# WHAT HAPPENED TO TOM

Peg Tittle

ptittle7@gmail.com

FADE IN:

INT.CLINIC ROOM -- DAY

Tight close-up of Tom's face. He's asleep. Gradually, he wakens, but his eyes remain closed; his expressions indicate first, that he feels awful, and next, that he regrets partying so hard last night. Then his eyes open - not with a sudden and full awareness, but slowly, as if it's a struggle to gain consciousness, to gain lucidity; his confused and uncertain expression reveals the awareness that he <u>wasn't</u> partying last night - was he?

Shot widens as he takes in the fact that he's not lying in his own bed. He's in what looks like a hospital bed. He begins to get alarmed, more so because he can't quite remember -

Shot widens further as he looks to his right and sees medical monitoring equipment. He jerks slightly, as if attempting to move, to sit up, but the reflex travels no further than his chest. Nor does the shot. Just as he opens his mouth to call "Nurse!" or something, Dr. Anders strides in. She begins to check various monitors.

TOM

What happ-

He breaks off as he focuses on her - and recognizes her.

TOM (CONT'D) I remember you - last night - did we

He frowns. That wouldn't explain why he's here.

TOM (CONT'D) We had a drink...

He grapples with his inability to remember, and then with the implications of his inability to remember.

TOM (CONT'D) Did you put - did you -

He tries to wrap his head around the possibility of having been slipped the so-called 'date rape' drug and - ?

DR. ANDERS

No.

She considers this more fully.

DR. ANDERS (CONT'D) (said ambiguously so it makes sense of our later discovery that she didn't rape him, but in a way 'impregnated him; she certainly did something to his body without his consent) Not exactly. Tom continues to struggle as awareness creeps back incrementally. TOM Wait a minute - you're not a nurse you said you were a doctor. DR. ANDERS I am a doctor. TOM (with anxiety) What did you -He looks in vain at his body, completely covered by the bedding, then appears to be trying to try to take an internal inventory. TOM (CONT'D) (beginning to panic and struggling without success to sit up) What did you take from me? DR. ANDERS Calm down. Relax. We didn't take anything. Beat. DR. ANDERS (CONT'D) On the contrary, we gave you -Shot includes the length of the bed as he now sees that his wrists are cuffed to the bedrails.

> TOM What the hell - why am I -

He becomes hysterical.

## TOM (CONT'D) What the hell are you doing to me?

Dr. Anders calmly injects what is presumably a sedative into his IV line. He slumps into unconsciousness. Blackout.

## INT. CLINIC ROOM -- DAY

Tom is asleep. Full view of him in bed on his back, arms to the side under covers, hands visible and still tied to the bedrails. We see the right side of the room, as before, full of medical equipment. He awakes. And roars.

> TOM NURSE!! SOMEONE!! HELP!!

Dr. Anders walks in.

TOM (CONT'D) I demand that you undo these restraints.

DR. ANDERS (mildly) Are you in a position to make demands?

Seething, he considers. And concedes.

TOM I - I'd like to see a lawyer.

DR. ANDERS But you don't even know yet what -

TOM I know I'm here - in this situation against my will. I didn't agree to (he gestures vaguely with his head) whatever -

DR. ANDERS You were agreeable enough Friday night.

TOM (through clenched teeth) Not to this. She shrugs. Minor distinction. He tries again.

TOM (CONT'D) I do <u>not</u> consent to this.

She nods, conceding. But as if <u>she's</u> won the point. She starts to leave.

TOM (CONT'D) Wait a minute! You aren't going to undo these?

DR. ANDERS Not yet. We're concerned you might - hurt yourself.

TOM Why would I -

He suddenly sees that a tube, suggestive of an umbilical cord, leads from his midsection out from under the covers to - he looks at the curtain that we now see is on his left. He sees that the tube goes through it to to something.

> TOM (CONT'D) Oh my god. What have you done? What have you done to me??

He becomes hysterical again. Dr. Anders administers a sedative again. He falls back, helpless. Blackout.

## INT. CLINIC ROOM -- DAY

As before. Tom in bed, medical equipment at one side, a bedside table on the other side on it are a phone, a pitcher of water, and a glass; a small plastic bag hangs on the drawer handle and a dividing curtain.

Tom wakes, to find Dr. Anders checking his monitoring equipment, perhaps making some small adjustments.

TOM Get away from me! If you ever touch me again without my permission, I'll kill you!

Dr. Anders proceeds immediately to touch Tom, as she checks his pulse and blood pressure.

DR. ANDERS Look, there's really no need to be upset. The procedure went very well.

She checks the tube in his side.

TOM What procedure? What have you done to me?

She stops her examination now and gives Tom her full attention.

DR. ANDERS Something wonderful. Tom, you're giving someone life.

She pauses, then dramatically pulls back the curtain on his left, to reveal a man in a bed similar to Tom's, also with a bank of medical equipment, indicating life.

DR. ANDERS (CONT'D) Without you, Simon would die.

She nods at Simon, still unconscious, lying in the bed.

DR. ANDERS (CONT'D) This is Simon. Simon Arture. Have you heard of him?

Tom is speechless with confusion and frustration.

DR. ANDERS (CONT'D) No? He's a world-famous violinist. And he has - he <u>had</u> a fatal kidney disease. But now, thanks to you, he'll be completely cured.

TOM What are you talking about?

DR. ANDERS It's a simple procedure really, I won't bother you with the details. Basically, if the connection is maintained for nine months, not only will the effects of the disease be reversed, the disease itself will have disappeared. He'll live!

TOM What connec - It suddenly occurs to him to follow the tube from his midsection - and he sees that it disappears under the covers at Simon's mid-section.

TOM (CONT'D) What kind of joke -

DR. ANDERS Oh I wouldn't kid around about something like this.

TOM

I'm -

He suddenly backtracks to something she said.

TOM (CONT'D) You expect me to stay like this for nine months? (he's livid) No fucking way!

He struggles against the cuffs with all his post-surgery strength.

TOM (CONT'D) (bellowing) TAKE OFF THESE CUFFS!

She stands, arms folded, as he rages against the restraints. Eventually, he's spent.

TOM (CONT'D) Please. Look, I understand you're trying to do something good here, saving this guy's life and all, but I - I can't be here like this for nine months. I'll lose my job. (beat) This is simply not something I'm prepared to do.

He suddenly turns off the calm and rational approach.

TOM (CONT'D) (in a tightly wound voice with barely concealed threat) Take off these cuffs!

Totally not responding to his tone of voice or his threat, which is, of course, completely empty.

DR. ANDERS I'm sorry, Tom, I can't do that. It's for your own good, really. We're afraid you'll get hysterical -

TOM (getting hysterical) Hysterical?

DR. ANDERS - and disconnect.

TOM You're damn right I will!

A beat.

DR. ANDERS Didn't you hear what I said? If you disconnect, Simon will die. You'll be killing him. Are you a murderer? Tom? Do you want to kill him?

Tom is silent. Then he breaks into a rage again, screaming.

Dr. Anders administers a sedative, Tom falls back into unconsciousness. Blackout.

INT. CLINIC ROOM -- DAY

We now see the full room which includes a television mounted in the upper corner of the room, a chair, closer to Tom's bed than to Simon's, and a window.

Tom wakes, glances over at Simon, who remains unconscious. Dr. Anders strides in.

DR. ANDERS Good morning, Tom. How are you feeling?

He glares at her.

DR. ANDERS (CONT'D) I know this has been quite an emotional shock, Tom, but I'm hoping you're past the I don't want end up sedating you every time we have a conversation.

His first words are, again, a yell.

TOM Then you shouldn't've-

DR. ANDERS Tom, enough with the tantrums.

TOM

Tantrums?

DR. ANDERS Yes. This is getting old, Tom.

He's flabbergasted. She's been so professional, even cold, to now. Plus, tantrums??

DR. ANDERS (CONT'D) The sooner you accept the situation, the better. Grow up. Face reality.

TOM

Grow up? Beat. Face reality?

Beat.

DR. ANDERS If you can do that, I'd like to undo the restraints. But I need your word that you won't do anything ill-considered. You obviously have a choice to make. I just hope you'll give it some thought. You do understand that if you disconnect, Simon will die, yes?

TOM (tightly) Yes. I get that.

A beat.

TOM (CONT'D) And it's a helluva choice. How dare you put me in this position!

DR. ANDERS I recognize it can be difficult for some.

Tom glares at her - what an understatement.

TOM Suppose I do decide to what happens to me? If that thing gets disconnected.

DR. ANDERS Well, the shunt goes directly into your kidney. And it's sutured in there pretty good.

TOM So, if it gets yanked out, what I bleed to death?

She shrugs. Doesn't care, or doesn't know, or won't say. The cold professional is back. He retreats into noncommunicativeness; she leaves.

#### INT. CLINIC ROOM -- DAY

Tom is asleep, lying somewhat on his side. As he begins to waken, he pushes himself over. Then he realizes that if he was pushing himself, the restraints must be off. They are. He sits up, looks around guiltily for some reason, then lifts the covers away from his midsection. His side is bandaged where the tube is inserted. He peels back the bandage, a little roughly, and winces. He sees that a tube is indeed stitched into his side the stitching looks somewhat gruesome but is probably normal. He fingers the bruised, reddened, and puffy area tentatively, then tugs on the tube. He cries out and stops immediately. He is bleeding, but not profusely; the tube is now a little crooked. He puts the bandage back over the wound and presses on it to stop the bleeding. After a few seconds, he lifts the bandage again the bleeding has slowed a little. He continues to apply pressure, as he leans back against the pillows. He's in a sweat, panicking. What has he done? Is he bleeding internally? Should he call for help? No, they'll just put the restraints on again. But is he bleeding to death? Before he can make up his mind, he falls asleep or passes out we don't know which. Blackout.

