

THE MIRROR

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CONCEPT:

The purpose of this little performance/installation is to examine the insecurities and prejudices that play on the minds of medical professionals and patients in situations of stress, self-doubt and perceived weakness.

This particular area of human life – the area of illness and cure – spans a lengthy continuum of intense experience – from infallibility to frailty, from knowledge that saves to knowledge that damages, from conviction to deep insecurity and doubt, from hope to paranoia. And the players in this game – ranging from the most successful doctors to the most frightened patients – occupy well-defined spaces along this spectrum, places that, in turn, generate very specific responses from society.

Within this situation, the social acceptance of the display of fear, doubt, anxiety and vulnerability varies tremendously (from unconditional acceptance of these human insecurities to social contempt for the same) depending on where one might be placed along this continuum.

This work seeks to explore the common emotional challenges of contrasting roles occupied by individuals caught up in the world of medicine.

The Mirror provides a construct, which allows a patient and the doctor to voice their thoughts through conversation with an imagined view of the other. It is based on the unusual, but possible, circumstance of an intermittently practicing senior surgeon who is also receiving periodic treatment as a patient.

The individual's two circumstantial roles within medicine offer radically different experiences of a common environment and within it power and control. This video portrait offers the protagonist back to himself as he might present himself to others in an alternate situation. There is a level of support, compassion and challenge enacted between the two characters, variably endorsing and then undermining the robust definitions of each perspective.

The knowledge that one of the roles represents the actual protagonist and that one of them represents a private mental portrait of an alternate aspect of their identity, is shared with the audience. However, the audience will not know which of the views is real and which is the manifestation of the protagonist's imagination or memory.

The conceit is that the protagonist, aware of the way in which he has adopted or constructed personas to comply with or navigate through a particular social inheritance, engages with his projected self, rehearsing, assuaging and processing his fears, his prejudices, his anxieties.

TECHNICAL SETUP / CONSTRUCT:

We are viewing two images of the same actor playing an individual perceiving himself within the distinct roles of patient or doctor on neighboring screens:

Left Screen: THE PATIENT (an older surgeon) is preparing to be the subject of an operation. He has entered a bathroom and is scrutinising himself in the mirror. He is using the familiar memory of his professional persona to explore and challenge the anxiety of his circumstance and his identity, as heightened by his awareness of the procedure ahead.

Right Screen: THE SURGEON (an older man) is preparing to conduct an operation. He has entered the bathroom and is scrutinising himself in the mirror. He is seeing himself without the role and status of practitioner in the mirror and using this familiar identity to challenge and reinforce his anxiety regarding his competence and credibility to undertake the procedure ahead.

The way in which the words are delivered would depend on the adopted role. The posture, phrasing, formality and agenda of the individual's persona as patient or doctor is noticeably differentiated. However, the language of the dialogue is ambiguous and could reflect anxiety for the protagonist in either scenario. The script has two parts (*Part 1* and *Part 2*). Initially *Part 1* is read to represent the Patient (**Left Screen**) and *Part 2* representing the Doctor (**Right Screen**). The script is then read again but with the lines reversed: *Part 1* now representing the Doctor's voice (**Right Screen**) and *Part 2* now representing the Patient's voice (**Left Screen**).

THE DOCTOR:

The doctor is an active senior surgeon who has recently become a chronic patient requiring repeated treatment and a series of operations. He's approaching retirement (or at least recognising that his career may already have peaked). He still has institutional status and feels somewhat protected by the professional identity of being a reputed doctor. However, he fears that others may have begun to see the older man within the uniform and worries that people around him may have begun to doubt his competence and authority.

His professional doubts and the fear of failure have always been present, but he has previously managed to over-ride them with his rational and detached role as a doctor. With the collapsing of the personal and the professional, with his loathing of medical symptoms that manifest themselves in his own body, he is becoming less sure of the currency of his knowledge, the competency of his skills, and the value of his judgment.

