



RULEBOOK

Players: 3-5 • Play Time: 40-60 Mins.

O. INTRODUCTION

First day, huh? No pressure. Just remember that if you mess up, patients will die. Oh, and if too many of them die they'll brand you the Dynamite Nurse and act like you're an incarnation of death. And then you'll wind up homeless in the streets. And then kids will throw medical waste at you. ...Should I go on?

Dynamite Nurse is a deck-building card game about hospitals in a fantasy world. So the "hospitals" are sort of like temples of healing. It's a bit anachronistic, but let's roll with it. Players take the roles of doctors (called "nurses" in this world, and known for wearing skimpy clothes) whose mission is to heal adventurers who have been stabbed, bludgeoned, shot, petrified, infected, poisoned, level drained, or otherwise seriously harmed while out adventuring.

If you perform well, you will become a respected doctor and cement your reputation as a great healer. This is an era of dangerous monsters, and there are countless adventurers who gather in villages and hurl themselves at dungeons on the outskirts of civilization. So long as dungeoneering remains a popular pastime, there will always be a steady stream of patients, and you need to smoothly get them to the hospital, treat them, and send them on their way. If you can't, your patients will get worse, your hospital will run out of beds, and things will generally enter a death spiral.

Not only that, but even if you stay on top of treating patients, those who resent your talents might sabotage you, and patients can continue getting worse as you search for a way to cure them. In this fantasy world the medical profession is kind of messed up that way.

In any case, please do your best to not have any patients die. You'll probably have to ask other skilled nurses for help. If too many of your patients die, you'll no doubt end up getting the infamous Dynamite Nurse moniker and be feared by all until the end of time, or at least until the your lawyer can deal with all the malpractice suits. There are clerics who can use magic to resurrect deceased patients if it comes to that, but come on, we're not made of money here.





illustration: 西 E 田

WHAT'S A DECK-BUILDING GAME?

A deck-building game is a type of card game that has elements that differ from both traditional card games and a TCGs (trading card games). At the start of the game, each player starts with the same set of cards. That becomes your personal deck. On your turn you draw cards from your deck to add them to your hand, play cards from your hand (thereby activating the cards' effects), and put the cards you've used into your discard pile. When your deck runs out, you shuffle your discard pile and it becomes a new deck.

Pretty standard so far, right? Well here's the twist: during the game, you can buy cards from a central area, which then go into your discard pile, thus increasing the size of your deck and the variety of cards you can use. As you gain more cards, you will be able to do more in the game, and speed down the road to victory.

Players are free to buy whichever cards they can afford. While each player starts with the same cards, over the course of several turns, you'll will wind up with a unique deck.

Deck-building games let you pursue your own unique strategy as you build your deck, each player has their own deck and discard pile, and they allow a group of players to play with just a single copy of the game. So that's pretty cool.

Note: If you see any unfamiliar terms while reading these rules, you can look them up in section **12. Glossary of Game Terms** near the end of this rulebook (specifically, page 27).

I. GAME CONTENTS

Here is your standard nurse's kit. It contains a stethoscope, scalpels, alcohol, cotton swabs, bandages, needle and thread, and a flask of whiskey. You will need a drink, and sooner than you think.

This game includes the following parts:

• 214 Cards (Including Reference Cards)

- Patient Cards (40)
- Action Cards (132)
- Nurse Cards (23)
- Kill Mark Cards (15)
- Dynamite Nurse Card (1)
- Reference Cards (3)

• 30 Markers (6 Each of 5 Colors)

• 1 Rulebook



2. CARDS AND MARKERS

So, uh, why does your business card say “You can provide an additional treatment or make an additional purchase.”? What does that even mean? And what’s a “COMTA”? And why are you looking at me like that?

What follows is an explanation of the different types of cards in the game and how to understand and use the data on them. Refer to the rules that follow if you need to know more. Also, note that the rules refer to cards has not only by their names, but also by types and sub-types (e.g., Action Card, Treatment Card, etc.).

Some cards have flavor text in italics. It’s there to amuse you and maybe immerse you in the world of Dynamite Nurse or something. In any case it’s just flavor text and doesn’t affect the rules or anything.

When you first read the rules, do a light skim. Once you finish going through it that way, or whenever you find it necessary while reading, you can come back to this section to understand how to read each card in the game.

2-1. Patient Cards (40)

Alright, we’ve got syringes, scalpels, an EKG monitor, rubber gloves, an IV drip, disinfectant... But something’s missing... Oh, right. The patient!

These cards represent patients who got hurt by monsters in dungeons. Patients have a Condition (Sick, Wounded, Cursed, or Poisoned) and a Severity (a number representing how bad that condition is). Patient Cards can also have rules on them, creating effects that activate when they’re transported (see **7. Transportation Phase**) or admitted to your hospital (see **8. Admission Phase**).

Patient cards have two sides; the front represents their state when brought from the dungeon, while the back is for when they’re in Critical Condition.

Players can only treat patients they’ve admitted to their own Hospitals. When you treat a patient and they have a full recovery, you gain the patient card as Victory Points (VP), getting you that much closer to winning. On the other hand, if a patient isn’t admitted during transport, or is admitted but not treated, they can wind up in Critical Condition. If a patient is already in critical condition and something would make them enter critical condition a second time, the patient dies, and the responsible player must take a Kill Mark Card. Kill Marks harm your reputation, and since they give you a penalty at the end of the game, they make it harder to win.



1. Card Name

This card's name is "Wounded Patient."

2. Card Type (and Sub-Type)

This card's sub-type is "Emergency Case."

3. Severity

When the player operates on the patient, they must spend this many Treatment Points to treat them.

4. Victory Points (VP)

A card's Victory Point (VP) value is listed in the upper right corner inside the icon with a red star over a black bomb. At the end of the game, each player gets VP from the patient cards they've acquired.

5. Card Rules

For an Emergency Case card, the rules listed take effect when transporting the patient.



1. Card Name

2. Card Type (and Sub-Type)

3. Severity

The Critical Condition side will have a higher Severity value. Some patient cards also have a second, smaller Severity icon in parentheses. Use the value in the larger icon when doing Operating, and the smaller one when doing Care.

4. Victory Points (VP)

5. Card Rules

For an Emergency Case card, the rules listed take effect when admitting the patient.

6. Critical Condition

This indicates that the patient is in critical condition. The illustration is in red.



Front

(Patient is not in Critical Condition)



Back

(Patient is in Critical Condition, and also freaking out because a sapient treasure chest just bit her and it's apparently got some kind of venom that's turning her skin purple)



2-2. Action Cards (132)

This procedure combines cutting-edge medical technology with time-tested alchemical tinctures, and has a relatively low rate of making patients grow extra eyes.