#### INT. CLINIC ROOM -- DAY

Tom has regained consciousness. He glances over at Simon, sees him still unconscious. Then he notices the phone on the bedside table. He reaches for it, but then suddenly reaches instead for the plastic bag. When he has finished throwing up, he reaches again, carefully, for the phone and sets it on the bed beside him, then makes a call.

TOM Hello, could you please send an officer to the Anders Clinic? (beat) No, it's not exactly an emergency. But it is urgent. (beat) I'd like to lay charges. Kidnapping. He looks down at this side. And assault. (beat) Tom Wagner. W-A-G-N-E-R. (beat) Yes, I'll be here. I'm in one of the rooms. (beat) No, sorry, I don't know which one. (beat) No - but -(sighing) Tomorrow will be fine. He hangs up the phone, then dials again. TOM (CONT'D) Mr. Watts, please. (beat) Hello, sir. This is Tom -(beat) Well, that's why I'm calling, sir. Something's come up and I'm afraid -(beat) No, no, I'm all right. Thank you. But I'll need to take a few more days -(beat) Well it was very - unexpected -(beat) I appreciate that, and if I could've, I certainly would've -(beat) I apologize, sir. (beat) Just a few more days, I promise. (beat)) Of course. That's only fair. (beat) I understand. (beat) Yes, thank you sir. Tom hangs up and dials again.

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TOM (CONT'D) Hey, Steve! (beat) I wish. No - what happened is look, it's a long story -(beat) Yeah, yeah. Listen, why I'm calling - can you get my laptop and bring it to me? If I don't get some work done, Watts is going to fire my ass - oh, shit, and my car! (beat) It's still at the bar. (beat) No, I'm not at home. I'm at some place called the Anders Clinic. (beat) No, no, I'm okay. Well, sort of. (beat) I'd never heard of it either. Look, we'll talk when you come, okay? I'm really tired -(beat) Seventh Avenue somewhere. (beat) I don't actually know my room number. (beat)

Tom's about to hang up, then quickly adds -

TOM (CONT'D) Hey, Steve? Force your way in if you have to, okay? I'm serious. (beat) Yeah, later.

He hangs up the phone, lies back, and nods off.

## INT. CLINIC ROOM -- DAY

Dr. Anders walks in and checks Simon's monitors, his pulse, and the connection. She then checks Tom's monitors, as well as his pulse and blood pressure.

DR. ANDERS

Hmm.

She pulls back the covers and pulls back the bandage.

DR. ANDERS (CONT'D) A couple stitches seem to have come out.

She looks at him accusingly.

TOM I must've rolled over in my sleep.

Beat.

DR. ANDERS You have to be more careful now. Get used to sleeping on your back.

Beat.

TOM (as if it's an unreasonable demand) For nine months?

She shrugs, then heads out of the room.

TOM (CONT'D) You won't get away with this! This is coercion pure and simple.

She stops and turns back to him.

DR. ANDERS Call the police if you like.

By his look, she realizes he already has, but she has expected that.

DR. ANDERS (CONT'D) It's your word against mine, Tom.

TOM You can't make me do this!

She says nothing. She <u>is</u> making him do this. She leaves. Tom lies there, fuming. Then he suddenly reaches again for the plastic bag and throws up.

Dr. Anders returns with a suture kit and several small plastic bags which she loops over the handle after removing the used bag, neatly tying it off, and dumping it into a nearby wastebasket.

> TOM (CONT'D) Why am I throwing up all the time? Is something wrong?

DR. ANDERS No, that's just one of the side effects. It's nothing to worry about. She begins to repair the stitches. TOM One of the side effects? There are others? DR. ANDERS Well, fatigue, of course, and weight gain. (recites in a clinical voice) Backaches, headaches. Skin rash. Changes in sense of smell and taste, chemical imbalances. Tom stares at her, stunned, as she continues blithely to make the repair. When she's finished, she leaves the room. INT. CLINIC ROOM -- DAY Tom is asleep. A uniformed police officer enters the room. POLICE OFFICER Mr. Wagner? He looks with uncertainly from one sleeping body to the other. POLICE OFFICER (CONT'D) Tom Wagner? Tom stirs and wakes. TOM Oh - hello - please come in. Tom makes a few feeble attempts to appear presentable. POLICE OFFICER Sorry to have wakened you. He looks around, confused. POLICE OFFICER (CONT'D) You reported a kidnapping?

TOM Yes, uh -

Tom reaches for the glass of water on the bedside table and drinks it, trying to wake up quickly and clear his mind.

POLICE OFFICER

And who -

TOM

Me.

He presses his fingers to his temple.

Beat.

POLICE OFFICER

But –

TOM I was at the bar Friday night, next thing I know I wake up here. Like this.

POLICE OFFICER (drawing out the word, starting to think he's dealing with a nut case) Ok-a-a-y. But it seems to me you're free to-

Tom pulls back the bedcovers. The officer's eyes widen as he sees the tube bandaged in place, follows the tube to where it disappears under Simon's bedding. He takes a step closer to look at Simon.

TOM

Go ahead.

He steps toward the midsection of Simon's bed.

POLICE OFFICER Excuse me, sir?

TOM

He's in a coma or something.

The officer lifts enough of Simon's covers to see the tube bandaged into his side. He looks back at Tom, then at the situation as a whole again. Then he pulls the chair toward Tom's bed and sits, a bit intimidated by the medical equipment and IV lines, not to mention the situation as a whole. He pulls out a small notepad and a pen. POLICE OFFICER Perhaps you'd better start at the beginning.

TOM Friday night. I was at a bar.

POLICE OFFICER That'd be last Friday.

TOM

Yeah. I think so. What is today, Wednesday?

## POLICE OFFICER

Thursday.

TOM Oh. I've been out a fair bit.

POLICE OFFICER Do you remember the name of the bar? Was there anyone with you?

## TOM

Yeah, we went to Calvin's. Me, Steve - Steve Lambiel, and Kevin Ortiz. We all work at Smith, Watts, and Barrow. We're architects.

POLICE OFFICER Okay. Good. And what happened, exactly.

TOM

This woman came over to us - Dr. Anders. Well, I didn't know her name then. I didn't know her. She just came over. You know, being friendly. We chatted a bit. Then Steve and Kevin joined another table. Cruising, you know. The woman and I stayed at the bar.

POLICE OFFICER

Dr. Anders and you.

#### TOM

Yeah. Next thing I know I'm waking up here, cuffed to the bed, with this tube in me, connected to him. POLICE OFFICER You were restrained? Cuffed to the bed?

TOM Yeah. They took them off after a few days. Once they were convinced I wouldn't yank the tube out.

POLICE OFFICER (a bit deflated) So that was for your own safety then.

TOM

They explained that he'd die if I did. If we stay connected for nine months, kidney to kidney, he'll live.

POLICE OFFICER (struggling to take this all in) You're, like, a human kidney dialysis machine?

TOM A dialysator. [rhymes with incubator] Apparently.

POLICE OFFICER

Do you have any recollection of force being used? I mean apart from keeping you from pulling out the -

Tom shakes his head.

POLICE OFFICER (CONT'D) Any witnesses -(he glances at his notes) Steve or Kevin - did they see you leave?

TOM I don't remember - I'm thinking she must have drugged me. But they must've seen me leave. They must've seen her dragging me -

POLICE OFFICER But that could've looked like you were just a little drunk. TOM

Yeah. Shit.

POLICE OFFICER

Do you remember who was tending bar that night? Perhaps the bartender saw her put something into your drink?

TOM

Yeah, yeah - it was Ty. Don't know his last name. Big guy. Dark curly hair. He's their regular bartender.

POLICE OFFICER

Okay.

Awkward beat.

POLICE OFFICER (CONT'D) I'll look into it. I'll ask around at the bar, I'll contact your friends, but I have to say that unless I find evidence, at the very least an eye witness, to back up your story - to prove you didn't consent to this -

TOM

But she, this Dr. Anders, she doesn't have proof that I  $\underline{\rm did}$  consent.

Beat.

TOM (CONT'D)

Does she?

POLICE OFFICER

Doesn't matter. We assume you consented unless there's evidence to the contrary.

Tom's look says 'Well that's pretty stupid.'

TOM Why would you assume I consented? (gives a little laugh bordering on hysteria) I mean what makes you think anyone would agree to - this? Beat.

TOM What makes you think  $\underline{I}$  would agree to this?

POLICE OFFICER (shrugs) Do you have evidence to the contrary? Evidence that you did <u>not</u> consent, that you were coerced?

TOM Well, no but -

POLICE OFFICER So at this point, all I've got is your word.

The officer gets up and heads to the door. Tom suddenly realizes that nothing will come of this.

TOM (Angry, calling out after him) Since when is that not good enough?

Tom lies there, frustrated again. Angry again.

