RABID

"It started a couple of months ago, reports of a new bug going around. You know, third world crap, not my problem. But wherever this bug went, everything seemed to go to hell.

"Then it came here, in the cities first. Hospitals overloaded, rioting in the streets, police overwhelmed. After that the military stepped in, and they seemed to have it contained. Quarantine zones, airstrikes, and I heard they even dropped The Bomb in a couple of places, or that's the rumor anyways.

"But then, just when it seemed like the worst was over, it spread again, only this time like wildfire. It was everywhere. It jumped the quarantine zones. The military couldn't isolate themselves from it, and when they started getting infected it was game over, man. The damn thing had gone airborne, and there was no containing it after that.

"What was that? Eh, thought I heard something. This whole thing is making me jumpy

"Where was I? Oh, the infection, right. Now, a few of us, maybe five or ten percent, are immune to the bug. We won't…change… into those things. Just remember we aren't immune to being eaten or torn apart.

"So now what? Well, we gotta find other survivors, get weapons and supplies and find a place to hole up until those things starve to death. Christ, I hope they can starve to death. And don't even think about going out there to find your lost spouse or best buddy. Forget it, they're either holed up somewhere safe like us, or they're dead…or worse. So don't even go there.

"What's that!? Oh God, they found us, they're here. We have to go, we have to go NOW!"

Welcome to the end of civilization. A mutated airborne strain of rabies has swept across North America, and presumably the rest of the world as well. But not everyone is affected. You are one of the immune. An average person, one of the 'lucky' survivors, swept up in extraordinary circumstances. But your struggle is only just beginning…

Rabid is intended to be run as a 'day zero' campaign, ideally run by GMs comfortable with improvisation. The idea is that the characters find themselves unexpectedly in the middle of a zombie invasion, and the GM asks them "What do you do next?"

Creating Your Survivor

Survivors are ordinary people caught up in extraordinary events. Your character is not a Special Forces operative, secret agent or even a SWAT team member. In fact, most police and government agents are already dead or infected, being the first to respond to the crisis and overwhelmed by the infected. Your character is just a regular person, immune to the infection, and lucky enough not to have been killed by the infected…yet.

Primary Stats:

Per standard Microlite20 rules, there are three primary stats: Strength (STR), Dexterity (DEX) and Mind (MND).

Since the character's are average people roll only 3d6 for each attribute, but assign them to attributes as desired.

Stat modifier is (Stat-10)/2 round down.

Skills: Skills are determined differently in Rabid. Because the PCs are normal people from a modern post industrial society, it is not assumed that everyone knows how to fight equally well. There are five skills: Shooting, Physical, Subterfuge, Knowledge and Communication. The Physical skill includes close combat ability, enhances defense (AC) and increases hit points.

Players place +1 in one skill of their choice. Thereafter they may 'age' their characters to gain additional skill points. Assuming a starting age of 18 or so, for every 5 to 10 years added in character age (the exact number is not important), subtract 1 from either the Strength or Dexterity stat. In exchange, add 1 to either the Mind stat or the Shooting or Physical skill, or add +2 to the Subterfuge, Knowledge or Communication skill. Players may do this as often as they like, but a too weakened character will likely die fast.

For example, Pete is a new character. Pete's player places his first +1 into Physical. He decides to age Pete 6 years (making him 24), reducing Strength by 1 and adding 1 to Pete's Shooting skill. He ages Pete another 5 years, subtracting 1 from Dexterity and giving +2 to Knowledge.

Shooting – Using any ranged weapon
Physical – Physical tasks and melee combat
Subterfuge – Sneaking about, picking locks, deception
Knowledge – Local area knowledge, how to use things
Communication – Negotiation, social interaction

Skill tests involve rolling d20, plus adding an appropriate stat modifier and the appropriate skill rating. The total must equal or exceed the Difficulty Class (DC) established by the GM.

Hit Points: Characters start with Hit Points equal to their Strength score plus Physical skill rating.

