Injuries

This is a whole slew of optional rules on the subject of injuries, which have been inspired by several different worthy sources, particularly some of the games published by BTRC (especially TimeLords and its conceptual descendant CORPS), and some other house rules by Thomas Barnes.

Injury Points

For the purpose of book-keeping, special wound effects, healing etc, the magnitude of a wound is measured in **Injury Points (IP)**. These are relative to the character's "Hit Points" attribute; to figure out the IP of a given wound, cross-reference the victim's HP score with the rolled damage (after armor) on the table below. For the purposes of healing magic etc., treat the number of "hit points" healed according to the standard rules as incoming damage, find out how many IP that would correspond to, and heal that many IP from the wound being targeted.

Damage	VICTIM'S HP SCORE													
Taken	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	3	3	2	2	2	2	2	1	1	1	1	1	1	1
3	4	4	3	3	3	3	2	2	2	2	2	2	2	2
4	6	5	4	4	4	3	3	3	3	3	2	2	2	2
5	7	6	6	5	5	4	4	4	3	3	3	3	3	3
6	9	8	7	6	5	5	5	4	4	4	4	3	3	3
7	10	9	8	7	6	6	5	5	5	4	4	4	4	4
8	11	10	9	8	7	7	6	6	5	5	5	4	4	4
9	13	11	10	9	8	8	7	6	6	6	5	5	5	5
10	14	13	11	10	9	8	8	7	7	6	6	6	5	5
11	16	14	12	11	10	9	8	8	7	7	6	6	6	6
12	17	15	13	12	11	10	9	9	8	8	7	7	6	6
13	19	16	14	13	12	11	10	9	9	8	8	7	7	7
14	20	18	16	14	13	12	11	10	9	9	8	8	7	7
15	21	19	17	15	14	13	12	11	10	9	9	8	8	8
16	23	20	18	16	15	13	12	11	11	10	9	9	8	8
17	24	21	19	17	15	14	13	12	11	11	10	9	9	9
18	26	23	20	18	16	15	14	13	12	11	11	10	9	9
19	27	24	21	19	17	16	15	14	13	12	11	11	10	10
20	29	25	22	20	18	17	15	14	13	13	12	11	11	10

For values off the table, the formula is:
IP=(Damage*10)/HP, round nearest.

Example: Arnie and Barney are both running around with no clothes or armor on, when some nasty person shoots both of them with a 9mm pistol. Arnie has 15 HP while Barney has 10 HP; by coincidence, they are hit by one bullet each, and the damage roll comes up as 8 in both cases. Checking the table, we find that Arnie takes a wound of 5 IP while Barney suffers 8 IP. (If they'd both been wearing light Kevlar or something with DR 5, the penetrating damage would have been 3 points, which translates to 2 IP for Arnie and 3 IP for Barney, but they weren't wearing any armor so they're out of luck). Looking at the Wound Level section, we find that Arnie's wound is Medium while poor Barney gets a Serious wound. A bit later, they meet their good friend Connie who happens to know the spell Minor Healing and is willing to help them; that spell can cure up to 3 "hit points" of damage, which translates to 2 IP for Arnie and 3 IP for Barney -- leaving them with 3 and 5 IP left, respectively.

Lethal and Non-Lethal Damage

Introducing an altogether new type of damage. Non-lethal damage (N damage for short) is, as the name suggests, not by itself capable of killing (or permanently harming) a character -- it represents the kind of bruising that is usually caused by being hit by blunt objects of varying hardness, or that may be transmitted through armor even if the armor isn't penetrated (most particularly in the case of flexible armor like mail or kevlar -- the armor may save your life, but it's not going to prevent you getting *hurt*).

There are two ways to take N damage. Firstly, many weapons do N damage instead of or in addition to lethal (L) damage. Secondly, armor may convert some portion of the L damage that strikes it into N damage. N damage never gets a bonus for damage type -- multipliers for Cutting or Impaling damage only applies to the lethal portion which penetrates armor. N damage cannot break bones or cause any sort of Special-Damage roll linked to organ failure or other lifethreatening situations, but it may cause stunning or Special-Damage rolls linked to unconsciousness. N damage "wounds" are also referred to as "bruises".

Weapon damage types

Weapons are rated for lethality level; there are five such levels, and roman numerals are used to denote them.