He feels increasingly out of sync with the temperament, education and skills of younger surgeons that he might previously have expected to mentor. He is not sure if he is able to hold his own amongst them and the frequency of his operations is reducing. Fewer medical staff seek his attention, approval or acknowledgement and he recognizes that he may be feeling a hint of irrational resentment toward his younger peers.

He fears that his decision to continue with his practice, in spite of his reduced confidence and the distraction of having to undergo a series of minor operations, is having an adverse effect on him and the medics he works with. He is, growing increasingly paranoid about (and irritated by) the visible effects of ageing. He has a heightened awareness of twitches or other signs - which might simply indicate a body that is working too hard, but could represent more serious symptoms of a greater problem.

In the midst of this complex fear of failing, he seems unwilling to take the decision to retire early. At this point of his career he continues on with his work as a surgeon and his life as a patient. He is unwilling to stop, yet unconvinced he should continue, incapable of deciding if his failing body continues to need the invasive medical treatments he has been undergoing, or the rest that he recognizes as overdue.

THE PATIENT:

The patient is a chronic patient requiring repeated treatment and a series of operations. By profession, he is himself a senior surgeon and continues to try to remain professionally active. He's approaching retirement (or at least recognizing that his strongest years are behind him). He still commands professional status, but as a patient feels increasingly anonymous. He fears that he now appears indistinguishable from the patients that he has treated and worries that the façade of competence and authority that he has maintained until now is becoming increasingly irrelevant.

He has always partially doubted his plausibility as a surgeon. He is abstractly aware that he is highly skilled and experienced, but recognizing the ever-present proximity of human failure and the fragility of the professional veneer of confidence. With the collapsing of the personal and professional, with his loathing of the medical symptoms that manifest themselves in his own body, he is becoming aware of the lack of relevancy of his hard earned skills and his projection of rational objectivity.

He feels increasingly distanced from the temperament, style and education of the younger surgeons that remind him of previous students, but are now entrusted with his care. He is becoming less confident to offer advice, challenge opinions and make suggestions regarding his own care, fearing that his clinicians may not recognize or acknowledge his objectivity of his analysis, when presented from a patient's perspective. He silently feels excluded and suspects that he is developing an irrational resentment to his younger peers.

He fears that his decision to continue with the ordeal of these minor operations is motivated by an unrealistic aspiration to temporarily maintain his fitness to practice, rather than a balanced assessment of benefit and risk. He is growing increasingly paranoid about (and irritated by) the visible effects of ageing. He has a heightened awareness of twitches or other signs – which might simply indicate a body that is under stress, but could represent growing challenges to engagement with the work that defines him.

In the midst of this complex fear of vulnerability, he seems unwilling to take the decision to accept aspects of his condition and pursue less vigorous medical intervention. At this point in he continues on with his treatment, with his routine as a patient and his role as a surgeon. He is unwilling to stop, yet unconvinced that the treatment can stretch out his career. He is incapable of deciding if his professional marginalization, mandates or justifies stepping back from his public role.

The Mirror

Order of scenes

1. Mirror: Eyebrow
2. Mirror: Rhetoric
3. Mirror: Handshake
4. Mirror: Paranoia
5. Mirror: Blood
6. Mirror: Young Doctor
7. Mirror: Rhyme
8. Mirror: Cigarette
9. Mirror: Tight shirt
10. Mirror: Swansong

1 MIRROR : EYEBROW

DOCTOR
You're shedding eyebrow.

PATIENT
I'm shedding eyebrow?

DOCTOR
You're shedding eyebrow.

PATIENT
I am shedding eyebrow?

DOCTOR
You are.

PATIENT
I am...

DOCTOR
Shedding.

PATIENT
Eyebrow. Me?

DOCTOR
Yes you.

PATIENT
Yes. (pause) Am I?

DOCTOR
Are you what?

PATIENT
Am I what? What do you think?

DOCTOR
What do I think?

PATIENT
What do you think?

DOCTOR
I don't, I don't, I don't, I don't
think.

PATIENT
You think you don't think.

DOCTOR
I don't think. I don't think. I don't...
Think

PATIENT
You think.

(CONTINUED)

DOCTOR
I don't. Not much.