Armor Class (AC): Armor Class is largely irrelevant when dealing with the infected. It only comes into play when fighting other survivors. AC = 10 + DEX mod + Physical skill

Background & The Hook: Players are encouraged to come up with short backgrounds for their characters. However, all characters must have a hook, which can be worked into the character's background. A hook is a liability or complication in the character's life, such as a family member, a lover, a condition that requires medication or some other obligation; something that requires the character to journey into infected areas to resolve the obligation or complication. Hooks should require a significant effort on the character's part to resolve. Hooks are subject to GM approval.

Equipment: Characters start with any equipment that is reasonable considering their skills, background and starting location. Assuming your campaign is set in a developed nation, access to a vehicle of some kind is almost certain. Most characters will certainly have at least an apartment if not a house, though they probably won't want to stay in them for long. Improvised melee weapons should be easy to come by.

After the campaign starts, characters will have to go out and get whatever equipment they want. Generally, guns should be easy to

get (they'll probably just be lying around all over the place), but ammo should be scarce. In fact, this should be the golden rule of any Rabid campaign…*guns common, ammo scarce.*

Microlite20 Modern has a good list of guns to pick from. Or reference firearms guides or catalogs. Just make a note of the weapon's caliber and magazine capacity.

Money, gold and precious stones will have virtually no value in this setting. The only things that will have value are items that help people survive, or provide simple luxuries and pleasures, like booze, smokes, drugs, music, DVDs, batteries, etc.

Encumbrance: Survivors can carry a number of weapons/items equal to their Strength stat without being encumbered. Players will really, really want to avoid being encumbered. Otherwise they will be overrun by the infected. Up to six small items can be grouped together as one item in a pouch, purse, satchel, etc. Particularly large or heavy gear may count as two or more items. Very small items, like a book of matches, shouldn't count against a character's encumbrance (though carrying a case of matchbooks would count).

Combat

Initiative: Roll d20 + MIND mod for initiative (against zombies, its more about coolness under pressure and presence of mind than quick reflexes). The character with the highest total may act first (or hold action). Infected always act last each combat round.

Combat Round: A combat round is only a few seconds long, allowing only one action: attacking, running (up to 20'), reloading a clip fed weapon, a brief discussion, drawing a weapon, retrieving something from a pouch, etc.

At the GM's discretion, a character may mutli-task. For example running and shooting at the same time, or shooting and shouting instructions simultaneously. When multi-tasking, all tests are -2.

The infected will always move up to 20' as directly as possible towards the nearest survivor. They'll run through fire, climb obstacles, even try to jump across rooftops if they spot survivors on an adjacent rooftop. When they reach melee range with the survivors they immediately and automatically hit for 1 point of damage each round (use combat scale for large groups).

Attack Rolls:
Ranged weapon attacks = d20 + DEX mod + Shooting skill
Thrown weapon attacks = d20 + DEX mod + Physical skill
Melee combat attacks = d20 + STR mod + Physical skill

The total result (including any modifiers) must equal or exceed the target's Armor Class (AC) to hit and inflict damage.

Attack Modifiers: Any situation that makes attacking more difficult, such as shooting at a moving target, or poor visibility or a long ranged attack incurs a -2 penalty on the attack roll. Anything that makes an attack easier, such as firing from cover or high ground or taking an action to aim a shot, gives a +2 bonus to the attack roll. Modifiers are cumulative.

Damage: If the attack successfully hits, determine damage:

Pistol Ammo
.22/.32 Caliber = 2d4
9mm/10mm/.38/.45/.357 = 2d6

.44 Mag/.50 Action Express = 2d8

Shotgun Shells
12 Gauge = 2d8
10 Gauge = 2d10

Rifle Ammo
5.56mm/.223 = 2d8
7.62mm/.30 = 2d10
.50 Caliber Rifle = 2d12

Melee Weapon Damage*
Light Melee Weapon – Knife, club, lead pipe, etc. = 1d6
Medium Melee Weapon – Baseball bat, machete, cricket bat = 1d8
Two-hand Melee Weapon – Samurai sword, fireaxe, etc. = 1d10
Chainsaw = 2d8 damage (running); 1d8 (off)
*Remember to apply STR mod to melee damage rolls

Note: Unarmed combat against the Infected is completely impractical, even for well trained martial artists.