He stares at the tube. He tugs on it again; it hurts. He experimentally bends the tube, stopping the flow of fluid. He thinks for a bit, then gathers the slack and loops it as if seeing whether it could be knotted; it could be, he thinks. He looks around the room, opens the drawer of the bedside table, rummages through the drawer, looks around again not a sharp object in sight. He falls back, defeated. He falls asleep.

INT. CLINIC ROOM -- DAY

Tom is sleeping lightly, rousing quickly when he hears a knock at the door. He sits up eagerly.

TOM

Steve?

Rev. Peters pokes his head around the door.

TOM (CONT'D) (disappointed and wary) Who are you? REV. PETERS I'm - I do the pastoral care for several clinics -TOM A priest? They've sent me a priest? (he laughs) **REV. PETERS** A minister, actually. Reverend Peters. May I come in? TOM Sure, what the hell. Rev. Peters enters the room. REV. PETERS (gesturing to the chair) May I? He pulls the chair closer to Tom. REV. PETERS (CONT'D) (earnestly) How can I help you through this difficult time? Tom bursts out in laughter; it is definitely hysterical. TOM See, that's just the thing. I don't want to go "through" this difficult time. I don't want to be "in" this "difficult time". Beat. REV. PETERS Well -TOM Well what? That's life? Que sera sera?

Rev. Peters shrugs.

TOM (CONT'D) Okay, so how can you help me through this difficult time.

REV. PETERS Well, I think you'll find it's quite simple really. Thou shalt not kill.

Beat.

TOM That's it? (implying it's woefully inadequate) REV. PETERS That's it. (implying it's that simple) TOM And why is that? **REV. PETERS** I beg your pardon? TOM Why shall I not kill? **REV. PETERS** Oh, well, because life is - all life is -TOM (making a bad attempt to imitate the Monty Python song and approaching giddiness) Every sperm is sacred? REV. PETERS What? TOM Nothing. REV. PETERS Surely you believe in the sanctity of life? TOM Okay, what about the sanctity of my life?

REV. PETERS But your life isn't at stake here. (trying another approach) Surely you see that this is the right thing to do. You have a chance here to give someone life! Such an honor, a privilege!

Tom skips over that shit.

TOM

So why are you here?

REV. PETERS I beg your pardon?

TOM

You've got a couple kidneys, yeah? Two lungs, a heart, a liver. And a whole bunch of other stuff. Bet you could give life to a dozen people waiting for transplants.

Rev. Peters stumbles for a response. He has none.

TOM (CONT'D) What's the matter? Walk, don't run, to the nearest clinic. Every second you delay, you're killing someone. Reverend.

REV. PETERS

If the Lord wanted - I have to believe it's not my calling -

TOM Well, isn't that convenient.

After a moment, Rev. Peters gets up to leave.

REV. PETERS I'll pray for you, Tom.

Tom ignores him, pointedly looking the other way - which happens to be at Simon.

Rev. Peters leaves. Tom continues to stare at Simon, then suddenly grabs a plastic bag and throws up. He leans back, exhausted. After a while, he opens the bedside drawer, pulls out a phone book, browses through, then dials a number.

TOM Hello, I need a lawyer. (beat) I don't know -(beat) Personal injury, I guess. Contracts maybe. (beat) Thank you. (beat) Hello, my name is Tom Wagner, and I'm wondering if you're available to take on a new case. (beat) Well, it's a bit complicated. I'd rather talk about it in person. (beat) Oh - and what is twice the regular fee? (beat) I see. Okay, no, by phone is fine. What happened is (beat) Yeah, I can call back. beat Next week? sighs. No, that's fine, thanks. He hangs up - he's so tired - and falls asleep. INT. CLINIC ROOM -- DAY Steve enters the room, with Tom's laptop.

> STEVE (to himself as he takes in the scene) What the hell - ?

He sees Tom, who's sleeping and not looking too well. Steve goes quickly to his side, puts the laptop on the bed, and tries to wake him.

> STEVE (CONT'D) (in a loud whisper) Tom, hey, Tom. Wake up, man. Tom!

Tom wakes up.

STEVE (CONT'D) Hey, dude, are you okay?

Beat.

STEVE (CONT'D) What the hell happened?

TOM (a bit groggy) Hey. Steve. Thanks for coming.

STEVE Yeah, yeah, (dismissing his thanks) You get mugged or something? This all from last Friday?

Tom struggles to become alert, then convulses a bit as if he's going to throw up, but does not. He reaches to the bedstand for the ever-present glass of water, and drains it.

> STEVE (CONT'D) Why didn't you call me?!

Steve pulls the chair close to Tom's bed and sits.

TOM Oh man, is it good to see you.

Beat.

STEVE Yeah, cool, but -

TOM

Okay. You remember that woman who came over to us at the bar Friday night?

STEVE Yeah. Not my type. But you left with her -

TOM Not exactly. I mean, I don't remember that. I think she put something in my drink.

Steve reacts, surprise, followed by disbelief.

TOM (CONT'D) I remember you and Kev trotting over to that threesome - I remember I tried to call Beth - shit, Beth!

He reaches to the phone.

STEVE It's okay. I called her already.

Tom doesn't know how to respond to that. So he just continues with his story.

TOM Next thing I know I wake up here. Like this.

Tom gestures at the tube connecting him to Simon. Steve gets half out of the chair to look, but doesn't understand.

TOM (CONT'D) They said this guy, Simon Arture, is dying. That's him. (he nods to Simon) Some rare kidney disease or something. They've connected my kidneys to his. Or something. We stay connected for nine months, and he'll live.

Steve is quiet for a moment.

STEVE Shit. For real?

TOM

Looks like. (frustration rising again) 'Course, how the hell would I know?! I know I'm throwing up, I know I'm tired all the time, I know my side hurts like hell -

STEVE

Why?

TOM Because of the damn -

STEVE No, I mean why did she - what's her name? TOM

Dr. Anders.

STEVE Why is she doing this? Does she have a thing for this Simon guy?

TOM

I don't think so. She barely looks at him. Well, she checks his monitors and that, but she doesn't look overly concerned or anything.

STEVE Then what? She on a mission to save the world or something?

Tom pauses, recollecting her cold demeanor.

TOM I don't get that impression.

STEVE

I know! (grinning) She's doing it - because she can.

Steve laughs, but tom's just not up for it.

STEVE (CONT'D) (quickly sobering) So, what, if you disconnect, he dies?

Tom nods.

#### STEVE (CONT'D)

Well, not that I'm heartless or anything, but so what. I mean, it's your decision, but if it were me? Why should you suddenly be the one responsible for this guy's life? No one asked you, right? And if they had, you'd've said no, right?

TOM

Right.

Beat.

TOM (CONT'D)

Still.

They sit quiet for a bit: Steve's amazed at the whole thing, including Tom's acquiescence; Tom's just tired.

TOM (CONT'D) They sent in a minister to talk to me.

STEVE Geez. What'd he have to say? The meek shall inherit the earth?

TOM Thou shalt not kill.

STEVE Christ, we fucking kill all the time! War! The death penalty! Selfdefence!

They sit quiet again. Steve gets up and paces a bit, then turns back to Tom.

STEVE (CONT'D) Isn't there some way to undo this? I mean, I can get Kev and we can - no, that's not gonna... (trails off) It's just surgery, right? If they did it, they can undo it. Or someone can, right?

Tom sits up, energized by this. Why didn't he think of that before? Because he's been so damned tired all the time!

TOM

Yeah...

STEVE You said it's just for nine months so they're going to undo it in nine months? So why can't they undo it now?

Tom's expression indicates that there's no way Dr. anders is going to undo it.

Or someone. TOM

Okay, but who am I gonna ... how am I...?

He collapses back, defeated again. He's <u>so</u> tired, he actually starts to nod off. Steve sees that, so he gets up to leave, pausing at the door.

STEVE I'm - ah - oh, here.

He takes Tom's car keys out of his pocket and puts them on the bed beside Tom.

STEVE (CONT'D) I'm, ah, I'm gonna go.

Tom waves at him weakly - see ya? no stay? Steve is somewhat dismayed to see him this way.

STEVE (CONT'D)

I'll call. But hey - dude - you don't owe this guy anything.

Steve leaves; Tom nods off.

INT. CLINIC ROOM -- DAY

Dr. Anders walks in, checks Simon's monitors and pulse, then checks Tom's monitors.

TOM

You're a real bitch, you know that? You have no right to - to -

DR. ANDERS Invade your body like this?

Beat.

DR. ANDERS (CONT'D)

Maybe not.

She doesn't seem too concerned. This makes him even more angry. She takes his pulse, then his blood pressure.

DR. ANDERS (CONT'D)

You need to calm down, Tom. An increase in blood pressure is expected, but you don't want to -

TOM Expected? You mean because of this?

Beat as she begins to check the repaired sutures.

TOM (CONT'D) (tightly) What else is 'expected'? I thought you told me all the side-effects last week.

DR. ANDERS Well, yes, the minor side-effects. But there are others.

Beat. Then when she doesn't volunteer the information -

TOM

Such as?

He's angry that he has to pull this information out of her.

DR. ANDERS Well, infection. That can be serious. But this looks okay.

She changes the bandage, paying little attention to his increasing anger.

TOM

And - ??

DR. ANDERS Diabetes, anemia, embolism -

TOM Wait a minute - embolism? Isn't that pretty serious?

DR. ANDERS

Yes.

(as if to say, your point?)

Beat while she takes his pulse. Then she continues almost as a careless afterthought.