The main cards that players use to treat patients are called "Action Cards." During play, on your turn you draw cards from your own deck to add them to your hand, and play cards from your hand to activate the cards' effects.

Each player starts the game with 8 Action Cards (plus one Nurse Card) for their starting deck. During the game, players can buy cards from the Town and sometimes acquire extra cards as a bonus, thereby growing their decks.

Action Cards are the heart of the game, and their effects can allow players to buy new cards, treat patients, and otherwise influence the game in useful ways.

There are four sub-types of Action Cards: **Examination**, **Treatment**, **Duty**, and **Event**.



Examination Card:
Orange Frame



Treatment Card:
Pink Frame



Duty Card:
Blue Frame



Event Card:
Purple Frame



1. Card Name

Cards with a red star by the name are part of your starting deck (see 4. Game Setup).

2. Card Type (and Sub-Type)

The sub-types for Action Cards are Examination, Treatment, Duty, and Event. The colors of the cards' frames will vary according to the sub-type.

3. Buy Cost (Gold)

In order to buy this card from the Town, you will have to pay this many Gold.

4. Victory Points (VP)

There are some Action Cards that provide Victory Points. If you have one of these cards (in your deck, discard pile, hospital, or hand) at the end of the game, it counts toward your Victory Point total. There are also some cards that give a VP penalty.

5. Bonus Points

These show how many Treatment Points and/or Gold the player gains from playing the card.



Example of
Treatment Points



Example of
Gold

6. Card Rules

The rules listed take effect when you play the card. These effects continue until the end of the phase when you play the card.



Back (Normal)

2-3. Nurse Cards (23)

So you want to be a nurse? First, you're going to have to learn to show more cleavage than that. The medical profession has very high standards for its fanservice.

These are cards that represent physicians (in this game's world both doctors and their assistants are called "nurses"), as well as paramedics and such. The game treats them like Action Cards, but they look a little different, and you acquire them in a different way.

By playing Nurse Cards, players can help patients who are en route to the hospital (note that you can't treat them this way; more on that later), treat patients that have been admitted to your hospital, or make purchases. Each player's starting deck includes 1 Nurse Card, and you can think of this one as representing the player themselves.

Over the course of the game players can buy (hire) Nurse Cards, thereby increasing the number of Nurse Cards in their decks. This will often let you perform multiple operations and purchases in a turn.

1. Card Name

A red star mark by the card's name means it's one of the starting cards. See 4. Game Setup for more details.

2. Card Type (and Sub-Type)

The two sub-types for nurses are Doctor and Paramedic.

3. Victory Points (VP)

Most Nurse Cards have a Victory Point value. If you have one of these cards at the end of the game, it counts towards your Victory Point total. There are also some cards that give a VP penalty or provide zero VP.



Front



Back

4. Card Rules

The rules listed take effect when you play the card. These effects continue until the end of the phase in which you play the card. However, rules that say “End of Game:” in red activate at the end of the game.

5. Starting Nurse Symbol

There are 5 Nurse Cards that can be part of a player’s starting deck, and these will have this symbol in the lower right. Make sure you get the Duty Markers with the same color.



illustration: かわく

2-4. Kill Mark Cards (15)

Great work, Medina. You know, I hear if you kill 6 patients you get a free sandwich.

If a patient under a player's care dies, the player must take one of these cards. At the end of the game, each player takes Victory Point penalties from their Kill Mark Cards, based on the number total number of Kill Mark Cards they have. The back of each Kill Mark Card has a reference for the VP penalties. We sometimes call them simply "Kill Marks," and certain cards will change the number of Kill Marks you effectively have.

If the Town runs out of Kill Mark Cards, the game ends immediately.

1. Card Name

2. Card Number

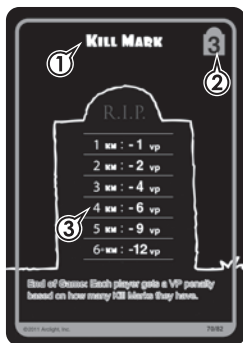
These cards are numbered from 1 to 15. Set them up in descending order; during play this makes it easy to see how many are left.

3. Scoring Chart

At the end of the game, each player takes Victory Point penalties from their Kill Mark Cards. The amount varies depending on how many of these cards you have. This table is a guide to the penalty amounts. You'll notice that the penalties top out at -12 VP for 6 Kill Marks; if you have 7 or more Kill Marks, the penalty doesn't go above -12.



Front



Back

2-5. Dynamite Nurse Card (1)

There are in fact some very specific, limited uses for nitroglycerine in medicine, but none of them involve blasting caps.

Any time a player newly becomes the one with the most Kill Mark Cards, they must take the Dynamite Nurse card. There is only one Dynamite Nurse card, so it can move from player to player during the game. When rules refer to "the Dynamite Nurse," they mean the player who currently has this card.

At the end of the game this card counts as two Kill Mark Cards, so it puts whoever is stuck with it at the end of the game is at a serious disadvantage.

1. Card Name

2. Card Rules

The rules indicate that whoever has this card at the end of the game effectively gets 2 additional Kill Mark Cards.



Dynamite Nurse Card
(Same Front and Back)

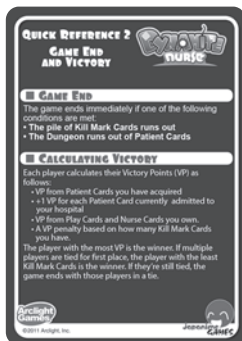
2-6. Reference Cards (3)

Better hit the books, missy. Here's Raistminster the Grey's Anatomy to get you started.

These provide a quick reference to the steps in a player's turn and the calculations you make at the end of the game. We recommend that beginners keep one of these cards in front of them as they play. You do not actually use these cards to play. There are only 3 of them, so if you play with 4 or more beginning players you should share between neighbors.



Front



Back

2-7. Duty Markers (30)

Listen to me, Calypso. Patients are not cookies. We do not lick them to claim them. Not anymore.

During the game you place these markers on Patient Cards in transport to indicate who is in charge of treating what patient. There are 6 markers for each player. Remember that you cannot select any more patients than that at a time.



Players can only treat patients they're in charge of. Also, a player only takes a Kill Mark Card if a patient dies while under their care. When a Patient Card leaves the scene, whether from dying or from being successfully treated, the Duty Marker returns to the corresponding player's stock of unused markers.