Body Armor – Useless against the infected; against other survivors reduces damage taken by 4, but with -2 AC

Fragmentation Grenade – 4d6 damage to 20' radius
Molotov Cocktail – 3d6 damage to a 10' radius; sets area on fire for 1d4+2 rounds, inflicting 2d6 damage per round

Light Weapons: Survivors may wield two light ranged weapons (pistols, machinepistols, or sub-machineguns), allowing an attack with each hand. Each attack incurs a -2 penalty to the attack roll. Melee weapons *may not* be dual wielded.

Burst Fire: Firing a burst uses 10 rounds. The attack receives +4 on the attack roll and doubles the damage inflicted. Particularly good against a large group of infected. But remember, guns common, ammo scarce.

Critical Hit: A roll of 20 on the d20 is a critical hit. Critical hits inflict maximum damage.

Fumble: A roll of 1 on the d20 results in a fumble: the character's gun jams, or the character slips or drops his weapon, etc. Generally an action is required to recover from a fumble.

Area Effect Attacks: Make a single thrown weapon attack roll against an AC of 10. If the attack misses, roll 1d6 for scatter direction (1-2 long, 3-4 short, 5 right, 6 left) and 2d6 feet for scatter range. Infected will make no attempt to take cover from grenades or avoid Molotov cocktails. Survivors may make a DEX mod + Physical test with a DC equal to the total attack roll for ½ damage.

Falling: Characters take 1d6 damage for every 10' fallen. If they fall on something sharp, such as broken glass, add +1 to the die roll. If characters take more than 10 points of damage from a fall, they might break a bone. Make a STR mod + Physical test vs. DC of 10 for the character to avoid breaking a bone. GM has discretion on which bone is broken if the test fails.

Healing: Survivors can heal all hit point damage after a full day's rest. Alternatively, they may attempt to treat their wounds by making a Knowledge + MIND mod test with a DC of 15. Add +2 if the survivors have some sort of first aid kit; add +4 if they have access to a hospital, medical clinic or similar fully equipped facility. If successful they heal 2d6 hit points. Heal checks may only be made

once after each instance of a wound being received (generally, once after each battle).

Healing tests are also required to set broken bones. Broken bones will take several weeks to fully heal. Failing to set broken bones will have dire consequences, up to infection and death.

Painkillers: Healing tests take several minutes to complete, so cannot be done in combat. However, as an action, characters can pop a dose of painkillers to provide some quick healing. Consuming a dose of painkillers immediately heals 6 hit points of damage. However, painkillers take a toll. Each dose consumed incurs a cumulative -1 penalty to all tests (but not damage rolls). A full day's rest removes the penalty.

Incapacitation and Death: A survivor reduced to zero hit points is incapacitated and must be carried. A successful healing test will restore 2d6 hit points and revive them. If left behind, they will almost certainly be killed by the infected. Survivors reduced to negative hit points die.

Experience and Advancement

Experience Points (XP): Survivors gain experience points by resolving hooks and accomplishing objectives. Killing the infected does not grant XP, though coming up with a resourceful way to kill or neutralize a large number of them can be an objective.

Resolving a hook grants 10 XP to the character, and to any other character that helped to resolve the hook. The manner in which the hook is resolved has no bearing on the XP reward. For example, Pete's hook is his wife, who was at home when everything went to hell. Pete finally manages to make his way home only to find that his wife was attacked and became infected. Attacked, Pete was forced to kill her. Though it isn't a happy ending, the hook is resolved and Pete (and his buddies) receive 10 XP each.