PATIENT
You think too much

DOCTOR
You think I think too much?

PATIENT
You think too much. Too much

DOCTOR
Much too much of thinking

PATIENT
Thinking.

DOCTOR
I think

PATIENT
Too much.

DOCTOR
Much too much.

PATIENT
Much too much of...?

DOCTOR
What?

PATIENT
What?

DOCTOR
What is that?

PATIENT
What is what?

DOCTOR
That.

PATIENT
This?

DOCTOR
That.

PATIENT
This?

DOCTOR
That's.

(CONTINUED)

PATIENT

That's a ...

DOCTOR

Is that a twitch?

Pause

PATIENT

That could be a twitch.

DOCTOR

It's a twitch.

PATIENT

It's definitely twitching.

DOCTOR

Do you want me to look at it?

PATIENT

Do you want to look at it?

DOCTOR

I can look at it.

PATIENT

Can you?

DOCTOR

I can look at it.

PATIENT

Look at it.

DOCTOR

I am looking at it.

PATIENT

Let me look at it.

DOCTOR

Let you look at it?

PATIENT

Let me.

Pause

PATIENT (CONT'D)

Look at it.

DOCTOR

Looking at it.

PATIENT

Keep looking.

(CONTINUED)

DOCTOR

Looking.

PATIENT

What do you see?

DOCTOR

Do you want me. To tell you. What I
see?

Pause

PATIENT

Go on then. Tell me.

LOOP BACK TO THE TOP AND SWAP.

2 MIRROR : RHETORIC

DOCTOR
So?

PATIENT
So? What?

DOCTOR
Don't be difficult.

PATIENT
Today, I'm allowed to be difficult.

DOCTOR
True.

PATIENT
Is that your best start? That's a god-
awful start.

DOCTOR
Lets try again.

PATIENT
Do try again.

Pause

DOCTOR
How are you today?

PATIENT
You want to talk about today?

DOCTOR
Why not? Why don't you tell me ... Are
we feeling ready?

PATIENT
When you say we...

DOCTOR
Its rhetorical

PATIENT
Of course. Thank god for rhetoric

DOCTOR
Thank you for rhetoric

PATIENT
Was rhetoric made for doctors?

DOCTOR
I am the question man today.

PATIENT

You are the question man today.

DOCTOR

So ... how are we feeling?

PATIENT

We are feeling fine.

DOCTOR

One of us is dying....

PATIENT

You're not allowed to say that. / You can't say things like that

DOCTOR

It's rhetoric.

PATIENT

That's not rhetoric. That's the truth.

DOCTOR

Rhetoric is the truth. But worn out.

PATIENT

Like you.

DOCTOR

You're a bit anxious aren't you?

PATIENT

Don't be so patronising.

DOCTOR

That's standard ... it's not patronising.

PATIENT

Well the standard is patronising.

DOCTOR

It is isn't it?

Pause

PATIENT

Say it.

DOCTOR

Oh, I couldn't.

PATIENT

If I can, you can.

DOCTOR

Not after all these years. All those operations

(CONTINUED)

PATIENT

Especially after all these years. All those...

DOCTOR

It's the same procedure every day

PATIENT

That's rhetoric.

DOCTOR

There is a small risk

PATIENT

Rhetoric.

DOCTOR

A very small risk.

PATIENT

Rhetoric. And repetition. Does it ever end? / A very small increasing risk

DOCTOR

You really need to remain calm.

PATIENT

I'm perfectly calm

DOCTOR

You need to try to relax. I know how you feel.

PATIENT

Stop patronising me.

DOCTOR

That wasn't patronising...

Pause

PATIENT

You look worried

DOCTOR

I'm perfectly confident.

PATIENT

Rhetoric. A doctor's refuge

DOCTOR

Look this is getting difficult / Maybe you should talk to someone else?

PATIENT

Why? Is something wrong?

(CONTINUED)

DOCTOR
No everything is fine.

PATIENT
You feel in control?

DOCTOR
I feel completely in control. I am in control.

PATIENT
Actually, no you are not. When is that going to sink in?