3. GAME END AND VICTORY

Look, can we finish this up? You're the Dynamite Nurse and probably the loser, and Nikki and I have a golf game to get to.

3-1. Game End

The game will immediately end if one of the conditions listed below is met. Once the game ends, calculate Victory Points and determine a winner as described in the next section.

- The pile of Kill Mark Cards runs out.
- The Dungeon runs out of Patient Cards.

3-2. Calculating Victory

Once the game is over, each player calculates and announces their final Victory Point count.

- VP from Patient Cards you have acquired
- +1 VP for each Patient Card currently admitted to your hospital
- VP from Play Cards and Nurse Cards you own.
- A VP penalty based on how many Kill Mark Cards you have.

The player with the most VP is the winner. If multiple players are tied for first place, the player with the least Kill Mark Cards is the winner. If they're still tied, the game ends with those players in a tie.

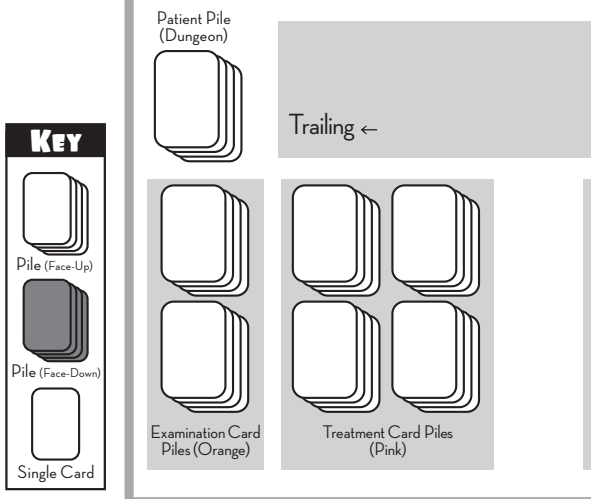
4. GAME SETUP

Look, I had everything just so in the operating room, and then you messed it up. It is therefore your fault that Rowena Hammerhand has a rubber duck sewn into her abdominal cavity!

Before you start playing, you will need to set up as described below. However, when you first read the rules, do a light skim. Refer to the Town Diagram and Player Hospital Diagram as needed. Also, you should read as you set the game up.

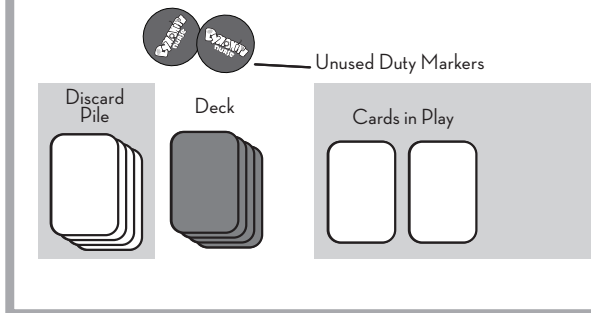
- The players sit around the table. The middle of the table is a shared space called the “Town.”
- Divide the cards up by type (Patient, Action, Nurse, Kill Mark, and Dynamite Nurse), and set them out in piles face-up.
- Put the Patient Cards with their Critical Condition sides up and shuffle them.
- Take the 5 starting nurse cards (the ones with a red star next to the card’s name), and give 1 to each player. If you are playing with less than 5 players, put the leftover starting deck Nurse Cards back in the box. Put the remaining Nurse Cards face-down and shuffle them.
- Set out the Action Cards in face-up piles, giving each named type of card its own pile, and grouping the piles together by color. The exception is the Event cards. Take all of them together, shuffle them, and set them out face-up in a single pile.
- Each player takes the 6 Duty Markers of the color that matches their starting Nurse Card, and puts the markers in front of them. The area in front of a player, where they put their own cards, is called their “Hospital.” Return any unused colors of Duty Markers to the box.
- Each player gets 5 ★Examination cards and 3 ★Simple Surgery cards. With these cards and the nurse card, each player has a starting deck of 9 cards; each player shuffles their deck and puts it in their Hospital face-down.
- Put any leftover ★Examination and ★Simple Surgery cards back in the box.

TOWN SETUP DIAGRAM (START C)



- Set up piles of each card in the Town as shown in the diagram above. Leave the Nurse Cards face-down. Once you set the Patient Cards down, turn them over so that the Critical Condition side is facing down. Set the Kill Mark Cards up in order (so that the 15 card is on top, followed by 14, 13, etc.). If you are playing with 3 players, put the last 3 Kill Mark Cards (13, 14, and 15) back in the box, and set up the remaining ones so that #12 is on the top.

PLAYER'S HOSPITAL SETUP DIAGRAM

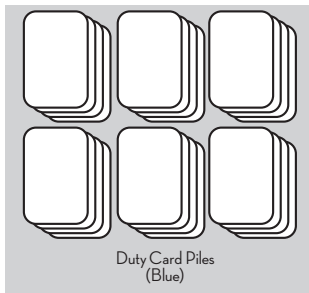


RT OF GAME)

Ambulances
(Patients in Transport)

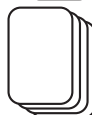
→ Leading

Graveyard
(Place dead
patients here)



Nurse Pile
(Green)

Kill Mark
Pile



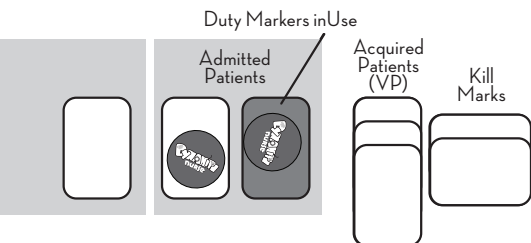
Event Pile
(Purple)

Dynamite
Nurse Card

- Each player draws 4 cards from the top of their deck to be their starting hand. Each player's Hospital should be set up as in the diagram below. A player's hand is not considered to be in their Hospital. During play, players should keep those cards in their hands.

- The player who most recently went to the hospital goes first. Or use rock-paper-scissors or whatever else works. You've now finished setting up to play. From here, the first player takes their first turn.

AM (DURING PLAY)



5. PLAYING THE GAME

Oh no miss, when I said “Adventurers are without exception idiots who throw their lives away in droves to get a little gold” I wasn’t talking about you. You’re one of the special exceptions I wasn’t talking about.

Each player goes through the 4 phases described below during their turn. Once the Ending Phase is done, the player to that player’s left starts their turn, beginning with the Main Phase. This continues until the game ends.

See the rules that follow for more details on each phase.

5-1. Main Phase

During your Main Phase, you can play cards from your hand. You have to play cards one at a time, but you can play as many cards from your hand as you want during this phase.