DR. ANDERS (CONT'D)

Stroke, circulatory collapse, and cardiopulmonary arrest.

Tom is stunned.

TOM I could die because of this?

 $$\ensuremath{\mathsf{DR}}$$  . ANDERS The chances are something like 1 in a 100.

Beat. Tom looks horrified.

TOM

## Isn't that a little high?

She shrugs. Finishes her routine check, then leaves. Tom sits thinking for a while.

#### INT. CLINIC ROOM -- DAY

As before. Tom's laptop is on the bedside table under the phone. He sets the phone on the bed beside himself, then opens the bedside table drawer and takes out the phone book. He looks up a number in the yellow pages section and makes a call.

TOM Ah - I'm not - what department handles kidney dialysis? (beat) Okay, Nephrology please. (beat) Hello, ah, I'm -(he glances nervously at the door) - ah are you familiar with the procedure that makes someone a dialysator? (he grimaces to himself at his awkward phrasing beat) A nephrodesis, right, thanks. He grabs the pen off the table and makes a note. TOM (CONT'D) Ah, how would I, how would someone go about undoing a nephrodesis? (beat) I see. Could you -

He looks into the receiver - they've hung up. He redials, enthusiastically. TOM (CONT'D) Surgery please. (beat) Hello, could you please - how does one go about arranging someone to undo a nephrodesis? (beat) Oh. I see. (disappointed) Thank you. He hangs up, looks up the next number on the same yellow page, dials it. TOM (CONT'D) Surgery please. (beat) Hello, do you have anyone on staff trained to do a nephrodesis reversal? (beat) No? Okay, thank you. He hangs up, looks up the next number, dials it. TOM (CONT'D) Surgery. (beat) Hello, is anyone in your department trained to do a nephrodesis reversal? (beat) A nephrodesis reversal. (beat) Do you know anyone who is? (beat) I see. Thanks anyway. He looks back to the yellow pages, momentarily stymied. He then flips through, looking up other sections, finally finds what he wants, dials a number. TOM (CONT'D) Oh - sorry - I thought this was the number for Total Health Clinic. (beat) But you're still a health clinic? (beat)

(CONT'D)

TOM (CONT'D) Okay, do you have anyone on staff trained to do a nephrodesis reversal? (beat) But I've called all the hospitals in the area, and no one's -(beat) Oh. Any idea which state -

He's been hung up on again. He puts the phone down, reaches for his laptop and sets it up. He keys in, taking the time one might to establish an internet connection, then, presumably, find a list of out of state hospitals. Close-up of laptop screen? Half way through dialing the first longer long-distance number, he stops, hangs up, and thinks. She's going to know he's making this call. He reaches into his laptop case and pulls out his cellphone. He redials the number.

TOM (CONT'D)

Surgery please. (beat) Hello, I'm looking for someone trained to do a nephrodesis reversal. (beat) Oh, really? That's great -(beat) An ethics review? (beat) I see -(beat) T see -(beat) Oh. You wouldn't even make the application? (beat) I see. (beat) Thank you.

He hangs up, consults his screen, and dials another number. Long beat. He presses a number. Long beat during which Tom displays annoyance. He presses another number. Beat. He presses yet another number, his irritation increasing.

> TOM (CONT'D) Yes, I'm calling about a nephrodesis reversal. If you could call me back as soon as possible, that'd be great. Tom Wagner. 212-3367.

He hangs up, looks at his watch, pauses, then dials another number by heart.

TOM (CONT'D) Mr. Watts, please. (beat) Thanks. (beat) Mr. Watts, Tom here. I'm afraid my situation is turning out not to be as easy to resolve as I had anticipated and I was wondering -(beat) Yes, I understand, sir, and I'm sorry -(beat) Yes, but -(beat) If I could just work form home for a little bit longer -(beat) Of course -(beat) Certainly -(beat) A week? Tops. (beat) I understand. (beat) Thank you.

He hangs up, starts to dial another number, looking closely at the screen, but then decides he's too tired. He sets his laptop off to the side, settles back a bit, and nods off.

## INT. CLINIC ROOM -- DAY

Tom wakes, throws up. Looks over at Simon, who's still unconscious. Then he acts like he's suddenly remembered something important. He looks at his watch, then reaches for the phone and dials a number.

> TOM Beth! Hey! (beat) I know, and I tried to call -(beat) And I was. (beat) After I had a drink with the guys. (beat) (CONT'D)

TOM (CONT'D) Well, something happened -(beat) So Steve told you -(beat, exasperated) I've had other things on my mind! (beat) Yes, more important things. This is a nightmare. I'm throwing up all the time, I'm too tired to get any work done, my eyes, I'm all blurry, this thing in my side hurts -(beat) Well, I've already spoken with the police, and I've called a lawyer, but -(beat) I don't know. Would you disconnect? (beat) I'm well aware of that. He's lying right beside me for god's sake. (beat) Still. It's my body. He has no claim on it. What gives him, or anyone, the right -(long beat) Actually, there is one thing. Could you go by my place and bring my mail to me? (beat) Because I'm not really planning to be here for nine months. (beat, frustrated) I don't know! (beat) Yeah. Later.

He hangs up. That did not go well. He opens his laptop and begins to work.

TOM (CONT'D)

Shit!

He dials a number.

TOM (CONT'D) Steve Lambiel, please. (beat) Hey, Steve! (beat) No. Listen, could you go into my office - I need my IP files.

<sup>(</sup>CONT'D)

TOM (CONT'D) I've got nothin here on my laptop, everything's on my desktop. (beat) Right. Okay, how about just Everstein and Duchesnay. That should do me for a few days. (beat) Cool, thanks man.

He hangs up, turns his attention back to his laptop to call up the list of out of state hospitals, then dials a number. He hangs up as soon as Dr. Anders walks in. She performs her regular check of both Simon and Tom.

> TOM (CONT'D) (a little coldly) Why?

DR. ANDERS (turning to face him) I beg your pardon?

TOM Why are you doing this?

DR. ANDERS

Why. Hm. I could talk about a scientific imperative, or a medical problem that's just too sweet, or my desire to help others, or my Hippocratic Oath to save lives -

TOM

Steve says you're doing it because you can.

She considers this.

DR. ANDERS

Close enough.

MOT

And why me?

Dr. Anders appears puzzled by the question.

TOM (CONT'D) I mean, am I particularly - wellsuited for the procedure or something? DR. ANDERS

Oh. You're thinking you're special somehow. Sorry. I didn't choose you. You just happened to be sitting there.

TOM (anger developing with understanding) So you're saying this whole thing, all that's happening to me, it's just chance? Just my bad luck?

DR. ANDERS

(shrugs)

Could happen to anyone, I guess.

She leaves.

INT. CLINIC ROOM -- DAY

As before. Tom is in bed, Simon is still unconscious. Tom's making yet another call.

TOM

Surgery, please. (beat) Hello, could you please tell me, are there any surgeons at your hospital trained to do a nephrodesis reversal. (beat) Illegal? No, I'm sorry, I didn't know.

He hangs up quickly. Sits for a bit, perplexed. Then does some more searching on his laptop. Eventually he dials another number.

> TOM (CONT'D) Hello, um, I'm doing research for a course I'm taking - could you tell me - in which states is a nephrodesis reversal legal? (beat) I see -(beat) No, I have access, thanks.

He returns to his laptop. A few minutes pass as he searches for information about which states have made a nephrodesis reversal legal - close-ups of his screen at various points then his laptop message system beeps.

### TOM (CONT'D)

Hello?

LAW FIRM RECEPTIONIST (V.O.) Hello, I have a call from Gregory Dupond for Tom Wagner regarding the Wagner case.

TOM Yes, I'm here, I'll take the call.

Tom sits up and runs his hand through his hair. This is a visual call via Tom's laptop. Camera occasionally provides a close-up of Tom's laptop screen showing Robert Dupond in his law office speaking with Tom.

ROBERT DUPOND (V.O.)

Tom?

TOM

Yes.

ROBERT DUPOND (V.O.) Hello, how are you.

TOM

Fine, thanks.

ROBERT DUPOND (V.O.) Okay, I've looked into your situation, and I'm afraid you're not going to be too pleased with the results. Charges for kidnapping and assault - well, technically, battery - aren't going to stick because we simply don't have a case. No evidence, no eye witnesses, as to use of force. We simply can't prove coercion.

TOM So the cop was right. Consent is presumed. To this. (beat) That's nuts. Shouldn't the burden of proof be on Anders? ROBERT DUPOND (V.O.) Well, she's not the one trying to press charges.

TOM Okay, maybe I can't prove I got here without my consent, but I'm saying I am here, now, without my consent.

ROBERT DUPOND (V.O.) But the most we can say then is that you changed your mind.

TOM

Yeah. (as if to say, 'So?') Isn't that worth anything? (beat) I don't want to be here, now, in this situation. Isn't that good enough?

ROBERT DUPOND (V.O.)

Well, I can sort of see what you're saying, but if I've understood you correctly, isn't that rather beside the point? I mean, isn't it too late to have changed your mind?

TOM (momentarily losing it) But I didn't change my mind!! (somewhat desperately) Isn't there anything we can do?

ROBERT DUPOND (V.O.) Well I did think a bit about some creative lawyering we might do, but, well, I find we're in a bit of a paradox.

TOM What do you mean?