- Level I: 100% L, 0% N. Guns and sharp metal things and so on.
- Level II: 75% L, 25% N. The hardest bludgeons, dulled blades, etc.
- Level III: 50% L, 50% N. Bludgeons of medium hardness, such as the typical quarterstaff.
- Level IV: 25% L, 75% N. Standard fists and kicks and so on.
- Level V: 100% N. Heavily padded bludgeons, sonic stunners, etc.

When using this rule, first roll for damage and then divide it up, rounding in favor of N damage.
Note: Under this rule, fists do straight thrust/crush damage rather than thrust-2/crush, and kicks do thrust+2/crush, both type IV; heavy boots and brass knuckles and so on do not generally give damage bonuses, but instead increase the lethality of the attack to type II or III, depending.

Armor and damage

The **DR** rating of all types of armor is now given as two numbers separated by a slash, rather than as one number. The notation is **A/B**, where **A** is the "hard" DR and **B** is the "soft" DR. Hard DR stops damage altogether; soft DR converts L damage to N damage. This rule replaces the standard "blunt damage through flexible armor" rule.

Applying DR works like this: First determine where the attack hit, roll for damage, and (unless the attack had lethality level I or V) split its rolled damage between L and N damage. Next, the hard DR of the armor will stop up to its rating in damage -- it won't stop any N damage unless there is more hard DR than there is L damage; L damage is stopped first. Then, if there is any L damage left, the soft DR will convert up to its rating in L damage into N damage. N damage can only be stopped by armor if there is more hard DR than there is L damage, in which case the remaining points of hard DR stop one point of N damage each. Damage which has been turned from L to N by armor cannot be stopped by armor. Armor only counts as "penetrated" if the L damage was at least equal to the armor's total DR -- in other words, it is possible to get holed armor without actually taking any L damage (important in the case of sealed armor in hostile environments), if the L damage is exactly equal to the armor's total DR.

If any L damage manages to penetrate armor, the remainder gets any bonuses for damage type (cutting, impaling, bullet calibers, whatever), and causes a Wound as determined by the IP table and the Wound Level rules below. Whatever N damage is done causes a Bruise, which is separate from the Wound caused by the same attack (although it'll be in the same location, it is treated as a separate thing in game-mechanical terms).

Wound Levels

I use a modified version of the "wound level" rules in CII. There are now five different wound levels: Trivial, Light, Medium, Serious, and Critical. The level of a wound is determined by how many IP the wound contains. Under these rules, hit points are no longer "ablative" at all; the only situation where consecutive "damage" accumulates toward unconsciousness or death is in the case of blood loss, which is treated just like a separate Wound (but one which grows; a patient can only have one Bloodloss injury unless the patient is a distributed personality sharing several bodies or something similarly exotic). The same rules are also used to evaluate the "size" of a Bruise, and even the amount of Fatigue a character is suffering (although the Fatigue aspect of BD is used for comparison rather than the HP aspect in the latter case). Fatigue, like Bloodloss, is cumulative, and a normal character may not have more than one Fatigue "injury".

A wound should be listed by (Location):(Type)(Level)(Points). For Type, use the same abbreviations as in the damage-type listing for weapons (Bruises are listed as Br, Fatigue is listed as Fat, Bloodloss is listed as Blood). For Level, use the first letter of that wound level (T,L,M,S,C).

Breakdown of wound levels:

- Trivial Wound: 1 IP.
- Light Wound: 2 IP.
- Medium Wound: 3 to 5 IP.
- Serious Wound: 6 to 9 IP.
- Critical Wound: 10 IP or more.

For Bruises, you need only keep track of the single largest Bruise in each location; a new Bruise to an already Bruised location is ignored unless it is at least as big as the old one -- if the new Bruise is bigger, ignore the old one, and if they are exactly equal, they combine to form a "new" Bruise which is one point larger than each of them.

Special-Damage Rolls

These are used quite often, and are a generalization of the "roll vs. HT (minus some penalty or plus some bonus) to avoid this or that nasty effect" sort of rule, of which GURPS already has a few. (Yes, I like generalized rules). Briefly, a **Special-Damage roll** (SD roll, for short) is a HT roll made with a modifier which depends on the exact amount of damage taken. SD rolls are called for in any number of different situations, usually upon taking a wound of such and such a Wound Level, but there are some cases where *any* wound will require a SD roll. In any case, the SD roll takes a penalty if the damage taken was larger than the minimum required to provoke the SD roll; the penalty is equal to the number of extra IP taken above said minimum. For instance, if a SD roll is required for Serious wounds to a certain location and you've just taken a 8 IP wound to that location, the SD roll will be at a -2 penalty; if you'd taken a 15 IP wound instead, you'd be rolling at -9.