Also, before or after playing cards, you can do Treatment (see 6-4) or Buy (6-5) once.

See **6. Main Phase** for more details.

Once you’ve done everything you want to during your Main Phase, you should declare that you’re done. Once you make that declaration, you move on to the Transportation Phase.

5-2. Transportation Phase

During this phase, the current player transports patients if they can. If transport is not possible, patients in transport will enter Critical Condition.

See **7. Transportation Phase** for more details.

Once that’s done, you move on to the Admission Phase.

5-3. Admission Phase

During this phase, you can select one or more of the Patient Cards currently in transport that have one of your Duty Markers on them to take and admit to your hospital as a patient.

You must then check how many patients you have against how many beds your hospital has. If you have too many, one or more patients will wind up in Critical Condition.

See **8. Admission Phase** for more details.

Once that’s done, you move on to the Cleanup Phase.

5-4. Cleanup Phase

During this phase, you discard all of the cards you played and your hand as well. You can keep one card from your hand if you want, but you don't have to. Put all of the discarded cards into your discard pile face-up.

After that, you draw 4 cards from the top of your deck to refill your hand. You still draw 4 cards even if you kept a card from before.

Once you've finished drawing cards, the Cleanup Phase ends, and the player to your left begins their turn.

6. MAIN PHASE

I don't get it. The operation was a success but she still seems to be in pain. Oh, and unrelated to that, has anyone seen my keys? ...Oh.

6-1. Playing Cards

During your Main Phase, you can play as many cards from your hand as you wish. When you play a card, put it in front of you (in your Hospital). When you play a card this way, the Card Rules in the text box take effect immediately.

In this game, a player's deck consists only of Action Cards and Nurse Cards. Note that Patient Cards, Kill Mark Cards, and the Dynamite Nurse Card do not go into your deck.

6-2. Bonus Points

Aside from the Card Rules, many Action Cards have icons indicating that they provide Bonus Points. When you play a card that has one or more of these icons, you gain those Bonus Points immediately upon playing it. There are two types of Bonus Points: **Treatment Points** and **Gold**.

When you gain Bonus Points this way, you can spend them during your Main Phase.

However, you can only use Bonus Points on the Main Phase of the turn in which you acquired them. Once you declare your Main Phase is over, you lose any leftover Bonus Points. They do not carry over to future turns.



Example of Treatment Points



Example of Gold

6-3. Treatment and Purchases

During your Main Phase you can either treat one patient or make one purchase. This is separate from playing cards, though you can do it before or after playing cards.

Treating a patient requires spending Treatment Points (see 6-4), while making a purchase requires spending Gold (see 6-5).

The effect of playing a card may allow you to treat additional patients or make additional purchases. This means that you can sometimes perform 2 or more treatments, make 2 or more purchases, or do both in the same turn.

6-4. Treatment

Treatment is when you give medical attention to patients you've admitted to your hospital. Remember that you cannot treat patients who are in ambulances. There are two types of Treatment: **Operations** and **Care**.

To provide treatment, you must select one of your admitted patients and pay Treatment Points equal to the amount listed in the Severity icon on the Patient Card.

6-4-1. Operation

The front of each Patient Card has a single Severity icon in its text box. When you do treat a face-up patient card (a patient not in Critical Condition), you must pay exactly as many Treatment Points as are listed here. If you do not have enough Treatment Points, you cannot perform the operation. If you do spend enough Treatment Points, the operation is successful, and the patient is healed and discharged.

When a patient card is face-down (a patient who is in Critical Condition), it may have two Severity icons, a large and a small in parentheses. The large icon is the cost in Treatment Points to fully heal the patient. If you do spend enough Treatment Points, you are successful, and the patient is healed and discharged. The smaller icon is for Care (see 6-4-3).

Fully healing a patient this way is called an Operation.

6-4-2. Healing and Acquiring Patients

When you fully heal and discharge a patient, you take your Duty Marker off of the patient and return it to your stock of unused markers. You then acquire the Patient Card. Be careful not to let these patient cards get mixed up with the ones you've admitted to your hospital (the ones that have Duty Markers on them).

Each Patient Card has a Victory Point value in the upper right. At the end of the game, each player gets Victory Points (VP) from the patient cards they've acquired.

6-4-3. Care

Most patients have a second, smaller Severity icon when they're in Critical Condition. When providing treatment, you can opt to spend as many Treatment Points as are listed in the small icon. This is called "Care," which is different from performing an Operation. When you provide Care, the patient doesn't recover fully, and is not discharged, so you don't acquire the Patient Card as VP. Instead, you can turn the Patient Card face-up, getting them out of Critical Condition.

Performing Care on a Patient Card still counts as providing treatment, and thus you can normally only do it once in a turn.

6-4-4. Acquiring Nurses

When you successfully perform an Operation and acquire a Patient Card, take one card of your choice from the Nurse pile and put it face-up on your discard pile. We call this "acquiring a nurse." Acquiring a nurse is something you do in addition to acquiring a Patient Card from an Operation.

However, you cannot acquire a nurse if the Nurse pile has run out.

Also, if you acquire a Patient Card through means other than treating them, you do not also get a Nurse.



illustration: イシガー

6-5. Purchase

When you purchase a card, you take it from one of the piles in the Town and move it to your discard pile. The purchased card goes to your discard pile, and when your deck runs out, you shuffle your discard pile into a new deck. When the time comes, you'll draw cards from that new deck. Purchasing cards thus adds them to your deck, and lets you play them later on.

6-5-1. Buyable Cards

On your turn you can buy one of the Action Cards from the Town. You can't buy Patient Cards, Nurse Card, Kill Mark Cards, or the Dynamite Nurse Card.

6-5-2. How to Make Purchase

In order to make a purchase, you must first declare which pile you're making a purchase from, and then pay as many Gold as its cost. The cost of a card is the number in the gold coin icon in the upper right.

You then take the top card from the selected pile and move it to your discard pile. With the exception of Event Cards, each pile of Play Cards is made up of nothing but the same card. The Event Cards pile has several different types of cards shuffled together. When you buy one of these Event Cards, you always have to buy the top card on the pile. Also, there is a special rule for Event Cards (see 6-5-3) that lets you check the second card from the top, albeit with an opportunity cost.

Each Purchase action only lets you buy one card. If you want to buy 2 cards in the same phase, you have to be able to do the Purchase action twice through another card's effect.

6-5-3. Buying Event Cards

Event Cards are unique in that you can buy the card underneath the top card of the pile. However, if you do, you can't look at it before you buy it.