ROBERT DUPOND (V.O.) Well, on the one hand, because there isn't anything really unusual about it - TOM Nothing unusual??

ROBERT DUPOND (V.O.) I know, what I mean is that it can happen to anyone. There's no predisposing condition or circumstance that I can work with. It's something that can happen - as it did - in the normal, ordinary, course of one's life. So there's no leverage there. I wouldn't get any judge's attention.

TOM And on the other hand?

ROBERT DUPOND (V.O.) Well, the other hand is, it's <u>not</u> happening to everyone. If, say, one in every ten men suddenly woke up to find themselves a dialysator when they didn't want to be, then I could do something. I could make a case for the need for a new law or something. Actually, then there'd probably already be a law.

TOM

But there -

Robert carries on, getting a bit carried away.

ROBERT DUPOND (V.O.) Certainly if, say, five in ten men, hell, if half of us had our bodies hijacked at any point in time, getting them back would be as easy as, I don't know, as easy as getting a bottle of beer. And as cheap.

He laughs. Tom does not.

ROBERT DUPOND (V.O.) (CONT'D) Sorry. (beat) Look, there's just nothing I can do. I have to work within the framework of existing law. (beat) If I think of anything else, I will call.

# Yeah, okay, thanks.

Tom hangs up, dispirited. He starts to work with his laptop, but then shoves it aside. He stares at Simon for a while, then settles back and falls asleep.

## INT. CLINIC ROOM -- DAY

As before. Tom's making a phone call. He acts like it's the hundredth call he's made; it probably is.

TOM Nephrology, I mean Surgery, please.

Beat, as he puts his fingers to his temples, massaging.

TOM (CONT'D) Does anyone at your clinic perform nephrodesis reversals? (beat) Yes?

He stops massaging - as if his headache has suddenly disappeared.

TOM (CONT'D) That's great! (beat) No, sorry, I was just - how soon could I schedule the procedure? (beat) Super! (beat, then suddenly deflated) No, that's impossible. I mean even if a trip half way across the country were physically possible -(beat) How much? But - ? (beat)

Tom hangs up without saying good-bye. Stares at Simon. Stares at the tube connecting them. Stares into space. After a while, he works on his laptop. A while later, he picks up the phone again and dials.

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TOM (CONT'D)
Surgery, please.
(beat)
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TOM (CONT'D) Hello, does your hospital perform nephrodesis reversals? (beat) I see. (a little wary, unwilling to get his hopes dashed again) And what's a TNRC hearing? (long beat) And they may decide to grant a reversal? (beat) All right. (getting hopeful) How do I get a hearing? (beat, definitely excited now) Yes, please. (beat) June 15? There's nothing earlier? (beat) I see. No, that's fine. Thank you. (beat) Tom Wagner. (beat) Oh. Is there any way - I mean I was hoping - could we do this by phone, by conference call? (beat) Yes, yes I can. (beat) Very good. June 15. 11:00 a.m. Thank you. (beat) I will. Thank you.

Tom hangs up and smiles for perhaps the first time since all of this happened. But his smile quickly fades as he dials again.

TOM (CONT'D) Mr. Watts, please. (beat) Thank you. (beat) Mr. Watts. Tom. (beat) I'm afraid not, sir. My, ah, medical condition seems to be persisting a bit longer than I had expected. (CONT'D)

TOM (CONT'D) (beat) Well, I was hoping - I've got over a month's vacation time coming, and I was wondering -would it be possible to take the time now? (beat) I realize that -(beat) Well, I don't think extended sick leave applies, sir. I'm not sick. (beat) No, I'm not in rehab, sir. I swear it's nothing like that. I -(beat) Yes, sir, I believe I can. (beat) Thank you, sir.

Tom hangs up, turns his attention to his laptop, changes his mind, lies back, nods off.

INT. CLINIC ROOM -- DAY

As before. Dr. Anders enters and begins her monitoring routine.

TOM Why don't you just use a dialysis machine?

DR. ANDERS (with disgust) A machine? That's so - cold. So clinical. We are not machines, Tom. There's something about the human touch, the connection we have -

TOM But I don't want this connection.

DR. ANDERS

Hmm.

She finishes and leaves. Tom stares at Simon for a while, stares into space for a while, then sets up his laptop. There's nothing else to do. INT. CLINIC ROOM -- DAY

Tom is surfing, half-heartedly; it's clear he's bored. Suddenly something catches his attention. He searches a bit more, reads, searches, then makes a call via his laptop.

> LAW FIRM RECEPTIONIST (V.O.) Greenstone, Tafferty, Chessley, and Associates.

TOM Robert Dupond, please.

RECEPTIONIST (V.O.) One moment please.

ROBERT DUPOND (V.O.) Robert Dupond.

Camera occasionally goes to Tom's laptop screen to show Robert in his office.

TOM Robert? Tom. Tom Wagner.

ROBERT DUPOND (V.O.) Oh hi, Tom. I'm afraid I have nothing -

TOM Have you ever heard of the Good Samaritan laws?

ROBERT DUPOND (V.O.) The Good Samaritan laws?

Robert continues to work on whatever he was working on before Tom called, giving Tom only half his attention.

ROBERT DUPOND (V.O.) (CONT'D) Yeah, some countries have laws such that if you happen to pass by someone who needs help, you're legally obligated to help them.

TOM

But not no matter what, right?

ROBERT DUPOND (V.O.) No, it depends on the risk to you, the benefit to them, and the likelihood of your action achieving that benefit.

(CONT'D)

ROBERT DUPOND (V.O.) Like if you're a great swimmer and all you need do is step into the shallow end of the pool to save a life, compared to if you're a weak swimmer and you have to swim miles out against the ocean current and the person might be dead by the time you get there anyway -He stops now and gives Tom his full attention. ROBERT DUPOND (V.O.) (CONT'D) But we don't have Samaritan laws here in the States. Here you obligated only to do no harm; you're not required to do good. TOM Exactly. So -ROBERT DUPOND (V.O.) (suddenly getting it) Ah – TOM So while it might be nice of me to do this, and it might even be good -ROBERT DUPOND (V.O.) (impressed with Tom's find) You're not legally required to do it. (beat) Could be. Yeah, I'll look into it and get back to you. TOM Greatt, thanks. Soon, okay? Tom ends the call, lies back, smiling somewhat, nods off.

INT. CLINIC ROOM -- DAY

Steve enters the room in a bit of a rush, carrying a bag. Tom is still asleep. Steve sets the bag on the chair and is about to leave when Tom wakes; he has developed an awful skin rash. TOM

Неу -

STEVE

Hey, dude. I'm in a bit of - what the hell happened to your face?

TOM

What?

Tom reaches to the bedside table for a mirror and takes a look at himself.

TOM (CONT'D) Shit. Gawd. STEVE Hurt? Yeah. TOM No, but -STEVE Anyway, man, I brought the clothes you asked for - white shirt, blue tie, that okay? What's this teleconference thing anyway? TOM A TNRC hearing. (he explains happily) I finally found a clinic that does nephrodesis reversals, but I have to present my case in front of some committee, and they decide. STEVE Who's they? TOM A panel of three physicians, apparently. STEVE Why do they get to decide? Tom's good mood about the TNRC begins to fade. TOM Good question. Anyway -Steve looks at his watch.

STEVE Hey, I'd like to stay and chat - but - well - things to see, people to do! He grins, and leaves. Tom's cheer instantly turns to despondency. He used to have things to and people to see. INT. CLINIC ROOM -- DAY Tom's cellphone rings; he answers it. TOM Hello? (beat) Oh, hey, Beth -(beat) So-so. I'm not throwing up as much, but I'm still tired all the time and I've got this weird ugly rash -(long beat) I made another bunch of calls -(beat, then placating) No, I'm -(long beat) Shit happens? (beat, he can't believe she said that) Get used to it? What's that supposed to mean? (long beat) Yes, I heard you. (beat) Of course, I'm happy for you. Congratulations. (he doesn't sound happy, he sounds jealous) Yeah -(beat)

He looks at the receiver, puzzled - she's hung up on him.

INT. CLINIC ROOM -- DAY

Tom is preparing for his TNRC hearing; Simon is still unconscious. While in bed, Tom shaves, combs his hair, puts

on the clean shirt and tie, adjusts the bedding around his waist, then checks his appearance in a mirror. Grimaces at the rash.

He then sets up his laptop, testing and adjusting the angle. He sets some notes discreetly close by. He checks his watch, then dials a number.

> TOM Hello, this is Tom Wagner. I have a TNRC scheduled for this morning? (beat) Thank you.

He waits. Camera to his laptop screen as it comes to life, and occasionally throughout the hearing. Three physicians, looking very official and authoritative, sit at a large conference table - DRS. CHAN (male), KLEIN (male), and LAFLEUR (female).

DR. CHAN (V.O.)

Hello, you are Tom Wagner?

TOM Yes, I am. Hello.

DR. CHAN (V.O.) And you are prepared to present your case for a Therapeutic Nephrodesis Reversal?

TOM

Yes, I am.

DR. CHAN (V.O.)

Go ahead.

TOM

Okay - thank you - as I understand it, I must indicate to you that proceeding with the nephrodesis endangers my life or my health. And I take health to include both my physical and psychological health.

Dr. Chan nods.