Pause

DOCTOR
I've a great deal of experience.

PATIENT
So what? At the end of the bloody day... so what?

LOOP BACK TO THE TOP AND SWAP.

3 MIRROR : HANDSHAKE

PATIENT
Ignore it.

DOCTOR
I'm ignoring it.

PATIENT
Ignore it.

DOCTOR
I *am* ignoring it.

PATIENT
You are not ignoring it

DOCTOR
I didn't mention it

PATIENT
Please don't

DOCTOR
I was not going to

PATIENT
Well *don't*.

DOCTOR
I didn't

PATIENT
You did.

DOCTOR
I *didn't*.

PATIENT
You did. You mentioned it.

DOCTOR
You were thinking about it.

PATIENT
So were you.

DOCTOR
No I was not.

PATIENT
Yes you were. You were thinking about it.

DOCTOR
I was deliberately not thinking about it.

(CONTINUED)

PATIENT

No such thing.

DOCTOR

No such thing?

PATIENT

You can't not think about it.

DOCTOR

I was. I was not thinking about it.

PATIENT

Not possible.

DOCTOR

I was doing it.

PATIENT

And you were thinking about it.

DOCTOR

Stop it.

PATIENT

I'm not doing anything.

DOCTOR

Stop it.

PATIENT

You're doing it.

DOCTOR

There's no reason why you can't stop it.

PATIENT

You're a doctor. You stop it.

DOCTOR

You stop it.

PATIENT

I can't.

DOCTOR

Stop it.

PATIENT

I can't

DOCTOR

You don't try

PATIENT

It's not about trying. I am trying.

(CONTINUED)

DOCTOR
You are not trying.

PATIENT
I am.

DOCTOR
You are not.

PATIENT
You know I am.

DOCTOR
I know you are not.

PATIENT
I am. I can't. I can't stop it.

DOCTOR
It's attention you want. You'll do
anything for attention. You're
pathetic. Just pathetic. Pathetic.
Look at you. Look at what you will do
for attention. It always was that. And
now, this is all you have left. Stop
it. Stop it! Stop It!

Pause

DOCTOR (CONT'D)
Did anyone see me?

PATIENT
Just ignore it. It will go away

LOOP BACK TO THE TOP AND SWAP.

4 MIRROR : PARANOIA

PATIENT

Don't look now. Someone's staring at you

DOCTOR

One of my students?

PATIENT

Do you think they recognise you?

DOCTOR

Of course they recognise me. They'll recognise me anywhere. In any situation. And here, dressed like this... Of course they'll recognise me. And want to talk to me. Is he coming over?

PATIENT

It's a she.

DOCTOR

Is she coming over? How do I look?

PATIENT

No. She's not coming over.

DOCTOR

Is she smiling? Should I turn and smile at her?

PATIENT

She is not smiling.

DOCTOR

Describe her expression.

PATIENT

She's sort of...

DOCTOR

Tell me the truth.

PATIENT

Curious. Sort of. And sad.

DOCTOR

As long as its not...

PATIENT

And sorry for you... sort of.

Pause

DOCTOR

Do you think they all feel sorry for me?

PATIENT

It depends what they've heard.

DOCTOR

That's really difficult. Isn't it? If they all feel sorry for me.

PATIENT

What's to feel sorry for? You're here. For an operation.

DOCTOR

A pro at operations.

PATIENT

Such a pro at operations

DOCTOR

I could teach them something. Still.

PATIENT

You could teach them something very important.

DOCTOR

From this perspective

PATIENT

It's a perspective they don't have

DOCTOR & PATIENT TOGETHER

Yet

DOCTOR

Yet

PATIENT

Very important. I could teach them, something very important about operations. About perspectives.

Pause

DOCTOR

Does everyone here know me?

PATIENT

I don't know.

DOCTOR

I can nver tell anymore if they know me.

(CONTINUED)

PATIENT

People forget fast.

DOCTOR

There's a lot to remember

PATIENT

That's it. That's it, precisely.

DOCTOR

Oh gosh.

PATIENT

What?