Once a survivor's hook is resolved, the player may opt to take a new hook, but they are not required to do so. Nor are they required to take a new hook right away. They can take a new hook whenever they're ready, but players need to work out the details with their GM. Hooks are always subject to GM approval.

Objectives award from 1 to 5 XP each for each character that contributes towards achieving the objective. A contribution can be as simple as waiting in the car with the engine running so the group can make a quick getaway.

An objective is usually meeting some immediate need. For example, one of the survivor's first objectives will probably be finding guns and ammo. Another objective could be finding a car and hotwiring it, finding food, getting medicine from the zombie filled hospital, finding safe shelter for the night, rescuing trapped survivors, getting to a radio to call for help, coming up with a clever way to kill or neutralize a lot of infected, etc.

The players will usually set their own objectives; the GM just decides if they warrant an XP reward and how much. If the GM creates a pre-planned adventure, then the GM should establish most of the objectives for the adventure.

Advancement: To advance a level, characters need to accumulate 20 XP times their current level. For example, advancing from level 1 to level 2 requires 20 XP; from level 2 to level 3 requires 40 XP, level 3 to level 4 requires 60 XP, etc. Each time a character levels, reset their XP to 0. Excess XP is retained.

Each level advanced provides the following benefits:

1) +1 Hit Point
2) Add +1 to Shooting or Physical skill, or +2 to Subterfuge, Knowledge or Communication skill
3) Every third level (3, 6, 9, 12, etc.) add +1 to STR, DEX or MIND (player's choice)

The Infected

The infection has turned once normal people, your neighbors, your friends and even some of your family, into insanely aggressive, homicidal maniacs, and they want to kill you (and probably eat you, too).

Infected: 1 HD (5 HP); AC 10; melee attack (biting, clawing, scratching, punching, etc.); Infected attacks hit automatically each round for 1 HP damage; Infected are heedless of injury, and therefore must take at least 5 HP of damage in a single attack to die; otherwise just ignore the damage; infected always act last in combat

Infected are 'fast zombies'. They run, jump, climb, leap and pull themselves up onto ledges. They are fairly listless when there isn't any stimuli (i.e. survivors), but when 'stimulated' they will rush at survivors completely heedless of pain, injury, fear or danger. They'll even run through fire or over the roof edge of a building. Infected are attracted by bright, flashing lights, loud noises and rapid movement.

Individually, infected actually aren't that dangerous, provided you're prepared. But in groups, particularly large groups, they become extremely dangerous. Note, they aren't undead zombies, so it is not necessary to make head shots to kill them. None-the-less, they ignore pain and injury, so they'll keep coming if you don't do enough damage to put them down in one attack.

Use mass combat rules for large groups of infected (say, more than 10 in an area). Multiply damage inflicted by the group by the Combat Scale multiplier. Note, infected groups inflict damage against everyone they are in melee range with.

Number in Horde	Group Damage Each Round
11-20	5
21-40	6
41-60	7
61-80	8
81-99	9
100+	10
Etc	

For example, if survivors are fighting a horde of 20 infected, and the infected are in melee range of the survivors, each character will take 5 points of damage from the infected each combat round they remain in melee contact with the infected.

Each attack against an infected group that inflicts at least 5 HP of damage kills one of the infected for each multiple of 5 damage. For example, an attack that inflicts 12 HP of damage kills 2 infected. An attack that inflicts 16 damage kills 3 infected. As infected are killed, the group's damage rating will decrease.

If the party can find a way to bottle neck the infected group, then reduce its Combat Scale appropriately. Other tactics that survivors can use to mitigate the danger of large groups of infected is to run and gun them (i.e. kiting), fire from high ground, or lure the infected into some kind of trap.

Alternatively, survivors may attempt to sneak past the infected, but the more infected there are the harder it is to get past without being spotted. And it only takes one to set the entire horde on the party. Make a DEX mod + Subterfuge test against a DC of 10 +1 for each infected in a position to possibly see the survivors.

