sickness . Rich meal in past hour gives -2 . On a failure , you vomit for (25 - HT) seconds, see Retching .
Nauseated	Penalty to DX, IQ, skill and self-control rolls. Penalty equals -2 for moderate pain, -4 for severe pain, and -6 for terrible pain. High Pain Threshold halves penalties, low Pain Threshold doubles them.
Pain	

Additional Conditions

Bleeding B420	GM decides if wound bleeds: If bleeding wound, make HT roll (-1/5 HP lost) at end of every minute. On failure bleed for 1 HP, on crit. fail you bleed for 3 HP. Success means you don't bleed this minute, 3 consecutive successes stop bleeding as well as a crit. success. You can also stop bleeding if you make a First Aid roll.
Shock B419	Reduce DX and IQ per HP you lost - to a maximum of -4 on your next turn only. If humanoid male hit in the groin, suffer up to -8 if <i>cr</i> dmg. High Pain Threshold is immune.
Stun B420	When stunned, you must Do Nothing on your next turn. Your active defense are at -4 and you cannot retreat . At the end of your turn, make a HT roll to act normally on your next turn. On a failure, you remain stunned; Try again next turn. Mental Stun works the same but substitute HT with IQ, see B393.
Suffocation B436	If you completely lack air you lose 1 FP/second . If drowning after failed Swimming roll, roll vs. Swimming every five seconds; failure costs 1 FP (see Swimming, B354). At 0 FP, make a Will roll every second or fall unconscious. You die unless rescued (B426). Regardless of FP or HP, you die after 4 minutes without air. If you get clean air before you die, you stop losing FP and start to recover FP at the usual rate (B427). If you are unconscious, you wake once you have 1 FP. If you were drowning, a rescuer must also make a First Aid roll to get the water out of your lungs in order to save you – see Resuscitation (B425). If without air >2 minutes, roll vs. HT to avoid permanent brain damage: -1 to IQ .
Mortal Wounds B423	You are instantly incapacitated . You may or may not be conscious (GM's decision). Suffer further injury and make another HT roll to avoid death, any failure kills you. Every half-hour make HT roll to avoid death, any failure means death! Succeed and linger on for another half-hour – then roll again. Critical success means you pull through miraculously, but are still are still incapacitated). If you're alive but mortally wounded, surgery may be able to stabilize your condition – see Stabilizing a Mortal Wound (B424). At TL6+, “trauma maintenance” can keep you alive while waiting for surgery. This involves CPR, oxygen, transfusions, etc. Instead of rolling vs. HT every half-hour, roll against the higher of your HT or your caregiver's Physician skill every hour – or every day, if you are on a heart-lung machine or similar life support. You do not need to roll at all if you're put into magical or ultra-tech suspended animation!
<1/3 HP	Halve your Move and Dodge (round up)
0 HP or less B419	As <1/3 HP plus make a HT roll at -1/full multiple of HP below 0 vs. unconsciousness immediately and at the start of any turn you choose a maneuver other than Do Nothing.
-1xHP or less	Make a HT roll vs. death immediately and for every full multiple of HP below 0. When you reach -5xHP or less you die .
<1/3 FP	Halve your Move, Dodge and ST . Doesn't affect ST-based (dmg, HP, encumb.)
0 FP or less B426	As <1/3 FP plus make a Will roll vs. incapacitation before any maneuver other than Do Nothing. On a critical failure make an immediate HT roll vs. heart attack. Every point of FP loss causes an equal loss of HP.
-1xFP	You fall unconscious , recover FP like resting. Awake when positive FP. Can't lose any more FP, you loose HP instead!

+ Recovery + First Aid + Diagnosis + Medical Care + Surgery + Infection + Contagion +

Natural HP Recovery B424

Rest lets you recover lost HP, unless the damage is of a type that specifically does not heal naturally (for an example, see Illness, B442). At the end of each day of rest and decent food, make a HT roll. On a success, you recover 1 HP. The GM may give a penalty if conditions are bad, or a bonus if conditions are very good. Don't forget to take Rapid Healing (B79) into account.

Recovering from Fatigue B427

You can recover "ordinary" lost FP by **resting quietly**. Reading, talking, and thinking are all right; walking around, or anything more strenuous, is not. Lost FP return at the rate of **1 FP per 10 minutes of rest**. The GM may allow you to regain one extra FP if you eat a decent meal while resting. Certain drugs, magic potions, etc. can restore missing FP, as can spells such as Lend Energy and Recover Energy (B248).

You can only recover from fatigue caused by missed sleep by sleeping for at least one full sleep period. This restores 1 FP. Further uninterrupted sleep restores 1 FP per hour.

