

# SHOCK

The body's normal reaction to severe injury or psychological trauma is to go into *shock* (this is a medical term, not the same as the **GURPS** condition known as "shock," p. B419). This is a state in which oxygen supply cannot meet tissue demand. It can be caused by blood loss, heart irregularities, infection, allergic reactions, or stress. Many of the results of the Fright Check Table can be interpreted as various severities of shock. Symptoms of shock include

weakness, anxiety, pallor, weak pulse, and low blood pressure. Anyone trained in first aid will expect shock if he knows the patient has suffered some trauma, and can attempt appropriate action.

If someone is not expecting a person to be in shock, roll vs. Diagnosis+4 or First Aid+4 to recognize the symptoms. To treat shock, use the rules on p. B424. The changes in time taken to attend to shock and the effectiveness of the treatment at different tech levels reflect the increase in medical knowledge and availability of better equipment.

# DIAGNOSIS

Once a patient is out of immediate danger, the next step in medical care is determining what the patient is suffering from. In many cases, this is the first stage of medical attention, as when a patient with an illness or minor injury seeks a doctor. The diagnosis process can involve interviewing

the patient (if conscious) to learn what symptoms he has noticed, external examination of the body, measuring vital signs, testing samples, technological imaging techniques, or exploratory surgery.

## Medical Treatment

This chart describes the sequence of events when a patient seeks modern medical treatment (TL6+). Most of these tasks are routine and do not require a skill roll (see p. B345); make only the skill rolls noted below.