When you declare that you're going to do this, take the top card and put it on the bottom of the Event Card pile. You then purchase the newly revealed card.

After declaring that you want to buy the second card, you don't have to actually make the purchase. It's also possible that you might not have enough Gold. However, once you reveal the second card, it counts as a Purchase action regardless of whether or not you successfully complete it.

7. TRANSPORTATION PHASE

Another load of idiots who went to the Tomb of Elemental Horrors? I'll take the ones that the kobolds tore up, Ginger, you get the ones who ran into a gelatinous cube, and for the ones who made it to the lich... go get a dustpan.

During this phase, you Transport patients and assign duties. When you Transport, you take wounded adventurers from the Dungeon (the pile of Patient Cards), put them in an ambulance. Assigning duties means you decide which player's Hospital one of the patients in transport is going to.

7-1. Transport

During your turn's Transportation Phase, you first take the Patient Card from the top of the Dungeon. If the Dungeon runs out of cards, the game ends immediately.

If the game doesn't end, move that Patient Card to an ambulance. If there is even one Patient Card in the ambulances already, put the new card in the furthest location from the Dungeon. If there are multiple Patient Cards, arrange them in a row. This time you will arrange them in order starting with the closest to the Dungeon.

The patient in the ambulance furthest from the Dungeon is called the "leading patient," while the patient closest to the Dungeon is the "trailing patient."

7-2. Assigning Duty

Once Transportation is done, select a player to take charge of that patient; you can select yourself if you wish. However, you cannot select a player who has no unused Duty Markers left.

The selected player takes one of their unused Duty Markers and puts it on top of the Patient Card.

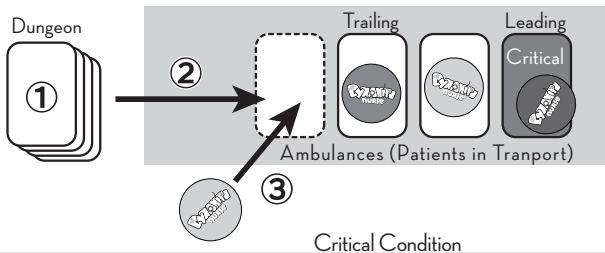
7-3. Deterioration from Transportation

There is a limit to the number of ambulances. That means there is an upper limit to the number of Patient Cards that can go into the ambulances. The limit is equal to the number of players in the game.

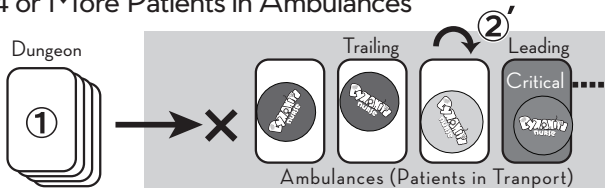
Regardless of the rules in 7-1 and 7-2, if the number of Patient Cards in the ambulances reaches the limit, you do not complete transportation. Instead, one of the patients in the ambulances enters Critical Condition.

HOW TO TRANSPORT (4 PLAYERS)

3 or Fewer Patients in Ambulances



4 or More Patients in Ambulances



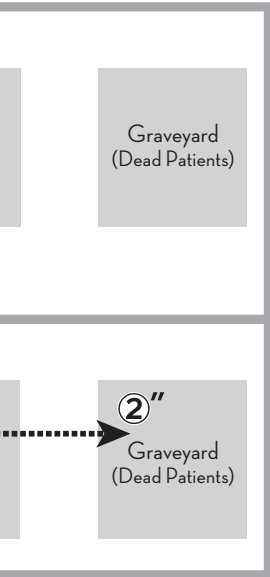
7-4. Critical Condition Prioritization

When you are required to have a patient enter Critical Condition in transport, first select a patient is not already in Critical Condition. If there isn't one, you can select one who is already in Critical Condition. In either case, select the leading patient, or the eligible patient who's the closest to the leading patient.

See **10. Critical Condition and Death** for the rules for when a patient enters Critical Condition.

7-5. Selecting and Transporting Cards

There are cases where a card effect will let you transport a patient from the Dungeon. In that case, it still works as explained above.



1. Take the top Patient Card from the Dungeon.
2. Place that card in the last place in the ambulances.
3. Place an unused Duty Marker (anyone's, as long as it's unused).

1. If you are unable to place the patient in an ambulance:

2. Instead, a patient in transport winds up in Critical Condition.

The non-Critical patient in or closest to the leading patient position winds up in Critical Condition (2').

If all of the patients in transport are in Critical Condition, the leading patient dies and goes to the Graveyard (2''). The Duty Marker goes back to its owner, and that player takes a Kill Mark Card.

8. ADMISSION PHASE

Welcome to our little hospital! We have a surgery scheduled for you and everything, and then you should be right as rain. Well, I mean, you are going to lose that leg, but that's your fault for getting it full of basilisk venom. Anyway, sweet dreams!

During your Admission Phase, you can select one or more Patient Cards in the ambulances (patients currently in transport) that have your Duty Markers on them and move them to your Hospital. Since you can't treat a patient who's in transport, you need to get them into your Hospital in order to heal them and acquire the card.

Patients can also enter Critical Condition during the Admission Phase in some cases.

8-1. Admission

During your Admission Phase, you can select any number of Patient Cards from the ambulances that have one of your Duty Markers on them, and move them to your Hospital. This is called "admitting patients." You are not required to do this. However, you cannot admit a patient that has another player's Duty Marker on the card.

When you admit a Patient Card, move up any cards after it closer to the Dungeon to fill the space.

8-2. Deterioration of Admitted Patients

Once you're done with admissions (whether or not you actually admitted a patient), you have to check to see if any of the patients in your hospital wind up in Critical Condition. Think of each player's Hospital as having 2 beds. It's at this time that if you have more patients than beds (i.e., 3 or more Patient Cards, not including those you've acquired as Victory Points of course), some of your admitted patients wind up in Critical Condition.

The number of patients who enter Critical Condition is equal to the amount by which you've exceeded the number of beds you have. For example, if you've admitted 4 patients, 2 of them will end up in Critical Condition. You can choose which of your patients are affected, but you cannot have the same patient be affected more than once this way.

See **10. Critical Condition and Death** for the rules for when a patient enters Critical Condition.

9. CARDS RUNNING OUT

You'd think nurse uniforms would be cheaper considering how little fabric they use...

Over the course of the game, both the players' decks and the card piles in the Town will run out. When that happens, handle it as follows.

9-1. Exhausting and Rebuilding Your Deck

When your deck runs out, leave it as it is. However, if you need to draw 1 or more cards when your deck is exhausted, you then must rebuild your deck.