TOM (CONT'D) I have been informed by my physician that among the side-effects of a nephrodesis are -(CONT'D)

TOM (CONT'D) (he consults his notes) - diabetes, anemia, infection, embolism, stroke, circulatory collapse, cardiopulmonary arrest. All of which certainly endanger my physical health. Dr. Chan nods. TOM (CONT'D) And if the tube - the cord - should become disconnected, I may bleed out and die. DR. CHAN (V.O.) Is there any reason that should occur? Was the suturing done in a sloppy manner, for instance? Or has some injury occurred that has weakened the sutures? ТОМ No -(he smiles, nervously) But I've been desperately close to vanking it out myself on several occasions. This doesn't seem to move them much. DR. CHAN (V.O.) And why is that? TOM Well, I didn't want this. Tom expects a reaction, but there is none. TOM (CONT'D) (somewhat sarcastically) Apparently, I just got lucky. To Tom's surprise, they accept this unsmiling. Tom continues. TOM (CONT'D) As for my psychological health, well, due to the nausea and fatigue, I can't do much work -(CONT'D)

TOM (CONT'D) I suspect I will lose a promotion I believe I was in line for. Also, this is putting strain on my personal relationship. As he says all this, he realizes it doesn't sound too bad. TOM (CONT'D) I'm upset, I'm angry, I'm frustrated. Now he sounds like a child. TOM (CONT'D) This is taking nine months out of my life. It's messing up my plans, my desires, my hopes. That sounded just plain selfish. Even so, they are oddly silent. TOM (CONT'D) I don't want this, it's as simple as that. I didn't consent to this, I am an unwilling participant. There is still no supportive response. He tries again. TOM (CONT'D) (emphatically) I don't want it. I don't know how to put it more plainly. Beat. DR. CHAN Yes, but why don't you want it? TOM (confused) Does that matter? The three doctors confer very briefly. DR. CHAN (V.O.) Mr. Wagner, we don't deny that the nephrodesis has caused, and is causing, you some distress. This is normal. But the very fact that you've been able to offer convincing arguments in your favor convinces us

that your psychological health is

(CONT'D)

not in danger.

DR. CHAN (V.O.) (CONT'D) Nor does your physical health seem to be in exceptional danger. The criteria for a reversal are not met, therefore, and your application is denied. Dr. Chan closes a file. DR. CHAN (V.O.) (CONT'D) Best wishes, Mr. Wagner. They get up to leave. TOM Wait a minute! They turn back to the camera. He hasn't quite come up to speed to the catch-22, but he is definitely agitated about the outcome. TOM (CONT'D) That's it? You've decided my future in just -(consulting his watch) - three minutes? DR. CHAN (V.O.) Good day, Mr. Wagner.

The screen goes blank. As does Tom. He's blown away by this result. He sits there, defeated. His defeat turns to anger, then despair, and just as he masters the struggle to get up the nerve, to just do it, just as he reaches to the cord, he has it in his hand, he wraps his fist around it, just as he's about to yank it out of his side, he's opened his mouth to holler with the pain -

#### SIMON

(weakly) Hello?

Tom freezes. Looks over at Simon. Who has regained consciousness.

Simon weakly takes in his surroundings. Is silent for a moment.

SIMON (CONT'D) (weakly, calmly) Was I in an accident?

Tom recovers, slowly loosens his grip of the cord.

TOM You don't know?

# SIMON

No...I remember I was very sick. And I was determined to finish my tour. sadly. My last tour. I remember Boston... (then, deflated with understanding) I don't remember Carnegie.

Tom moves right by that.

TOM (gesturing at the cord joining them)) You didn't ask for this?

## SIMON

For what?

Simon looks to where Tom is sort of pointing. His eyes widen.

TOM If I stay attached to you for nine months, you'll live.

Simon's eyes widen even more.

SIMON Really? Oh - but -(he is overjoyed this is a miracle!) Thank you!

TOM I didn't agree to this.

SIMON

Oh.

Beat.

SIMON (CONT'D)

Oh.

TOM (again, just to be sure) You didn't ask for this?

SIMON Well, when I found out that I had just a few months, I'm sure I said I'd do anything. And I may have said something like 'Do whatever you can' - but I never meant - I didn't know Dr. Anders walks in. It's clear Simon knows her - he is not puzzled at all by her appearance. DR. ANDERS Good morning, Simon! So nice to see you! She formally introduces them. DR. ANDERS (CONT'D) Simon Arture, Tom Wagner. SIMON Yes, we've met. He's told me -She cuts to the chase. DR. ANDERS It's only nine months. Well, less than seven now. SIMON Yes, but -DR. ANDERS Don't you want to live? SIMON Of course I do, but -DR. ANDERS Wouldn't you do the same for him? Beat.

SIMON Of course I would.

We're not sure we believe him.

They are all silent as Dr. Anders does a rather thorough check of Simon. They both ignore Tom for the duration. Finally Tom speaks up.

TOM Even so, I think we should - This next speech seems mostly for Simon's benefit, as she's clearly dismissing Tom's distress. No surprise.

DR. ANDERS You're having trouble accepting all that's happening, there are a lot of changes involved, we understand that. But it'll all work out, you'll see.

She continues attending to Simon. Tom opens his mouth, then closes it. Where to begin. As soon as Dr. Anders leaves, Tom turns to Simon, only to see that he's nodded off. He opens his laptop and tries to get some work done. But after a short while, he gives up and nods off as well.

INT. CLINIC ROOM -- DAY

Tom and Simon are both asleep. Tom's phone rings; he wakens and answers it.

TOM Hello? (beat) Oh, hello. (struggling to wake up) Thanks for calling me back. (beat) Simon wakes as well. TOM (CONT'D) February? As in next year? (beat) But that'll be too late! (beat) No, thanks. (beat) Bye. SIMON Too late for what? Tom looks at him, guiltily. TOM

Oh, just -

SIMON Are you trying to -(he can't bear to say 'kill me') - get disconnected? Tom is silent. SIMON (CONT'D) So you're really not okay with this. Tom pauses before replying. TOM Not exactly. Beat. TOM (CONT'D) You are? Simon doesn't reply. TOM (CONT'D) Look, I don't want you to die, but I also don't want to give up my life for yours. I'm not Jesus fucking Christ, okay? Beat. SIMON (quietly) It's not your life. It's only nine months. TOM Well I don't want to do that either. (beat) Look, I'm sure there are people out there who would be willing to give up nine months of their life for you, but I'm not one of them. So sue me. I mean, is that a crime? (beat) Does that make me a bad person? (beat) I mean, since when is sacrifice the norm, the standard by which I'm judged?

Simon doesn't respond. Tom busies himself with his laptop. Several moments go by.

SIMON Not sacrifice. Just a little less selfishness.

TOM Oh, now I'm selfish? Because I want to live my life as I choose?

SIMON Well...if doing that is at the expense of another -

TOM Oh please, look who's talking.

Simon says nothing. Tom tries to work again. And several moments go by.

Simon tries again.

SIMON But don't you think it's immature to be so - so focused on oneself?

TOM So now I'm immature? It's, what, childish to want to choose one's life?

Simon says nothing. Again Tom tries to work. Again several moments go by. Simon is a bit angry now.

SIMON Actually, lots of people do give up their lives for someone else's life. It's called being a soldier.

Tom pointedly stops his work.

TOM You're saying I have a <u>duty</u> to do this? (incredulous) How do you figure that?

Again Simon is silent. Tom fumes. He tries to resume his work, but he realizes quite quickly that he's far too tired. He closes his laptop and settles back to sleep. Simon also falls asleep.

INT. CLINIC ROOM -- DAY

Time has passed. Simon is looking a bit better, Tom a bit worse. Simon's watching tv; Tom's trying to work on his laptop, with increasing irritation. Finally, he speaks up.

TOM Could you please at least turn that down?

Simon looks over to him, turns the tv off, picks up a paperback and begins reading. He starts to hum, unconsciously, tunelessly. Tom glares at him. Simon doesn't see it. Tom tries to work again, can't concentrate.

#### TOM (CONT'D)

God damn it!

He slams the laptop shut, lies back seething. Simon stops humming, but without realizing that's been the irritant.

INT. CLINIC ROOM -- DAY

Time has passed. Tom's skin rash is gone. He's shaving. As soon as he sees Simon wake, he speaks.

TOM

So do you think you're up for a field trip today?

SIMON

What do you mean?

TOM

Well, you definitely seem on the mend, and if I don't show up at work soon, I can most certainly kiss Senior Architect goodbye.

SIMON

Surely, they don't expect - I mean, there'll always be another chance.

TOM No. There won't. One of the seniors is retiring in the next six months or so. And it's a long wait until the next one does.

SIMON Surely there are other architectural firms. TOM

Yeah, but I've already got five years as a junior at this firm. I don't want to start all over at another firm.

#### SIMON

But I don't see what difference I mean can't you just, can't you do your work from here? Isn't that what you've been doing?

TOM

Well, yes, but it's also important to - to just be there. Presence!

#### SIMON

But -

TOM

It matters, okay! Take my word for it. Sure, I can work from here when you're not watching tv or humming or listening to the radio -

Simon protests. Tom continues.

TOM (CONT'D) But you've got to be there to stay in the loop. Surely it works the same way in -

SIMON

Not really.

Beat.

#### SIMON (CONT'D)

Though I suppose if you're a studio performer, I guess, yes, you have to 'be there', as you say, in order to get the work -

## MOT

See? Same thing. Out of sight, out of mind. I'll stop getting the highprofile projects. Then when it's time for review, my performance will look ho-hum, if you know what I mean.