DOCTOR

I operated on her.

PATIENT

Who? Her?

DOCTOR

Yeah

PATIENT

You sure?

DOCTOR

Sure, I'm sure. Eight years ago. Took out a fibroid. They had to bring in an extra kidney dish. It was huge. I'll never forget.

PATIENT

You're making a mistake.

DOCTOR

I never make mistakes.

PATIENT

(Laughing) You're a gift. Listen to yourself. Just stop for a bit and look at yourself

LOOP BACK TO THE TOP AND SWAP.

5 MIRROR : BLOOD

PATIENT

Today would be a good day. Wouldn't it? Hmm? Today? Wouldn't it be a good day? Don't think so? Come on. It will be good. For you. It will be good for you. Yes it will. In fact the more I think of it, the more I am sure that it will be good for you. Just tell them. All of them. You have them all there. Trapped in the theatre. All those kids. Captive audience as it were. Watching you.

Just say it and finish it.

Just... Come on. Take a deep breath. And... Come on. You can do it. It's very simple. Just call it like it is. That's all. That's what you are doing. Calling it like it is. Which is fine. It's more than fine. It's honest. It's honest. And they will see it. They will see the honesty in it. And the bravery. Definitely some of them will see the bravery. Definitely.

Plus. It will help them. In the future it will help them. They will talk about it. How you chose the Theatre to tell them that... After all these years... come on...

Come on... Its better than one day falling to pieces. Just say it. And then fall to pieces. Say it ...

DOCTOR

I'm not saying anything. I'm fine with blood

PATIENT

Not anymore

LOOP BACK TO THE TOP AND SWAP.

6 MIRROR : YOUNG DOCTOR

DOCTOR

That doctor is an idiot. How old is he?

PATIENT

How old were you when you started operating?

DOCTOR

That's not the point

PATIENT

You are being ridiculous

DOCTOR

There's a lot of hype around him

PATIENT

The nurses seem very excited.

DOCTOR

He's quite a star, they say...

PATIENT

Nurses can be fickle...

DOCTOR

So what do you think of him?

PATIENT

He looks confident

DOCTOR

He's pretty.

PATIENT

And smart

DOCTOR

And pretty

PATIENT

He's very good they say.

DOCTOR

But why is he so pretty? Isn't that disconcerting?

PATIENT

He looked quite relaxed. And yes, definitely manicured.

DOCTOR

That doesn't bother you?

(CONTINUED)

PATIENT

It's a different generation.

DOCTOR

Yes, but so different?

PATIENT

Not so different. Just concerned about things we weren't concerned about.

DOCTOR

Yes! What's with the fucking three colognes? I mean when do these guys have the time for that? Doesn't it make you nervous? That your doctor is spending so much time looking at himself in the mirror?

Pause

PATIENT

You really need to get a grip.

DOCTOR

I am completely gripped in.

PATIENT

Stunningly so.

Pause

PATIENT (CONT'D)

What did he say to you?

DOCTOR

Nothing

PATIENT

About the procedure?

DOCTOR

About the procedure.

PATIENT

Nothing?

DOCTOR

Not a thing.

PATIENT

Well why didn't you ask him?

DOCTOR

About the procedure? Shouldn't he tell me? Shouldn't he discuss it with me?

PATIENT

Well he did.

(CONTINUED)

DOCTOR

Not to any decent degree.

PATIENT

You were not listening.

DOCTOR

He was not trying hard enough. Some doctors would go that extra mile. He obviously hasn't taken any of my classes.

PATIENT

They say he improvises.

DOCTOR

I hate that word. Why are you saying it like it's a new word?

PATIENT

Maybe it's a new skill.

DOCTOR

It's the oldest skill. It's the only skill worth having. It just means dealing with shit. Dealing well with shit. Day in the life of a doctor. Is that his claim to fame?

PATIENT

There's other stuff too. I've heard

DOCTOR

Maybe they think I know what I need to know.

PATIENT

Maybe they think the brain stops growing.

DOCTOR

Maybe

Pause

DOCTOR (CONT'D)

And maybe it does.