To rebuild your deck, take your current discard pile, shuffle it, and set it in your Hospital as your new deck. If you need to draw more cards than are currently left in your deck, draw as many as you can, rebuild your deck, and then draw the rest.

When rebuilding your deck, be careful not to mix in cards that you've played but not yet moved to your discard pile. Cards that you play during your turn don't go to your discard pile until your Cleanup Phase.

9-2. Running Out of Action Cards/Nurses

When a pile of Action Cards in the Town or the pile of Nurse Cards runs out, you don't do anything. When one of these piles has run out, you cannot buy/acquire any more of that type of card. However, it is possible for cards to be returned to the Town, thus reviving one of the card piles. If a card pile is recreated this way, players can again buy/acquire them.

9-3. Running out of Patient/Kill Mark Cards

If the pile of Patient Cards or the pile of Kill Mark Cards runs out, the game ends immediately. See **3. Game End and Victory** for more details.

9-4. Return to the Town

In some cases, the rules on a card will call for returning a particular card to the Town. When that happens, you must take the target card and put it back to the pile it came from. The majority of the card piles are made up of copies of the same card, so it doesn't matter where in the pile you put them. However, that's not true for Nurse Cards and Event Cards.

When you return a Nurse Card to the Village, put it at the bottom of the Nurse Card pile. Likewise, when you return an Event Card to the Village, put it at the bottom of the Event Card pile.

The pile of Nurse Cards starts out face-down. Players are not allowed to look at this pile.

The pile of Event Cards meanwhile is face-up. However, apart from looking at the exposed top card, players are not allowed to examine the Event Card pile.

For this reason, when you return a Nurse Card or Event Card to the Town, do it in such a way that other players don't get to see it.

10. WORSENING CONDITION AND DEATH

Never admit that you did something wrong. Unless the person you're talking to is dead. No wait, magic is totally a thing around here, so not even then.

Regardless of how it happens, when a Patient Card is in Critical Condition, you turn the card face-down. If there is a Duty Marker on the card, it remains after you turn the card over. However, if a Patient Card is already in Critical Condition and something would make that happen a second time, that patient dies instead.

10-1. Patient Deaths and Kill Marks

When a patient dies, immediately move the card to the Town's graveyard. The Duty Marker on the card goes back to its owner's Hospital. The player then gets a Kill Mark Card from the Town, and places it in their Hospital.

If a player takes the last Kill Mark Card, the game immediately ends. Kill Mark Cards have rules on them. When the game ends, each player resolves the effects of any Kill Mark Cards they have.

10-2. The Dynamite Nurse Card

The Dynamite Nurse card starts out in the Town. However, any time a player has more Kill Marks than any other player, the Dynamite Nurse card moves to their Hospital.

That means that the first player to get a Kill Mark also gets the Dynamite Nurse in their Hospital. The next player to get a single Kill Mark does not get the Dynamite Nurse card, but if a player then gets 2 Kill Marks, the Dynamite Nurse card moves to their Hospital.

If multiple players get Kill Marks at the same time, the first qualifying player clockwise from the player whose turn it is gets the Dynamite Nurse card.

10-3. Dynamite Nurse and Card Rules

The actual rules on the Dynamite Nurse card take effect when the game ends, at which point that player could get kind of hosed. Up until then whoever currently has the card is called the "Dynamite Nurse," and having the title means that several Action Cards will work better for you.

11. RULE PRECEDENCE

“First do no harm”? How about “First, Calypso’s gotta get paid”? Get your priorities in order!

When the rules of a specific card contradict the rules in this rulebook, the card’s rules take precedence.

12. GLOSSARY OF GAME TERMS

Let me explain something to you. The main reason our entire profession exists is because healing magic is outrageously expensive. We are the lowest bidder. Embrace it and you’ll be happier.

The rules and cards in this game use certain special terms, and herein you’ll find descriptions of those.

Acquire: When you do an Operation and make a patient recover, you acquire the Patient Card. At that time, you also acquire a card from the top of the Nurse pile. Put Patient Cards you acquire in your Hospital to count towards your Victory Points, and put Nurse Cards you acquire in your discard pile, as though you had bought them.

Admit: During your Admission Phase, you can select a Patient Card in the ambulances (a patient currently in transport) and move them to your Hospital, which is called “admitting” a patient. Players can only admit their own charges. Keep the Duty Marker on the card even after you admit the patient.

Ambulances: The space to the side of the Dungeon is called the ambulances. Think of them as the set of carts frantically trying to get patients to hospitals. During each player’s Transportation Phase, the player takes the Patient Card from the top of the Dungeon and places it here. This is called “transporting.” Cards in the ambulances are Patient Cards in transit.

Bonus Points: Most Action Cards provide Bonus Points. These are either Gold (which you use to buy cards) or Treatment Points (which you use to treat patients). When you play a card that gives you Bonus Points, you can think of having them in a wallet than you can then potentially spend from during your turn. However, in a normal turn you can only either treat one patient or buy one card, and any unspent points are lost at the end of your turn.

Care: Some patients have a second Severity value when they’re in Critical Condition, which has a smaller icon and is in parentheses. Instead of an Operation, you can do Care by paying that amount, and it gets the patient out of Critical Condition.

Charges: Your “charges” are Patient Cards that have one of your Duty Markers on them. You can only admit your own charges into your Hospital. If one of your charges dies or if you heal and acquire them, you return the Duty Marker to your pool of unused Duty Markers.

Critical Condition: Patient cards have two states: normal and Critical Condition. You indicate a patient is in Critical Condition by having the side with the picture in red that says “Critical Condition” on it. Patients will enter Critical Condition under certain situations described in the rules (usually when areas become too crowded) and cause by certain cards. If a patient is already in Critical Condition and something would put them in Critical Condition again, they die, which in turn means the patient card goes to the graveyard, and the player in charge of them gets a Kill Mark.

Deck: When setting up the game, each player takes the 9 cards in their Hospital and shuffles them into a pile that we call their “deck.” The initial 9-card deck is the “starting deck.” Players are not allowed to look at any player’s decks during the game. Also note that for this game a “deck” is distinct from a “pile” (see below).

Discard Pile: The area where you place the cards you discard is called your “discard pile.” Put cards into your discard pile face-up. The contents of players’ discard piles are public information, and anyone can check them. The order of cards in the discard pile does not matter.

Discard: Moving a card from your hand, from being played, from your Hospital, etc. to the discard pile is called “discarding” it.