Beat.

SIMON But how are we -He looks at the cord, the clinic room -SIMON (CONT'D) I don't think -TOM I don't know! Work with me, damn it! Simon is silent. SIMON Why don't you just ask for a leave of absence? TOM Right. A <u>nine-month</u> leave of absence? Simon shrugs. TOM (CONT'D) If I were taking a year off to run for political office or something, that's one thing, but this? Tom gestures vaguely. SIMON (very veiled sarcasm) Right. Not nearly as important. TOM (pleading)) At least give it a shot? SIMON Well -They both manage to get up, then get washed and dressed. It takes a long time. The process is awkward and annoying, not comical. As they prepare, they almost disconnect a couple times, but Tom is oblivious to it; it's Simon who sees it

> TOM Okay, let's do it!

ready.

and accommodates himself as best he can. Finally they are

Tom, in 'go to' mode and preoccupied with himself, strides toward the door, forgetting the fragile attachment. Simon leaps after him and ends up clutching at him like a frightened child to his mother; Tom shoves him away, Simon stumbles, and just in time Tom reaches out and grabs him to keep him from falling and breaking the connection.

> SIMON Tom, I'm sorry, I can't do this.

He sits on the chair, already worn out.

SIMON (CONT'D) It's just too risky. You'll go one way, I'll go another, and before we know it, I'll be dead. Please.

Tom sees that he's right.

TOM What if we cuff ourselves together we can use the restraints they used on me the first few days.

Simon raises his eyebrows. This is the first he's heard of this.

TOM (CONT'D) (by way of explanation) I was pretty angry.

SIMON You still are.

#### TOM

Yeah, well.

Tom rummages in the bedside table drawer and finds the cuffs. They tie Simon's right hand to Tom's left hand securely enough to suit Simon. They'll have to break the cuff well before the connecting tube gets pulled out.

TOM (CONT'D) Okay? We can do this?

SIMON Okay. But please. Be careful!

Tom picks up his laptop and they leave their room.

INT. CLINIC CORRIDOR -- DAY

They walk down a corridor and out a door into the clinic parking lot.

INT. CLINIC PARKING LOT -- DAY

They look at Tom's Mazda Miata parked in the lot and realize simultaneously that that's not going to work - one of them would have to climb over the stickshift. Tom flips up a flap on his laptop bag and pulls out his cellphone, tugging on Simon as he does so. He dials a number, awkwardly. The whole process is awkward, shifting the phone to his free hand to hold it to his ear or keeping it in his cuffed hand, Simon's cuffed hand being tugged this way and that...

> TOM Beth? Hey, it's me. Look, can you come pick me up at the clinic? (beat) No, Simon and I are - I'm going into the office today. I really should put in an appearance. (beat) Well, can't you just say you have to leave for half an hour? (beat) I know your job is important, I didn't mean that. (beat) Okay, look, never mind. You said to call if I needed something.  $\ensuremath{\mathsf{I}}$ called. But forget it. (angrily) We'll figure something out.

He hangs up.

SIMON Not a bus, and not the subway, please god.

Tom dials again.

TOM

Hi, can we get a taxi at the Anders Clinic on Seventh? (beat) Thanks. A taxi pulls into the lot. The driver takes a good look at them, before and while he rolls down his window as he rolls to a stop. Tom and Simon approach the taxi's back door.

## TAXI DRIVER

Are you sure you should be travelling in - in your condition?

Tom is caught off guard by the patronizing question, but then responds.

TOM Well that's my call, isn't it.

He takes another step toward the taxi, but just as Tom reaches out to open it the back door, the taxi driver locks it by remote control. Tom looks at the driver and waits, angrily.

> TAXI DRIVER (shaking his head) Sorry, I don't think I have the insurance to cover this if...

He drives forward, then around them to go back out of the lot. As he passes them, he calls out.

TAXI DRIVER (CONT'D)

Try A-1.

Tom goes through the annoying hassle of getting his cellphone back out. He dials the operator.

TOM A-1 taxi please. (beat) Hello, can I get a taxi at the Anders Clinic on Seventh? (beat, with irritation) Well, now! (beat, he looks at his watch) No, I'll try someone else.

He ends the call and as he abruptly takes a few paces in frustration, Simon is caught off balance. He stumbles, and falls, Tom is pulled to fall on top of him. Somehow the cord gets dislodged from one of them, Simon screams, there's blood, more screams, a tangled struggle as Simon or Tom tries to reconnect or as Tom tries to undo the cuff and

totally separate himself from Simon, we can't tell. Blackout. INT. CLINIC ROOM -- DAY Tom and Simon are back in their beds, both unconscious. Dr. Anders is checking the repaired connection, all the monitors, their vitals. Tom stirs. Moans. His eyes open. He sees Dr. Anders. TOM (weakly, as if he might not be completely lucid) You said you didn't take anything from me. DR. ANDERS (calmly) I didn't. He closes his eyes, but speaks with some strength. TOM Like hell. You took my freedom, my choice. My life. DR. ANDERS

Oh don't be so melodramatic.

He laughs, incredulous at her accusation, but lapses back into unconsciousness or sleep.

## INT. CLINIC ROOM -- DAY

Collage to indicate the passage of time: Tom trying to work while glancing with irritation at Simon watching tv; Tom staring into space; Tom sleeping; Tom staring out the window, watching the world go by; Simon watching tv; Simon reading; Simon sleeping.

## INT. CLINIC ROOM -- DAY

Tom and Simon are entering the room, awkwardly, what with the connection, plus each has an IV stand.

SIMON (enthusiastic, hopeful) Dr. Anders says we might be up for a walk around the parking lot soon.

Beat.

TOM (sarcastically) Won't that be fun.

They shuffle into the room, and awkwardly get back into their beds. Tom flips his cellphone open and dials a number.

> TOM (CONT'D) Steve Lambiel, please. (beat) Hey Steve. (beat) Oh, you know. Hey, the monthly meeting is still on for this Friday? (beat) Could you take your laptop in - for me? I mean, set up the call you've got video, right? (beat) Well, I know, but it's better than nothing. (beat) Cool, thanks. (beat) Later.

Tom ends the call, lies back, and nods off. Simon has already fallen asleep.

INT. CLINIC ROOM -- DAY

Tom is awake and alert in his bed, wearing his shirt and tie; his laptop is set up. Simon is watching tv.

TOM Look, could you turn it off and stay quiet for just an hour? I - I'm set up to attend the monthly meeting please?

Simon silently cooperates.

We hear everything, and occasionally the camera gives us a shot of Tom's laptop screen so we see a meeting room at Tom's architectural firm, with various people in attendance.

> MR. WATTS All right, let's get started. Tom, good to have you with us.

TOM Thank you sir. Good to be here.

MR. WATTS Okay, first up, the Everstein project.

TOM I believe I have a solution.

MR. WATTS (a little surprised) Oh? Okay, go ahead.

Tom taps a few keys on his laptop.

TOM Have you got that?

MR. WATTS Yes, we've got your blueprint...

TOM Okay, well, you'll see that - well, you all know how to read a blueprint -

He laughs awkwardly, unaccustomed to participating this way. There is a silence then that he mistakes for people considering and perhaps being impressed by his plan, but then Mr. Watts speaks.

> MR. WATTS Ah, Tom, the Eversteins changed their mind about the garage. They want it on the other side now.

TOM (disconcerted) Oh - well, that's easy enough to fix

He turns to his laptop as if he'll make the change right there and then.

MR. WATTS And you'll recall that the other side is where, due to the lay of the land, the split level must be. TOM Okay... (this is still fixable) MR. WATTS And the only thing they want above the garage is the guest room. TOM (okay, now it's not fixable) But that means - I see. He tries to make light of the matter, but doesn't quite succeed: he's pissed off - all that work for nothing! TOM (CONT'D) You could've told - I mean, I guess I didn't get that email. MR. WATTS (making a point) Tom, you know we don't send out emails every time the client changes his mind about something. (beat) How many of you didn't know the Eversteins changed their mind about the garage. No one raises a hand, some awkwardly not doing so. Point made. The meeting proceeds. MR. WATTS (CONT'D) All right, moving on. Kevin, you were going to give us a report on

> KEVIN Ah, yeah, I was, but...I Can't get it to work right. I guess this can be the report.

Laughs all round.

the new tech?

MR. WATTS (smiling) So we won't make a purchase decision just yet.

MR. WATTS (CONT'D) Steve, any problems with the Prabha project?

Tom shows a bit of surprise - Steve has the Prabha project?

STEVE

No sir. It's coming along.

MR. WATTS Okay, Pinker - Dylan, any problems?

Tom is a little more disconcerted. He hasn't even heard of the Pinker project. He also hasn't heard of Dylan.

DYLAN Not yet. Apart from what we discussed yesterday.

MR. WATTS And that's resolved?

DYLAN

Nicely.

MR. WATTS Okay, the McManns. What's happening with the McManns? Hector?

HECTOR Nothing. They still haven't made a decision.

MR. WATTS But it's been -

HECTOR (frustrated) I know!

TOM Perhaps - this is still the staircase problem, right?

Hector nods. Tom resumes.