As a final recourse, survivors can simply run away from the infected. Note, this is akin to a full on sprint, not a long distance endurance run. A survivor can only run for a number of combat rounds equal to their Strength stat (i.e. if Strength is 10, they can run for 10 rounds), at which point they will slow to ½ movement and the infected will catch up to them. Survivors will have to rest for several minutes before being able to run again. Encumbered survivors have no hope of outrunning infected.

Infection Level: Every area the survivors enter, whether a building, park, city street, sewers, whatever, will have an Infection Level ranging from 0 (completely cleared of Infected) to 10 (wall-to-wall Infected). Any safe areas or sanctuaries will have an infection level of 0, though the area immediately outside the sanctuary could have a very high infection level (think of the nice safe farmhouse surrounded by zombie hordes trying to get in).

Roll d10 equal to the area's Infection Level to determine the number of Infected in the area (i.e. Infection Level 3 means 3d10 infected in the area). If the area is open, like a park, then the Infected will spread around the area, but in a building they would be spread out in different rooms. Very large buildings can have a different Infection Level for each floor.

Sample Infection Levels:
Safehouse/Stronghold/Survivor Community = 0
Wilderness = 0 to 1
Individual House/Small Building = 0 to 1
Rural Area = 1 to 2
Small Town Streets = 1 to 3
Suburban Streets = 2 to 4
City Streets = 3 to 5
Factory/Warehouse/Sewer = 1 to 3
Park/Trainyard/Compound = 2 to 5
School/Campus = 4 to 6
Office Building = 3 to 5 per floor
Police Station = 4 to 7
Fire Station = 2 to 4
Apartment Building = 1 to 4
Mall/Shopping Center/Big Lot Store = 7 to 10
Military Base = 5 to 10
Emergency Shelter = 8 to 10
Hospital = 7 to 10 total, or 4 to 6 per floor

Running a Campaign

Day Zero: Day Zero is the intended campaign style for Rabid. The player characters are going about their daily business when they suddenly and quite unexpectedly find themselves in the middle of horrific events, just when the crisis reaches critical mass. The exact circumstances the PCs find themselves in will depend on when the GM starts the campaign. If it's during the day, then they will likely be at work. If during the night, then they'll probably be at home.

Once things start, the GM sets up the situation and then lets the players decide where to go from there. The GM's initial task will be to contrive a way for the player's characters to meet. The easiest way to do this is to simply assume all the PCs are at the same location when it hits the fan. For example, they all might be eating lunch at the same restaurant, or going to the same dentist or waiting at the same garage for their cars to be repaired.

Once the party is together the GM will have to decide what happens based on the player's actions. This will require a great deal of improvisation on the GM's part, at least initially.

The players should establish their own initial goals, and can earn XP for accomplishing their objectives, determined by the GM depending on the difficulty. For example, an immediate goal could be to get out of the office building and to the garage alive. The next goal might be to find weapons or get to a police station for help. Some players may want to act on their character's hooks, racing home to locate loved ones or friends.

Note that players don't have to type out their objectives in triplicate to the GM. It's as simple as a player saying "I get out of the building and head for my car in the parking garage." That's the goal; the GM describes what happens on the way to the garage, and then decides how much XP, if any, is warranted for accomplishing the objective.

When running the initial stage of the campaign, keep in mind that everything has gone to hell. There are infected everywhere, attacking people, eating them, screaming, fires, shooting, explosions, sirens. And the players will have to navigate all that to achieve their objectives or resolve their hooks. Also keep in mind that the police and virtually all government infrastructure is gone, shattered or overwhelmed. 911 gives an automated response telling callers to go to the nearest FEMA shelter (overrun with infected, naturally). Hospitals, police stations and fire stations are infested with rampaging zombies. The highways and roads are blocked with abandoned or wrecked cars, with infected attacking fleeing motorists in all directions. Fires burn unchecked, gas mains explode, and in the midst of all this you have looters and the criminal element taking advantage of the breakdown in law and order. And just how long will the power stay on? So, play up the chaos and confusion.