PATIENT

They say he's very adventurous with new procedures.

DOCTOR

I've done my reading.

PATIENT

It will be embarrassing if you don't understand something he tells you.

(CONTINUED)

DOCTOR

Pity would be unpalatable.

PATIENT

I don't think it's pity. It's respect.
From afar.

DOCTOR

Like they tell you to give dinosaurs.

PATIENT

If you happen to meet one. Yes.

Pause

DOCTOR

It feels like there's too many people
watching.

PATIENT

It's been a recurring fear for a
while.

DOCTOR

Too many people watching.

PATIENT

It's called the Theatre...

Pause

PATIENT (CONT'D)

Is there anyone here who doesn't know
you?

DOCTOR

They all know me. They pretend they
don't know me. It's another one of
this generation's things.

PATIENT

They are full of shit aren't they?

Pause

PATIENT (CONT'D)

How many operations has it been?

DOCTOR

Too many. Too many.

PATIENT

You think its time to stop?

DOCTOR

Stop and then...?

(CONTINUED)

PATIENT
No. More. Operations.

DOCTOR
No more operations.

Pause

DOCTOR (CONT'D)
Worst decision.

PATIENT
Best decision.

DOCTOR
Too much can go wrong doctor

PATIENT
Too much can go wrong doctor

LOOP BACK TO THE TOP AND SWAP.

7 MIRROR : RHYME

This rhyme can be broken up differently - depending on how Simon delivers it. It might even be interesting to experiment with cutting it in a different way in the swap

DOCTOR

1, 2, 3, 4, 5
once I caught a fish alive
6, 7, 8, 9, 10,
then I let it go again

PATIENT

Why did you let it go?

DOCTOR

because it bit my finger so

Which finger did it bite?
This little finger

PATIENT

on the right

LOOP BACK TO THE TOP AND SWAP.

8 MIRROR : CIGARETTE

DOCTOR
I can smell smoke

PATIENT
I don't.

DOCTOR
Yes that's smoke

PATIENT
Where? That's a bit worrying - should we be worried?

DOCTOR
No, no, not fire, smoke. Cigarettes

PATIENT
Oh

Pause

PATIENT (CONT'D)
Have you been smoking?

DOCTOR
Not for six years. Have you?

PATIENT
Smoking's a mug's game

DOCTOR
Can't bear it

PATIENT
Filthy habit

Pause

PATIENT (CONT'D)
Don't suppose it would make much difference now though?

DOCTOR
Not really a good idea.

PATIENT
I used to love smoking.

DOCTOR
Yes, but it's a real addiction.

PATIENT
Yes, but before it was ... before we worried so much.

(CONTINUED)

DOCTOR

Yes, I know.

PATIENT

You enjoyed it too... admit it.

DOCTOR

At the beginning

PATIENT

You know, I remember doctors used to smoke in their offices.

DOCTOR

Yes

PATIENT

Quite funny to think...

DOCTOR

Yes funny really.

Pause

PATIENT

You've got me thinking now.

DOCTOR

What do you mean?

PATIENT

I'd quite fancy...

DOCTOR

Now come on.

PATIENT

Not seriously... just... it would be nice.

DOCTOR

Let's not dwell

PATIENT

But I wonder where the smell's coming from?

DOCTOR

I don't know.

PATIENT

Is there somewhere you can smoke here?

DOCTOR

Oh... very unlikely.

PATIENT

What about through there?

(CONTINUED)

DOCTOR

Glad I gave up.

PATIENT

Oh yeah, me too. Hard though wasn't it?

DOCTOR

A lot of people struggle.

PATIENT

Seems almost excusable here though.

DOCTOR

I don't see...

PATIENT

The stress, you know - nice to reach for something.

DOCTOR

Yes, I suppose... sort of comforting

LOOP BACK TO THE TOP AND SWAP.

9 MIRROR : TIGHT SHIRT

DOCTOR

That shirt looks wrong somehow

PATIENT

What do you mean?

DOCTOR

It's a nice shirt...

PATIENT

But...?