Draw: When you take a card from your own deck and add it to your hand, it is called “drawing” a card. If there aren’t enough cards to draw as many as you’re supposed to, you then rebuild your deck (see 9-1).

Dungeon: The pile of Patient Cards in the Town is called the “Dungeon.”

Duty Marker: Each player has a set of 6 of these cardstock tokens in a particular color, which matches their starting Nurse card. Each time you transport a patient, you put a Duty Marker on them, which can come from any player who has an unused one available.

Graveyard: When a patient dies, regardless of the reason, you move the card to the Village’s graveyard. The order of cards in the graveyard does not matter. Also, players are free to check cards in the graveyard if they wish.

Hand: When a player draws cards from their deck, those cards automatically become part of their hand. You can only play cards from your hand. You may not show the contents of your hand to other players, and you are not allowed to peek at other players’ hands. Also, note that your hand is not considered to be a part of your Hospital.

Hospital: The area in front of a player is called their “Hospital.” A player’s Hospital contains their deck, discard pile, cards they’ve played, patients they’ve admitted, Patient Cards they’ve acquired, Kill Mark Cards they’ve gotten, the Dynamite Nurse card if they’ve wound up with that, and any unused Duty Markers. A player’s hand is not considered to be part of their Hospital.

In Play: When you play a card, it's considered to be "in play," and you put it down in your Hospital. When a card is in play, you gain its effects. During your Ending Phase, you move all of the cards that were in play to your discard pile, and you lose any effects they had.

Operation: The main type of Treatment (the other being Care). If you can pay as many Treatment Points as the patient's Severity, they will be fully healed, and you can acquire the Patient Card.

Phase: Each time a player takes a turn, they progress through four "phases," the Main Phase, Transportation Phase, Admission Phase, and Cleanup Phase.

Pile: When setting up the game, the cards that go in the Town are sorted into several "piles" according to their varieties and types. All of these are considered piles, with the exception of the single Dynamite Nurse card. However, the Nurse Pile and Event Pile are different from the others in that they contain multiple varieties of cards instead of being a stack of identical cards. Even if a pile runs out, the space for it remains. Also, note that with the exception of the top card of the Nurse Pile, players are not allowed to look at the contents of these piles.

Play: Playing a card means selecting one from your hand and putting it in front of you to get its effect. When you play a card, the rules listed on it take effect. When you play a card that provides Bonus Points, you gain the Treatment Points or Gold upon playing it. However, you must play cards separately, one at a time, and finish resolving each card's effect before playing another one. When it's your turn, you do not have to play all of the cards in your hands, and in fact you don't actually have to play any cards if you don't want to. Also cards that you play do not go into your discard pile until your Cleanup Phase.

Remove a Card: When you take a card from the Town or a player's Hospital and discard it, scrap it, or move it somewhere else such as a player's hand or deck, this is called "removing a card."

Return to the Town: When the game calls for returning a card to the town, you place the card in the corresponding card pile in the Town. If there currently isn't a pile for that type of card, the card you're returning becomes the basis of a new pile of that type. When you return an Event or Nurse Card, you add it face-down to the bottom of the pile of that type of card.

Scrap: When the rules tell you to "scrap" a card, that means you put it in the game's box. Once you do this, you will not use the card again for the rest of the game.

Transport: During the Transportation Phase, you take the Patient Card from the top of the Dungeon and place it in the ambulance cart area, which we call "transporting" a patient. However, if there are already as many or more patients in the cart than the number of players, instead of placing the card, one or more of the patients in the ambulances will end up in Critical Condition.

Treatment: This is when a player spends Treatment Points to give medical attention to a Patient Card. Remember that you cannot treat patients who are in transit (in the ambulances). A player can operate on patients they've admitted to their own Hospital. There are two types of Treatment: Operations and Care. In either case, providing Treatment requires spending Treatment Points. During your Main Phase you can either treat one patient (if you have enough Treatment Points) or make one purchase (if you have enough Gold). Doing Treatment once can only heal one patient. You can think of all of the cards in your deck, discard pile, in play, and otherwise in your Hospital as being cards you possess.

13. CARD FAQ

Um, the patient has some questions. Like why her fingers turned into snakes. And also where all of her colorful mushrooms went. I suspect the two are related.

This section has answers to common questions about specific cards, so hopefully you'll have less lingering doubts, moments of confusion, and terrible arguments.

Nurse Cards

Alyssa Schermer

Q: Is the trade required when I play this card?

A: Yes, it's mandatory. If you don't want to exchange it, don't play it, or play it when there are no nurses in anyone's discard piles.

Arina

Q: What happens if I have only one Kill Mark or none at the end of the game?

A: In those cases, you don't take any VP penalties from Kill Marks.

Q: What happens if I have both Arina and the Dynamite Nurse card at the end of the game?

A: You still keep the Dynamite Nurse card at the end of the game. You thus still have the Dynamite Nurse title, but that card's increase to your Kill Mark count and Arina's decrease to it do cancel each other out.

Calypso Blue

Q: Can I transport a patient if the ambulances are at their limit?

A: No. Instead of transporting, a patient in transport winds up in Critical Condition.

Calypso Ivanna

Q: What happens if I pick a player who doesn't have any acquired patients, or if I don't have any?

A: You can select a player who hasn't acquired any patient cards. You can also use this card when you haven't acquired any. When a player



who doesn't have any acquired patients goes to pick one of theirs, they're unable to select a patient card. For example, if you don't have any acquired patient cards when you activate this effect, you are able to simply take a patient card from another player.

Q: Which one of us picks first?

A: Either of you can go first. If there is disagreement, the player who played Calypso decides who goes first.

Dora Onyx

Q: Are Wounded Patients and Emergency Case Wounded Patients considered one name for the purposes of this card?

A: Both the normal and Emergency Case versions of Wounded Patient are still "Wounded Patient" and have the same name.

Q: Can I pick "Emergency Case" as a name?

A: "Emergency Case" is a sub-type rather than a name, and you cannot pick it for this card.

Ginger Sheffard

Q: Is it okay if the cards I discard don't come from the three cards I drew?

A: Yes. You can pick any of the cards in your hand to discard, including ones you had before using this card.

Kei Lincoln

Q: Can I still use this effect when I use Upgraded Medical Equipment or Cutting Edge Medical Equipment to acquire a patient card?

A: No, you cannot. You only get to acquire a Nurse when you acquire a patient by performing Treatment (specifically an Operation).

Mint Halioca

Q: Do I get -1 VP for each Emergency Case patient in my Hospital at the end of the game?

A: No. Mint's end of game effect only applies to patients you've acquired, not ones you've admitted.