You need food or water to recover FP lost to starvation or dehydration; see Starvation and Dehydration (B426).

First Aid B424 / B195

The two main uses for First Aid skill (B195) are bandaging and treating shock. Resuscitation uses the Physician skill or First Aid at a penalty.

- Bandaging:** It takes one minute to apply pressure or a tourniquet to stop bleeding. This restores 1 HP. Using the Bleeding rule (B420), someone who is wounded but receives a successful First Aid roll within one minute of his injury loses no HP to bleeding. A later roll will prevent further HP loss.
- Treating Shock:** After bandaging, the aid-giver may take extra time to apply a more elaborate dressing and treat the victim for shock. He must keep the victim warm, comfortable, calm, and still. After the time indicated on the **First Aid Table**, he may roll against First Aid skill. On a success, the medic rolls as indicated on the table to see how many HP the victim recovers – minimum 1 HP. A critical success restores the maximum possible HP! This roll includes the 1 HP for bandaging; thus, a roll of 1 HP restores no further HP. On a critical failure, the victim loses 2 HP instead of recovering any HP at all!
- Resuscitation (B425):** Reviving a drowning, asphyxiation, or heart attack victim requires resuscitation. Make a successful Physician/TL+ roll – or a First Aid/TL+ roll at -4. Each attempt takes one minute. Repeated attempts are possible, but there is almost always a time limit. Cardiopulmonary resuscitation (CPR) and rescue breathing, widely taught after 1960, are more effective than earlier forms of resuscitation. First Aid rolls (but not default rolls) to revive victims of drowning or asphyxiation are at -2 instead of -4.

First Aid Table		
TL	Time/Patient	HP Restored
0/1	30 minutes	1d-4
2/3	30 minutes	1d-3
4	30 minutes	1d-2
5	20 minutes	1d-2
6/7	20 minutes	1d-1
8	10 minutes	1d
9+	10 minutes	1d+1
Treat FirstAid/TL8+ as FirstAid/TL6 if no equipment available		

Diagnosis B187

A successful roll gives some information about the patient's problem – limited to realistic knowledge for your tech level. It might not determine the exact problem (if the GM feels the cause is totally beyond your experience, for instance), but it always gives hints, rule out impossibilities, etc. No Diagnosis roll is required for obvious things, like open wounds and missing limbs! Modifiers: Equipment modifiers (B345); physiology modifiers (B181); -5 for internal injuries; -5 or more for a rare disease.

Medical Care B424

Anyone under the care of a competent physician (Physician skill 12+) gets +1 on all rolls for natural recovery. The healer may also make a Physician roll to cure the patient. Only one physician may roll per patient, but a single physician can care for up to 200 patients. The exact number of patients a physician can attend to and the frequency with which he may roll to cure them depend on the TL of his Physician skill; see the **Medical Care Table**. On a success, the patient recovers 1 HP; on a critical success, he recovers 2 HP. This is in addition to natural healing. However, a critical failure costs the patient 1 HP!

High-tech physicians depend heavily on equipment but still receive good basic training; therefore, a TL6+ physician performs as though he were TL6 if he has to make do without the gadgetry to which he is accustomed, as long as the surroundings are clean.

Medical Care Table		
Medical TL	Frequency of Rolls	Patients per Doctor
0	There are no physicians, get well by yourself	
1-3	Weekly	10
4	Every 3 days	10
5	Every 2 days	15
6	Daily	20
7	Daily	25
8	Daily	50
9	2 x daily	50
10	3 x daily	50
11	4 x daily	100
12+	5 x daily	200
Doctor rolls against Physician, treat Physician/TL+ as Physician/TL6 if there is no equipment available as long as the surroundings are clean		

Surgery B424 / B223

Surgery can physically repair damage to the body, but it's risky at low TLs – especially prior to the invention of anesthesia (mid-TL5) and blood typing (TL6), Modifiers (B223):

- 3 if the area or equipment cannot be properly cleaned and sterilized
- 3 for head or chest surgery
- 5 for undiagnosed problems
- If you lack Physician skill, you are at -5 to do anything but "field-expedient" surgery (e.g., stitch wounds or extract arrowheads, bullets, and shrapnel)
- Basic equipment gives -6 at TL1, -5 at TL2-3, -4 at TL4, -2 at TL5, and +(TL-6) at TL6+. Equipment quality further modifies the roll; see Equipment Modifiers (B345)

The modifiers for TL5+ surgery assume that anesthetic is available. If it isn't, apply a -2 penalty to skill. This is instead of the usual -1 for a missing item.

Infection: Before TL5 (and, at the GM's option, even during much of TL5), antiseptic practice is poor. Check for infection (see Infection, B444) after any surgery.