In these first few chaotic hours and days, the GM should have the survivors meet a few NPCS, most of whom will be red shirts, present only to die horrible deaths to impress upon the players on just how dire the situation is. If the players get to know a NPC a little first, so much the better for delivering the desired impact when the NPC is ripped to shreds by a horde of infected.

Eventually the players will get past the chaos of the first few days. They'll run into fewer and fewer survivors. They'll find a secure place to fort up and hold out. The pandemonium of the last few days will gradually be replaced by an eerie calm, broken only by the soft rattling breath of the infected or the occasional gun shot. At this point you may need to shift gears, providing more structured adventures. For example, the players may decide to make a run at the nearest military base to get some serious firepower, so you'd have to plan that out in greater detail.

You should also make the players describe their plan to you. Just how do they plan to get to that base. Are they driving? Where will they get the vehicles? What vehicles do they bring? Do they have enough gas? What route are they taking? Who does what when

they get there? Will their vehicle break down? Have other survivors already looted the base? Their route may be blocked, other survivors may have already claimed the base, or maybe (probably) it's overrun with infected. Their car might break down, they may run into a large group of infected, encounter other survivors who need help, etc.

Generally speaking, the better their plan, the better things should go, though there should always be at least one or two unexpected complications. If they don't have a plan, or a very poor or unrealistic plan, then introduce more complications. Hopefully they'll learn to plan things out better in the future.

A final note, you may want to consider starting the campaign in the area you and your gaming group lives. The advantage of this is that your group is familiar with the area, so it will be easier to bring things to life. Instead of your players asking you if there is a gun store nearby, they can say "I head for the Fred's Guns on Main and 4th." It can help the players establish their initial objectives, and it can make it easier for the GM to improvise and set the scene. Eventually you'll probably want to expand the campaign beyond your home town, but it can provide a useful starting point.

Land of the Infected: In this type of campaign, the infection has been ongoing for some time, and most of civilization has collapsed. The players have an established safehouse or live in a fortified community. They also have whatever weapons they want (provided they aren't too exotic; naturally ammo is still scarce). There may be some government bunkers or strongholds still. Perhaps some billionaire built a fortified hideout and hired a bunch of mercenaries to protect him/her. This is essentially a post apocalyptic setting.

In such a setting, the infected will only be one of the player's problems. Other survivors will be a greater problem, as some will be raiders, willing to attack the survivors for their weapons, ammo and food. Perhaps some people are doing more depraved things in some places. This is more of a 'humans are the real monsters' setting, and the infected are more of a natural obstacle to be overcome.

The player's motivations can be simple survival, scrounging enough food and ammo from the ruins to get by another day, or luxuries like alcohol and tobacco to trade with other survivors. Or maybe that billionaire survivor wants some rare painting/ document/book/ movie/convenience/etc. and is willing to trade a lot of food and ammo to whoever can retrieve it for him. Maybe the party hires on as guards for caravans that travel between the remaining communities. Or maybe they hear of government strongholds in the north and decide to try to reach them.

In this type of campaign, character hooks can (and probably should) be tied into more long term survival objectives or employment prospects. For example, if they're hired to retrieve a rare painting from the city art museum, then that becomes the group's hook. If they decide to head north to look for a safezone, that becomes their hook.

Ultimately, there are plenty of opportunities in such a campaign for players to either profit off the corpse of the old world, or to help rebuild it. Finally, a Day Zero campaign, if played long enough, should eventually morph into a Land of the Infected style campaign.