The margin by which an SD roll succeeds or fails is often important; for instance, if you fail an SD roll to determine whether you fractured that bone, the margin you failed it by determines whether the fracture is simple or complex (which, believe me, matters).

Bleeding

Many different types of wounds can lead to bleeding, which is bad for your health. There are three different types of bleeding: Regular, Severe and Internal. Bloodloss is counted as a single wound, which unlike other wounds is cumulative; if you lose more blood, the Bloodloss "wound" grows in severity.

Regular Bleeding

This is usually caused by cutting, impaling, or bullet wounds; wounds from blunt objects usually don't cause much bleeding unless they also caused fractures. For this purpose *only*, total up all the damage you've taken, divide it by 5, and use the result as a penalty in an SD roll. Make the roll each minute, if it fails you lose 1 point of blood.

Regular Bleeding can be stopped immediately with a First Aid roll; one such may be attempted per patient per minute, although it usually takes more than a minute to finish bandaging up a patient. Also, if the patient makes his SD roll to avoid bleeding three consecutive times, the bleeding stops on its own.

Severe Bleeding

This only happens as a result of specific wounds. When Severe Bleeding is called for, make a SD roll for the wound in question. If this roll fails, you start losing blood at a constant rate depending on the amount by which the roll failed:

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SD roll missed by   Bleeding Rate
1 to 3 points       1 IP per 1d6 x 10 minutes
4 to 6 points       1 IP per 1d6 x 1 minutes
7+ points           1 IP per 1d6 x 10 seconds
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Severe Bleeding from a limb wound can be stopped with a tourniquet; from wounds in the head or body it requires surgery (or magic) to stop it. With a successful First Aid roll and continuous direct pressure, the bleeding can be slowed by one step (or two steps if the First Aid roll was a critical success); if it is slowed beyond the slowest step you can consider it to be temporarily stopped.

Internal Bleeding

This may happen whenever you either take a Serious wound to the head or body, or when a limb is crippled (but does not suffer from an open fracture). Whenever this happens, make a SD roll for the wound in question; if it fails, you start suffering slow internal bleeding at a constant rate depending on the amount by which the roll failed:

SD roll missed by	Bleeding Rate
1 to 3 points	1 IP per 2 hours
4 to 6 points	1 IP per hour
7+ points	1 IP per 30 minutes

Internal bleeding requires either surgery or magic to stop. It may also cause organ damage (watch out for those head wounds).

Coagulation

Severe and Internal bleeding *may* sometimes slow down on its own. Every time you lose blood (or once per ten minutes, if you're bleeding faster than that) make a new SD roll. If this succeeds then the bleeding slows by one step on the table. Severe Bleeding stops altogether if it goes off the table, but strenuous activity may cause it to begin bleeding again. Internal Bleeding never stops on its own, but may be slowed down one or two steps off the table (to once per four or eight hours).

Effects of Bloodloss

Bloodloss is treated as a wound like any other; if it becomes Critical then the patient will not likely remain conscious very long. The patient *dies* if the wound grows to twice the minimum for Critical. The only other difference between Bloodloss and other wounds is that its penalty *also* applies to HT rolls vs. Infection, Shock and Unconsciousness in addition to any other penalties.

Effects of Wounds

For injuries to the body or head, a Light wound gives a -1 penalty to Move, DX and all physical skills; a Medium wound gives a -2 penalty; a Serious wound gives a -3 penalty. For injuries to the head, these penalties apply to mental attributes and skills as well. A Critical wound gives a -4 penalty to all skills and "active" attribute rolls (*not* to HT rolls against Special Damage and so on) regardless of where it is, assuming it hasn't yet made the patient unconscious. Note: These penalties are *not* cumulative, *only* the worst one applies. High Pain Threshold will halve any such penalty except for Fatigue, rounding down.