- Stabilizing a Mortal Wound:** Each attempt takes one hour. The roll is at -2 if the patient is at -3xHP or worse, or -4 if he's at -4xHP or worse. On a failure, repeated attempts are allowed, at a cumulative -2 per attempt. If the victim dies on the table, resuscitation may be possible; see Resuscitation (B425).
- Repairing Lasting Crippling Injuries:** It is possible to fix a lasting crippling injury (see Duration of Crippling Injuries, B422) through surgery rather than leaving it to heal on its own. This takes 2 hours. On a success, measure the injury's remaining recovery time in weeks rather than months. But on a critical failure, the injury becomes permanent!

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- Repairing Permanent Crippling Injuries:** Radical surgery can fix certain permanent crippling injuries at TL7+; exact details are up to the GM. This often requires prosthetic or transplant parts, which might be costly or hard to find. At TL7-8, the procedure might only restore partial functionality. This kind of operation is also tricky: -3 or worse to skill. On a failure, the patient needs 1d months to recover before another attempt is possible.

Infection B444

A microorganism that attacks open wounds may cause an "infection." Infections are possible anywhere, but some places (especially jungles) may harbor especially severe forms of infection. Open wounds treated with antibiotics (TL6+) never become infected except on a critically failed First Aid or Physician roll. People wounded under less-than-clean circumstances (GM's decision) and who do not receive treatment must make a HT+3 roll, modified as follows:

- Ordinary "clean" dirt in wound: +0.
- Dung or other infected matter in wound: -2.
- Locale harbors a special infection: -3.

These modifiers are cumulative, and replace those listed under Contagion (B443).

On a failure, the wound is infected. Treat this as any other disease. A typical infection requires a daily HT roll, modified as above, with failure indicating the loss of 1 HP. Most infections progress until the victim either makes a HT roll, ending the infection, or takes so much injury that he dies. Treatment with antibiotics (TL6+) gives +3 to HT rolls. This usually halts the infection before serious injury can occur.

If drugs are unavailable, or if the patient doesn't respond, a surgeon can cut out the infected tissue if the injury from infection hasn't progressed beyond a certain point. On the head or torso, this limit is the patient's HP/2. On a limb or extremity, it is the amount of injury required to cripple the body part. Surgery cannot help infections more severe than this.

The surgeon must make a Surgery roll. This inflicts 2d of injury to the head or torso, or amputates a limb or extremity. On a success, it cures the infection. On a failure, damage or amputation occurs but the patient remains infected.

Contagion B443

If you enter a disease-ridden area or encounter a disease carrier, make a HT roll at the end of the day to resist the disease. On a failure, you catch the disease! Modifiers to this roll include the disease's basic virulence modifier and the least advantageous applicable modifier from this list:

- Avoided all contact with possible victims: +4.
- Entered dwelling or shop of victim: +3.
- Spoke with victim at close quarters: +2.
- Touched victim briefly: +1.
- Used victim's clothes, blankets, etc.: +0.
- Ate victim's cooked flesh: +0.
- Ate victim's raw flesh: -1.
- Prolonged contact with living victim: -2.
- Kissing, intimate contact with victim: -3.

Proper precautions – masks, antiseptics, etc. – provide a bonus to those who know and understand them. The GM should consider limiting such measures to PCs from cultures that understand the germ theory of disease (late TL5).

Physiology Modifiers Table B181	
Physiology	Modifier
similar	
Human vs. Elf	-2
Human vs. Troll	-4
very different	
Human vs. Animal	-5
utterly alien species	-6 or worse
machine	not possible
The following Skills use these modifiers: Body Language, Diagnosis, First Aid, Physician, Pressure Points, Pressure Secrets, Surgery	

Injury Tolerance Table (B380)

Kind of entity	pi-	pi	pi+	imp
Unliving	x1/5	x1/3	x1/2	x1
Homogenous	x1/10	x1/5	x1/3	x1/2
Diffuse*	0-1HP	0-1HP	0-1HP	0-1HP
* Other attacks never >2 HP; Area-effect, Cone and Exp attacks cause normal injury				

Damage Modifier Table for Humanoids B552

Location	Notes	Location	Notes	Location	Notes
Skull	[1, 3]	Foot	[8, 9]	Limb vascular	[17]
Face	[1, 4]	Neck	[1, 10]	Neck vascular	[17]
Right Leg	[5]	Vitals	[1, 11]	Arm/Leg Joint	[14]
Right Arm	[5, 6]	Eye	[1, 2]	Hand/Foot Joint	[14]
Torso	[18]	Ear	[1, 12]	Groin	[1, 7]
Abdomen	[20]	Nose	[1, 15]	Pelvis	[19]
Left Arm	[5, 6]	Jaw	[1, 13]	Digestive Tract	[21]
Left Leg	[5]	Spine	[1, 16]	Heart	[1, 11]
Hand	[6, 8, 9]				