Quick Reference Sheet

Damage

Pistol Ammo
.22/.32 Caliber = 2d4
9mm/10mm/.38/.45/.357 = 2d6
.44 Mag/.50 Action Express = 2d8

Shotgun Shells
12 Gauge = 2d8
10 Gauge = 2d10

Rifle Ammo
5.56mm/.223 = 2d8
7.62mm/.30 = 2d10
.50 Caliber Rifle = 2d12

Melee Weapon Damage*
Light Melee Weapon – Knife, club, lead pipe, etc. = 1d6
Medium Melee Weapon – Baseball bat, machete, cricket bat = 1d8
Two-hand Melee Weapon – Samurai sword, fireaxe, etc. = 1d10
Chainsaw = 2d8 damage (running); 1d8 (off)
*Remember to apply STR mod to melee damage rolls

Fragmentation Grenade – 4d6 damage to 20' radius
Molotov Cocktail – 3d6 damage to a 10' radius; sets area on fire for 1d4+2 rounds, inflicting 2d6 damage per round

Skills

Shooting – Using any ranged weapon
Physical – Physical tasks and melee combat
Subterfuge – Sneaking about, picking locks, deception
Knowledge – Local area knowledge, how to use things
Communication – Negotiation, social interaction

Common Tests

Initiative = d20 + MIND mod; highest total acts first
Ranged weapon attacks = d20 + DEX mod + Shooting skill vs. AC
Thrown weapon attacks = d20 + DEX mod + Physical skill vs. AC
Melee combat attacks = d20 + STR mod + Physical skill vs. AC
Healing Test = d20 + MIND mod + Knowledge vs. DC 15
Sneaking = d20 + DEX mod + Subterfuge vs. DC 10+1 per infected

Modifiers

Attacker Advantage = +2 on attack roll
Defender Advantage = -2 on attack roll
Dual Wield = -2 on attack roll for each weapon
Burst Fire = +4 on attack roll
Multi-tasking = -2 on all tests
Painkillers = -1 on all tests, cumulative
Medical Kit = +2 on Healing Test
Medical Facility = +4 on Healing Test

Experience & Advancement

10 XP for resolving hook
1 to 5 XP for completing objectives
Levelx20 XP to advance to next level
+1 Hit Point on leveling
+1 to Shooting or Physical or +2 to Subterfuge, Knowledge or Communication on leveling
+1 to one stat of choice every 3 levels (3, 6, 9, etc.)

The Infected

Infected: 1 HD (5 HP); AC 10; melee attack (biting, clawing, scratching, punching, etc.)
- Infected attacks hit automatically each round for 1 HP damage
- Infected are heedless of injury, and therefore must take at least 5 HP of damage in a single attack to die; otherwise just ignore the damage
- Infected always act last in combat
- Infected move 20' each combat round; they automatically hit when they reach melee combat range

Mass Combat Damage

Number in Horde	Group Damage Each Round
11-20	5
21-40	6
41-60	7
61-80	8
81-99	9
100+	10
Etc	

Infection Levels

Roll 1d10 per Infection Level to determine the number of infected in the area (i.e. Infection Level 3 = 3d10 infected in the area). May be grouped together or spread throughout several rooms in a building.

Safehouse/Stronghold/Survivor Community = 0
Wilderness = 0 to 1
Individual House/Small Building = 0 to 1
Rural Area = 1 to 2
Small Town Streets = 1 to 3
Suburban Streets = 2 to 4
City Streets = 3 to 5
Factory/Warehouse/Sewer = 1 to 3
Park/Trainyard/Compound = 2 to 5
School/Campus = 4 to 6
Office Building = 3 to 5 per floor
Police Station = 4 to 7
Fire Station = 2 to 4
Apartment Building = 1 to 4
Mall/Shopping Center/Big Lot Store = 7 to 10
Military Base = 5 to 10
Emergency Shelter = 8 to 10
Hospital = 7 to 10 total, or 4 to 6 per floor

AoE Scatter

1d6 for direction:
1-2 = Long
3-4 = Short
5 = Right
6 = Left

2d6' for distance

Falling Damage

1d6 per 10' fallen; add +1 per die if landing on something sharp; if more than 10 damage taken in the fall make a STR mod + Physical test vs. DC 10 to avoid breaking a bone