For injuries to the limbs, the blowthrough limit is (HP/2), so you cannot take any worse than a Serious wound to a limb, and this will cripple it. Also, the major joints (elbows and knees) are more vulnerable; they are crippled by Medium wounds (which will make the whole limb useless). Hands and feet have blowthrough limits of (HP/3), so they can only take Medium wounds, which will cripple them; an arm or leg which is not itself crippled is still somewhat useful even if the attached hand or foot is crippled, provided you're not too wimpy. Limbs suffer penalties for *any* wound: A Trivial wound gives a -1, a Light wound gives a -3, a Medium wound gives a -5. Like with wounds to the body or head, only the worst single penalty to any given limb applies, and High Pain Threshold will halve the penalty.

Amputations

Amputations in combat aren't all that common, but they do happen.

Limbs: A crippling wound to a limb, if taken from a Cutting attack or an explosion (or projectile or beam weapons that do more than 10 dice basic damage), may take it clean off. In this case, make a SD roll at +3; if it fails, the limb is amputated, and you must roll for Severe Bleeding at -4. Otherwise, go to the procedure for breaking bones.

Fingers: If a hand is crippled by a Cutting attack or an explosion, some fingers might be permanently lost. Make an SD roll; if it fails, the hand loses one finger per two points of failure margin (the thumb should be the last to go). If the roll was critically missed, the whole hand is lost at the wrist, and you must roll for Severe Bleeding.

Decapitation: A Critical wound to the neck requires an SD roll to avoid decapitation. Decapitation is usually fatal.

Breaking Bones

Bones can break when a limb is crippled but not amputated, or when a Serious or worse wound is taken to the body or head. Whenever this happens, make an SD roll, and find out just how bad the fracture is depending on the result of that roll:

- Success: Temporary crippling only; no fracture.
- Missed by 1-3: Simple Fracture.
- Missed by 4-6: Compound Fracture.
- Missed by 7-9: Open Fracture.
- Critical failure: Compound open Fracture.

This SD roll has a -2 penalty for bullet wounds, or a +4 bonus for damage caused by a fall.

Simple Fracture

A hand or foot is crippled.

An arm or a leg is crippled, and you must make an SD roll vs. Internal Bleeding.

A fracture to the Head or Brain areas requires SD rolls vs. Internal Bleeding and Unconsciousness.

A fracture to the Neck or Spine areas requires an SD roll vs. Paralysis.

Any location must be splinted before it can be safely used to bear weight; a broken spine cannot be splinted without immobilizing the patient. Attempting to use any location with a simple fracture that has not been splinted provokes a *new* fracture roll.

Compound Fracture

As above, except that the fracture is at -2 to set or immobilize.

Also, a compound fracture to the Chest area may puncture a lung or tear open a major vein or artery. Until the fracture is immobilized, any movement or rough handling by the patient will require an SD roll to avoid a punctured lung *and* a roll for Severe Bleeding.

Open Fracture

As above, except that the bone breaks the skin (ouch). Roll for Severe Bleeding. This is an open wound and might get infected, TL 6 surgery is required to set the bone and close the wound. At earlier TLs, a limb must be amputated to save the patient, although some forms of magical healing might help.

Compound Open Fracture

As above, except worse; take a -2 penalty to the roll for Severe Bleeding and to all skill rolls related to treating the wound.

Unconsciousness, Shock, and Death

Nobody dies from lack of hit points, since hit points are not lost. The usual cause of death is irreversible brain damage, which is usually caused by a lack of oxygen and nutrients to the brain, which again is usually caused by problems with the circulatory system, which may in turn have a variety of causes, In game terms, the things that can kill you are basically threefold: Injuries to various critical locations (a knife through the heart, for instance), accumulated bloodloss, or the heart stopping for other reasons (often Shock). Similarly, one probably wouldn't pass out due to being poked ten or twenty times with a needle; only specific injuries can cause unconsciousness.

Any Serious wound (or Critical Bruise) may cause Shock, Semi-Consciousness, or Unconsciousness. This includes Bloodloss, but not Fatigue. Whenever such a wound is taken, make a Special Damage roll for it. This roll is modified by Will (use Physical Will rather than HT as the basis for it), and High Pain Threshold gives an extra +1 bonus (while Low Pain Threshold gives a -1 penalty). If it fails, you go into Shock; if it fails by 5 or more, you go into Semi-Consciousness; a Critical Failure means you go straight into Unconsciousness.