- [1] Attack misses by 1 hits the torso instead.
- [2] Only *imp*, *pi*, and *tbb* attacks can target the eye – and only from the front or sides. Injury over HP/10 blinds the eye. Otherwise, treat as skull [3], but without the extra DR!
- [3] The skull gets an extra DR 2. Wounding modifier is +4. Knockdown rolls are at -10. Critical hits use the Critical Head Blow Table (B556). Exception: These special effects do not apply to *tox* damage.
- [4] Jaw, cheeks, nose, ears, etc. If the target has an open-faced helmet, ignore its DR. Knockdown rolls are at -5. Critical hits use the Critical Head Blow Table (B556). *Cor* damage gets a $\times 1.5$ wounding modifier, and if it inflicts a major wound, it also blinds one eye (both eyes on damage over full HP). Random attacks from behind hit the skull instead. On front hit, roll 1d. 1 means skull [3] hit if attack is *imp*, *pi*, *tbb*. Otherwise it's a nose hit [15].
- [5] Limb. Reduce the wounding multiplier of large *pi*, huge *pi* and *imp* damage to $\times 1$. Any major wound (loss of over 1/2 HP from one blow) cripples the limb. Damage beyond that threshold is lost. Roll 1d. on a 1 *cut*, *imp*, *pi*, *tbb* hit vein/artery, see [17]. *Cr* hits a joint [15].
- [6] If holding a shield, double the penalty to hit: 4 for shield arm, -8 for shield hand.
- [7] Human males/males of similar species suffer double shock from *cr* damage, and get -5 to knockdown rolls. Otherwise, treat as a torso hit.
- [8] Extremity. Treat as a limb, except that damage over 1/3 HP in one blow inflicts a crippling, major wound. Excess damage is still lost. Roll 1d. on a 1 with *cr*, *cut*, *pi*, *tbb* hits a joint [14].
- [9] If rolling randomly, roll 1d: 1-3 is right, 4-6 is left.
- [10] Neck and throat. Increase the wounding multiplier of *cr* and *cor* attacks to $\times 1.5$, and that of cutting damage to $\times 2$. At the GM's option, anyone killed by a cutting blow to the neck is decapitated! Roll 1d, on a 1 with *cut*, *imp*, *pi*, *tbb* hits vein/artery [17], if *cr* from behind, counts as [16] and gives Quadriplegic. Automatic if *dmg* > HP from Neck Snap or throw from Head Lock.
- [11] Heart, lungs, kidneys, etc. Increase wounding modifier for *imp* or *pi* attack to $\times 3$. Increase wounding modifier for *tbb* attack to $\times 2$. *cr* is only $\times 1$, if caused shock roll vs. knockdown, -5 if major wound, other attacks cannot target the vitals. [12] Ear, if cutting max *dmg* = HP/4, double HP/4 removes ear which gives -1 Appearance.
- [13] Jaw, if crushing extra -1 to knockdown.
- [14] Joints, limb crippled at HP/3, extremity at HP/4. HT roll to recover from crippling -2, miss by 1 hits the limb or extremity not the joint.
- [15] Nose, only targetable from the front, treat like facehit, HP/4 breaks nose gives major wound and no Sense of Smell/Taste until healed. *Cut* loops off nose if HP/4+2 (major wound) but knockdown not at -5 for face. Cutting off nose = Appearance -2.
- [16] Spine, only targetable from behind with *cr*, *cut*, *imp*, *pi*, *tbb*. DR3, if shock-penalty roll against knockdown, crippled if *dmg* = HP which causes automatic knockdown and stunning.
- [17] Veins and Arteries, only targetable by *cut*, *imp*, *pi*, *tbb*. Increases wounding modifier plus 0.5, no crippling and no *dmg* limit, an attack that misses by 1 hits the neck, arm or leg, as appropriate.
- [18] Roll 1d if *cr*, *imp*, *pi* or *tbb*. On a 1, hit to the vitals [11], *cut* from behind hits the spine [16].
- [19] Like [18] but if major wound you fall down. Until healed you're Lame(Missing Leg). Can't stand, fight sitting or lying. Armor for torso and groin or specific protects normal.
- [20] Roll 1d. 1 is Vitals [11], 2-4 is Digestive Tract [21], 5 Pelvis [19] and 6 is Groin [7].
- [21] If major wound HT-3 or get a special infection (B444)