DOCTOR

No...it's fine.

PATIENT

No, its not.

DOCTOR

No it's not.

PATIENT

What's wrong?

DOCTOR

Well... the buttons.

PATIENT

The buttons are fine.

DOCTOR

Ye but a little...

PATIENT

Strained? Tight?

Pause

PATIENT (CONT'D)

It may have shrunk.

DOCTOR

May have

PATIENT

It was fine last week.

DOCTOR

The sleeves still fit.

PATIENT

What are you trying to say?

DOCTOR

Nothing, I just thought it looked a bit...

Hmm strange.

PATIENT

Very strange...

DOCTOR

It may just be the angle

PATIENT

Have I put on weight?

DOCTOR

Oh no, no

PATIENT

Its supposed to be a bit tight.

DOCTOR

These stupid new styles.

PATIENT

Very stupid

DOCTOR

Right

PATIENT

I'm just waiting for this fashion to pass.

DOCTOR

These things go in cycles.

PATIENT

Yes...

DOCTOR

Why not leave the shirt unbuttoned - go a bit Miami Vice.

PATIENT

Look. Can we not focus on the shirt?

DOCTOR

Sorry, just trying to...

PATIENT

OK, OK

DOCTOR

Look, you won't be wearing it in theatre anyway.

PATIENT
Exactly.

DOCTOR
Exactly...Let's move on.

PATIENT
Please

DOCTOR
Forget I said anything.

PATIENT
Right

DOCTOR
It could be the mirror.

PATIENT
Definitely could be the mirror.

LOOP BACK TO THE TOP AND SWAP.

10 MIRROR : SWANSONG

PATIENT

Define swansong.

DOCTOR

Farewell. Curtain. Finale. Leave-taking. Valediction.

PATIENT

You looked it up.

DOCTOR

Of course.

PATIENT

And your preference? From the above?

DOCTOR

It's all morbid.

PATIENT

I think it's all fantastically grand.

DOCTOR

It would be grander if it goes wrong.

PATIENT

Tragedy is terribly compelling.

DOCTOR

They don't call it a theatre for nothing.

PATIENT

Maybe then, that's the way to go.

DOCTOR

With a splash.

PATIENT

Make sure they don't forget you.

DOCTOR

Help them talk about you.

PATIENT

Study you forever.

DOCTOR

You know. I miss this.

PATIENT

Is that what this is about?

DOCTOR

What do you mean?

(CONTINUED)

PATIENT

Have you grown into one of those
horrors that can't let go? Who will
do anything to come back? To be back?
And will do anything to be remembered?
Even if it is for a mistake?

DOCTOR

What kind of doctor are you?

PATIENT

(*smiling*) That was my next question...

Pause

PATIENT (CONT'D)

So?

DOCTOR

So what?

PATIENT

What kind of doctor are you?

DOCTOR

A good one. I hope. At least I have a
reputation for being a good one.

PATIENT

An old doctor.

DOCTOR

A wise doctor.

PATIENT

OK. A wise doctor.

DOCTOR

... which is an old word.

PATIENT

It is an old word. And it is a word
that only the old would use.

Pause

PATIENT (CONT'D)

What else? What kind of doctor are
you?

DOCTOR

Today?

PATIENT

Today

DOCTOR

An ill doctor?

(CONTINUED)

PATIENT

I was hoping you would say that.

DOCTOR

Isn't that an oxymoron? An ill-doctor...

PATIENT

It's a well-kept secret.

DOCTOR

They will come for you soon.

PATIENT

Ah.. The grand escort. They still do that?

DOCTOR

Splendid, isn't it?

PATIENT

The build up is phenomenal.

DOCTOR

So are you ready then?

PATIENT

No. Ask me a difficult question.

DOCTOR

Do you think this operation is a mistake?

PATIENT

Can't you do a slightly easier one?

DOCTOR

Do you think this operation is a mistake?

PATIENT

There is someone at the door.

DOCTOR

Isn't there always... Ready then?

PATIENT

As ready as I have always ever been...

LOOP BACK TO THE TOP AND SWAP.