If the wound was Critical (and not a Bruise), the Special Damage roll must be repeated each turn you do anything more significant than staggering around at 1 hex per turn, and every 10 turns even if you're just lying down quietly. Also, any extra mistreatment of a crippled extremity forces a new roll.

Shock

If you're going into Shock, you may still be able to move around and do things; an emergency situation will generally be accompanied by enough adrenalin to keep you functioning physically for a little while, but you'll take a -2 penalty on *mental* things, and if you need to make any new rolls against Shock/Unconsciousness you also have a -2 on them (though you don't suffer any extra ill effects from "going into Shock twice over").

After the emergency has passed, or in (6*HT) seconds anyway, you become giddy and weak; you take a -4 penalty on everything except HT, and must make a roll vs. Physical Will each minute to avoid Semi-Consciousness -- a Critical Failure on this means you go totally Unconscious, but a Critical Success means you stabilize and don't have to make any more of these rolls unless you're subjected to unreasonable stress. If you go around trying to do things, make a DX roll each minute and every time you try anything more difficult than walking around; if this is failed, you can no longer remain in an upright position, and a Critical Failure might cause you to hurt yourself or do some other kind of unintentional damage, depending on the situation.

After you're stabilized, recovery will take hours; make a HT roll each hour, with a +2 bonus for appropriate "first aid"-type care, or a penalty of -1 to -4 for especially bad conditions. Each roll you make reduces the Shock penalty by 1, until it is at -1; it will stay at -1 for (18-HT) hours, after which recovery is complete.

Semi-Consciousness

The state of Semi-Consciousness is basically a deeper form of Shock; you can still sort of perceive what's going on around you and perhaps communicate a few mumbled words. You must make another Special Damage roll instantly upon going Semi-Conscious, and every minute thereafter, or go totally Unconscious; a Critical Failure on this means you suffer immediate Cardiac Arrest. While Semi-Conscious, you are generally limited to lying around (and perhaps slowly crawling or rolling a hex per turn, if you can make a DX roll); anything you try to do (including the aforementioned DX roll to crawl) takes a -6 penalty, and requires that you make a new Special Damage roll at the beginning of your next turn to avoid total unconsciousness. Understanding and remembering what's going on around you while Semi-Conscious may require a Mental Will roll, with a penalty depending on the amount of distracting noises and so on.

Proper medical treatment, or a Critical Success on the once-per-minute HT roll, means you stabilize in this condition and do not risk Cardiac Arrest (due to Shock, anyway). You'll still probably want to go to sleep, though, but at least you won't risk a Coma. Recovery works like with total Unconsciousness. Stability is lost if any more damage is taken (internal bleeding is particularly nasty).

Unconsciousness

This basically functions as in the standard GURPS rules. Addition: When you go Unconscious, you must make a straight HT roll or suffer Cardiac Arrest. If you do not receive treatment, you must make another roll 1d6 minutes later, but if you're still alive after that roll you've stabilized on your own -- no further rolls vs. Cardiac Arrest are needed unless you take more damage, but any further damage (including more bleeding) means you're in trouble again.

If you're Unconscious but stable, recovery works almost like the standard GURPS rules say; how long it takes to recover consciousness depends on your worst single wound, rather than the total amount of damage you've taken. You must make a HT roll to decide exactly how long recovery takes; shorten the time by 10% for each point you make the roll by, or lengthen it by 10% for each point you miss it by. If you rolled a Critical Success, you begin recovery immediately; if the roll was a Critical Failure, you instead go into a Coma.

Coma

This is prolonged unconsciousness. At first, make a daily HT roll; any success means you come to. But if any of these rolls is a Critical Failure, you must begin to roll each *month* instead; and if you also have a Critical head wound you may consider the coma to be permanent pending a miracle. Surviving beyond about two days of unconsciousness will require treatment and aid, or you'll die from dehydration or something else unpleasant. Prolonged comas will probably cause nasty complications (including loss of ST and HP due to atrophy of muscles and skeletal structure, bedsores which might get infected, etc).

Respiration Loss and Cardiac Arrest

Either of these may be caused by a variety of injuries. Cardiac Arrest generally leads to immediate Respiraton Loss, but it is often possible to lose respiration without immediately losing pulse. Either condition is usually fatal, for obvious reasons, unless you get treatment **fast**; they lead to irreversible brain damage within a few minutes (or sometimes longer, depending on conditions; drowning in very cold water, for instance, prolongs this time considerably, and ultratech or magical forms of treatment may salvage brains that late TL7 medicine cannot).