Ren Reverse

Q: What happens if my discard pile is empty?

A: Since there are no cards in your discard pile to choose from, you can't add any to your hand.

Q: Can I use this card to add a card I played during the same phase to my hand?

A: No, you cannot. Cards that you play during your turn don't go to your discard pile until your Cleanup Phase.

Sarah Quincy

Q: What happens if I skip my Admission Phase?

A: During a turn when you skip your Admission Phase, you cannot admit any patients in transport. However, this also means that you don't have to check to see if any of your admitted patients enter Critical Condition.

Sister Sylvestri

Q: What happens if the leading patient is in Critical Condition?

A: In that case, the patient dies, and the player in charge takes a Kill Mark.

Sister Trapetta

Q: Can I pick another player's patients in transport?

A: Yes, you can.

Q: What happens if, after returning an Emergency Case patient to the ambulances (by playing "This Is All Wrong!"), I use Sister Trapetta on them?

A: Return that Emergency Case patient to the ambulances, and treat them as a normal patient. Remember that Sister Trapetta's effect moves patients in transport, but doesn't count as transporting them.

Action Cards

Black Magic

Q: Does this effect mean that I can transport another patient during my Transportation Phase?

A: Yes, that's right. This card's effect is separate from your Transportation Phase.

Q: Can I transport a patient if the ambulances are at their limit?

A: No. Instead of transporting, a patient in transport winds up in Critical Condition.

Closed

Q: What happens if I have no admitted patients?

A: Since there are none to select, none enter Critical Condition.

Q: Can I purchase or acquire the card I put on top of the pile during the same phase?

A: Yes, you can.



Critical Condition

Q: Does “all admitted patients” mean all players’ admitted patients?

A: Yes, that’s right.

Cut-Rate Medical Equipment

Q: When I acquire a patients using cards like Upgraded Medical Equipment or Cutting Edge Medical Equipment, can I use this

A: Yes, you can.

Erase

Q: When I shuffled the Patient Cards I accidentally glimpsed which one was on top, so...?

A: Turn the Patient Cards so they’re face down, and shuffle them again. Once you’ve shuffled them thoroughly, declare that you’re done shuffling, and put them back in place face-up.

Q: The Dynamite Nurse played Erase, and because they got rid of a Kill Mark card, they’re no longer the Dynamite Nurse. Does that mean the Erase card goes back to the Town? Or do they put it in their discard pile?

A: They put it in their discard pile. You check to see if the player is still the Dynamite Nurse at the moment they play the card, and in this case they don’t lose the Dynamite Nurse title until after its effect is resolved.

Hit the Books

Q: Can I transport a patient if the ambulances are at their limit?

A: No. Instead of transporting, a patient in transport winds up in Critical Condition.

Moonlighting

Q: If I successfully do Treatment and heal a patient, can I acquire that card?

A: Yes, you can.

Passing the Buck

Q: Can I swap for another color of Duty Marker for which there are no unused ones?

A: No, you can’t.

Reference Letter

Q: What happens if a player has no unused Duty Markers to place?

A: In that case, you cannot move the patient to that player’s Hospital.

This Is All Wrong!

Q: Does the Duty Marker of another player I switch for have to be an unused one?

A: Yes, that's right.

Q: If I go over the limit on patients in ambulances by 2 or more while resolving this card's effect, do I have to have a number of patients equal to the amount I went over the limit enter Critical Condition every time I send a patient back there?

A: No, that's wrong. When you go above the limit after transport, only one patient enters Critical Condition each time.

Q: I don't understand how to resolve this card's effect.

A: It goes as follows:

1. Decide how many admitted patients you want to return to the ambulances.
2. Each time you return one to the ambulances, it works as follows:
 - a. Replace your Duty Marker with someone else's.
 - b. Once they're back in the ambulances, if the number of patients in transport exceeds the limit, one patient in transport enters Critical Condition.

The major thing to remember is that in this case the number of patients who enter Critical Condition isn't the amount by which they're over the limit. Instead, it's always just 1 if they're over the limit by any amount.

Also, you can still return patients from your Hospital to the ambulances even if the amount in transport is over the limit. This is a rule for the "This Is All Wrong!" card superseding the rules for how the rules for the limit on patients in transport are explained in the normal rules. When returning patients to the ambulances this way, the card rules take precedence, letting you go above the limit.

Q: What happens when I return admitted Emergency Case patients to the ambulances with "This Is All Wrong!"?

A: They stay returned to the ambulances; treat them as normal patients while they're in the ambulances.

The effect of "This Is All Wrong!" returns patients to the ambulances, but it isn't considered to be transporting them, so the rules on Emergency Case patient cards do not take effect.

Upgraded Medical Equipment/Cutting Edge Medical Equipment

Q: When I use this card's effect to acquire a patient, can I also acquire a nurse?

A: No, you cannot. You only get to acquire a Nurse when you acquire a patient by performing Treatment (specifically an Operation).

White Magic

Q: How many Treatment Points do I get if I play 3 of these?

A: You get a total of 4 points. Each White Magic card gives you 1 TP, and the cards' effect gives you one bonus point. You would have to play another one to get another bonus TP from the card effect.

Other Cards

Dynamite Nurse

Q: If the Dynamite Nurse has 2 Kill Marks and another player gets up to 2 Kill Marks, does that player then get the Dynamite Nurse card?

A: No, they do not. The Dynamite Nurse card doesn't move until another player newly has the most Kill Marks, which in this case would require getting up to 3 Kill Marks.

Kill Marks

Q: What's my VP penalty if I have 8 Kill Mark cards at the end of the game?

A: If you have 6 or more Kill Marks, the penalty is -12 VP regardless of how many you have.

Q: If multiple players are getting Kill Marks and it's enough to make them run out, how do we handle it?

A: In this one case you should treat it as though you have an unlimited supply of Kill Mark cards, and give each player some kind of substitute marker if need be. Regardless, if the players claim a 15th Kill Mark (12th for a 3-player game), it makes the game end.

Patients

Q: When an Emergency Case is in Critical Condition, do I have to pay the Treatment Points to keep them from going Critical again at the start of my Main Phase, or can it be at any point during my Main Phase?

A: You can pay at any point during your Main Phase. It's only if you don't pay the cost before your Main Phase ends that the patient enters Critical Condition (dies) as soon as it ends. That also means that if you use a Reference Letter card to push the patient on a different player, you don't have to pay.

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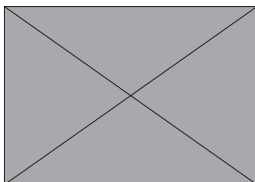
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