First aid with CPR techniques can sometimes suffice to save the patient, but they're often only a stopgap measure to keep the patient only "mostly dead" until more extensive treatment can be given.

Bloodloss and Fatigue

Bloodloss is, as already mentioned, treated as just another wound for most purposes; the only difference is that any further bleeding causes this wound to grow bigger, and penalties are suffered for this as for any other wound -- increasing as it grows. When Bloodloss becomes Serious, you risk going into Shock (just like with any other Serious wound), and a new roll must be made each time more blood is lost. If Bloodloss manages to go to 20 IP, you go into Cardiac Arrest automatically, and will die unless you get an immediate transfusion. Fatigue, on the other hand, cannot normally cause Shock; but once you reach Critical Fatigue you can't do anything much except in extraordinary circumstances (using drugs, or making Physical Will rolls with cumulative penalties for everything you do; pushing yourself like this *might* cause shock).

Healing

The rate at which a wound heals depends on its *original* Wound Level, the patient's HT stats, and sundry circumstances. To figure out healing rate for a regular Wound:

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ORIGINAL WOUND LEVEL     RATE OF HEALING
Medium or less           HT/14 per day
Serious                  HT/28 per day
Critical                 HT/70 per day
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Modify the character's Health as follows:

- -1 to HT for each 2 IP of blood lost and not replaced
- -1 or more to HT for unsanitary conditions
- -1 or more to HT for infection or disease
- -4 or more to HT for burns
- -1 or more to HT for activity
- -1 or more to HT for inadequate food or water
- -4 or more to HT for internal injuries and organ damage
- -1 for every 10 years of biological age over 50

- +1 for complete bed-rest, with adequate food and water.
- +1 for every 2 points by which the attending Physician makes a skill roll, up to a maximum of 1/2 Tech Level.
- +1 for every 3 points by which the attending Nurse (if any) makes a skill roll, up to a maximum of +3.

Recalculate healing rate whenever circumstances change. Healing rate should be computed to two decimal places, and added up each day, so you could very well be healing for instance .09 points per day.

Characters with the Rapid Healing advantage double their rate of healing. Characters with the Slow Healing disadvantage halve their rate of healing.

At TL 8+ use the following modifiers for healing:

TL	RATE OF HEALING	NOTES
8	Normal	-2 for organ or burn damage
9	x2	-0 for organ or burn damage
10	x3	
11	x4	
12	x5	
13	x6	
14	x8	
15+	x10	

Since all wounds heal in parallell, and only the largest single wound in each major location has any game-mechanical effect once all wounds have been stabilized so you're not bleeding to death, you can forget about any smaller wounds you have in the same location as a large one once they have all been treated (by the time the larger wound has healed up, all the smaller ones will be gone). This should cut down a bit on book-keeping.

Regenerating Blood

Blood loss heals as a Light wound regardless of its magnitude, although of course transfusions might be used to instantly heal part or all of blood loss. At TL 8+ there might be medicines to speed the body's own regeneration of blood.

Healing Bruises

Bruises heal much faster than real Wounds; substitute "hours" for "days" in the formula above.

Healing Bones

Bones heal at a different rate. Before a broken bone can be safely used again, several weeks will pass; this healing happens in parallell with the healing of the Wound which caused the broken bone.

- Load-Bearing Bones 21 weeks - HT (minimum of 5 weeks)
- Other Bones 15 weeks - HT (minimum of 3 weeks)
- *2 time for complex fractures
- Modifiers as above.

Recovering from crippling injuries

At the end of any fight in which a character is crippled, that character makes a Special Damage roll for each crippling injury. A successful roll allows the injury to recover fully, once all bones have healed and the wound is gone. A failed roll means that the injury was permanent - resulting in crippling, a loss of abilities, or some other problem. For each 2 points the roll was missed by subtract 5 character points from affected abilities, skills or advantages or add 5 points of appropriate disadvantages. Critical wounds to the head or body might also lead to permanent impairments -- make a Special Damage roll for it like for a crippling injury, and if it fails, appropriate detrimental effects should be worked out (this depends on the wound's exact location).

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