TOM (CONT'D) Perhaps - I know it'll be a lot of work, but maybe if we prepare models of all three versions. Maybe they're just having trouble visualizing the different staircases. (Tom's babbling a bit, beginning to trip over himself to be noticed, in a qood way) If they could see it, if they could see all three, maybe they could make a decision and we could move forward on it. And not lose them.

#### HECTOR

Well, they've already got a model of the first version. The staircase is the only thing that's changed!

### MR. WATTS

That may be so, but I think Tom may have a point. They may be having trouble imagining the differences.

Tom smiles. Redeemed.

MR. WATTS (CONT'D) That's it then? Any new business? (beat) All right then, we're adjourned!

Tom logs off, lies back, loosens his tie and unbuttons his shirt.

TOM (mostly to himself) God, I'm so tired.

SIMON Yeah, well, your body's working for two.

TOM (angry, but too tired to yell) Yeah and I'm tired of it. I'm tired of carrying you, I'm tired of fuck it. I can't concentrate anyway with all this. He shoves his laptop to the side.

SIMON (confused) But I thought it went well.

TOM

It went awful. It was a mistake. I should never have -

SIMON

Well, there was the Everstein thing, but I thought you recovered quite nicely after that - suggesting the models -

TOM

You don't get it. It's because I let them see me - like this. From now on, no matter what I do, no matter how hard I work no matter how good I am - they'll always see me - like like some fucking invalid. (beat) I used to be, they used to look at me... I don't know, I was the 'go to' man. People could trust me to get the job done. But now -

Beat.

SIMON Being a dialysator doesn't preclude being a 'go to' man.

Beat.

TOM Yes it does.

## INT. CLINIC ROOM -- DAY

Simon is watching tv; Tom has his laptop open, but he's not really working - he keeps looking at the tv. He looks scruffy, hasn't shaved in a while. He's also gained some weight. His phone rings; he answers it.

TOM Hello? (beat) Hey, Beth! (beat) Yeah -(beat) No, but -(beat) I see. (beat) I see. (long beat) Of course, sure we can. (beat) Bye.

He hangs up the phone and stares at it.

TOM (CONT'D) She broke up with me. (beat) Apparently I've changed. (beat, he doesn't know whether to laugh or cry) And I'm no fun anymore.

Simon wisely doesn't respond. Tom returns to his laptop, then stares out into space, then tries to work again, then stares into space again, clearly having trouble concentrating. He glances at Simon watching tv several times. He begins to become irritated.

> TOM (CONT'D) (glaring at Simon) Look, it's not like I can just -

> SIMON Any lower and I won't be able to hear it.

TOM Well can't you read instead?

SIMON

Yes. (sounding like a child) But I want to watch tv. TOM It's just (with great frustration) - you're always here!

INT. CLINIC ROOM -- DAY

Tom is out of bed, doing some half-hearted stretching. His attention is suddenly caught by the view out the window. He quickly - too quickly -

SIMON

Careful!

He quickly goes closer to the window.

TOM My car is gone! My fucking car's been stolen! Jesus Christ!

He returns to his bed, looks up a number in the phone book, and makes a phone call, still standing.

TOM (CONT'D) Hello, I'd like to report a stolen car. (beat) A silver Mazda. Miata. (beat) MHX 338. (beat) Just a minute.

He gets his wallet out of the bedstand and flips it open.

TOM (CONT'D) Serial number 76959-G-R-382. (beat) Yes, thanks. (beat) Yes? (beat, then surprised) What? (beat) But -(beat) Of course, I understand. (beat) (CONT'D)

TOM (CONT'D) Yes, I'm sorry. (beat) Thanks. He hangs up and sits there dully. SIMON Well? TOM It wasn't stolen. They have it on their repossession list. He looks up another phone number and dials. TOM (CONT'D) Hello, I'm calling about a mistaken repossession. (beat) Tom Wagner. W-A-G-N-E-R. (beat) Mazda Miata. MHX338. (beat) That's right. (beat) But I'm set up for automatic withdrawals. (beat) I see. You're sure? (beat) Yes, I'll do that. He hangs up, looks up another number, and dials. Beat. He presses a number. Beat. He presses another number. TOM (CONT'D) Hello, this is Tom Wagner. Could I please speak to someone about my account? There seems to have been a problem with some automatic withdrawals I'd set up. (beat) Yes, W-A-G-N-E-R. (beat)

Hold on.

He punches in his password numbers on the phone.

TOM (CONT'D) Thank you. (beat) I've been informed that the last two automatic payments to Downtown Mazda weren't made. (beat) But that's impossible. (beat) What did you say my balance is? (beat) But -(beat) Weekly? Since when? (beat) The Anders Clinic? He sits down now, hardly aware he's doing so. TOM (CONT'D) For <u>how</u> much? (beat) I see. (beat) No, thank you. I'll get back to you. (beat) Thanks. He carefully puts down the phone, then says in disbelief. TOM (CONT'D) They're charging me for all this. Dr. Anders happens to walk in at that moment. TOM (CONT'D) (still in disbelief, but of course with rage creeping in) I have to pay for all this? DR. ANDERS Well, the room, your meals, the medications, our care - it all costs. TOM (sputtering) But -Tom is absolutely at a loss. This is beyond preposterous. He has to pay for something he didn't ask for, doesn't

want...?!

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But – SIMON (weakly) I'll pay you back. TOM (recovering) Damn right you will! Tom continues to fume as Dr. Anders performs her routine check, then leaves. INT. CLINIC ROOM -- DAY Another collage to indicate the passage of time. INT. CLINIC ROOM -- DAY Steve enters the room; Tom is awake, but Simon is asleep. STEVE Hey, dude. TOM Steve, hey. STEVE How's it goin'? TOM (wanly) Oh, you know -(trying to rally out of the depressed state he's fallen into) So how's things at Smith, Watts, and Barrow. Steve pauses, realizes Tom doesn't know. STEVE Ah - when's the last time you checked your mail?

TOM (CONT'D)

TOM (waves at a pile on the table) Oh, I don't know -

Steve picks up the accumulated pile, flips through it, pulls out an envelope from Smith, Watts, and Barrow. Hands it to Tom. Tom opens it, reads the letters and reacts.

> TOM (CONT'D) Shit! Can they do this?

STEVE Man, your vacation time ran out weeks ago. They expected you back full-throttle.

TOM Geez, can't they give a guy some slack?

Steve shrugs.

STEVE Kev and me, we tried to carry you, but -

TOM I figured I'd lose Senior, but -

Steve looks away. Tom realizes Steve got it.

TOM (CONT'D) (in disbelief)

No.

STEVE (as in 'what's wrong with me?') Hey!

Beat.

TOM Maybe if I -

STEVE Dude, they've already hired -

TOM Tell me it's just a short-term contract -

Steve shakes is head.

STEVE

Even if they'd been sure you were coming back, what are they gonna do, fire Dylan after six months just 'cuz you're ready to return? That's not fair.

Beat.

TOM (exploding) This isn't fair! This whole fucking thing -

Beat.

TOM (CONT'D) So now what.

Beat.

STEVE You could sell your car. I mean, I know -

Tom laughs bitterly, gestures out the window. Steve looks out. It isn't there.

STEVE (CONT'D) You already sold it? And didn't tell me! Dude!

TOM Missed a few payments.

Beat.

TOM (CONT'D) Didn't realize they were taking direct out of my account for all this. long beat.

STEVE You've got to pay for all this?

Tom shrugs.

STEVE (CONT'D) Geez. Unbelievable. How do they figure that?

Tom shrugs. Steve looks pointedly at Simon.

STEVE (CONT'D) You've got to do something, man!

TOM (anguished) What??!! What can I do??

Beat.

TOM (CONT'D)

Even if somehow I prove to - someone - that I'm an unwilling participant, what are they going to do <u>now</u>? What <u>can</u> they do?

STEVE It's just a few more months, right? Then you can start over somewhere.

TOM Yeah, with a reference letter that says I was fired.

He picks up the letter then tosses it aside.

TOM (CONT'D) Just as well. If I went back, now, after this, everyone would it wouldn't be the same.

Steve doesn't disagree. Tom notices that.

TOM (CONT'D) (trying to dismiss Steve) Hey man, I've got stuff -(he waves vaguely at his laptop, at nothing)

Steve gets it, and leaves.

INT. PARKING LOT -- DAY

Tom and Simon are walking around the parking lot, connected but without IV stands. Suddenly Tom cries out and reaches down to grab his leg. Simon unconsciously and almost simultaneously mimics Tom's movement so as not to disconnect, even though it's not necessary - it's obviously a habit he's developed. Tom gives him a look as if to say it was unnecessary; Simon gives him a look back, of embarrassment and/or apology. SIMON What's wrong - shall I call for help?

TOM No - it's just a leg cramp.

Tom hobbles to a nearby picnic table, Simon doing his best to follow, without hobbling, after him. They sit; Tom massages his leg.

TOM (CONT'D) Either this is another fucking sideeffect or I've gotten so out of shape I can't even handle a walk around a fucking parking lot!

He continues to massage his leg; Simon just sits, enjoying the sun, the breeze.

SIMON This is nice.

TOM (giving him an 'are you nuts?' look) This is boring.

Simon continues to enjoy the time outside, then starts to nod off and almost topples. Tom reaches out to grab him, to wake him.

> TOM (CONT'D) Better go back inside.

Simon nods and they shuffle back inside.

INT. CLINIC ROOM -- DAY

Simon's watching tv. Tom's trying to work on his laptop, again with irritation. He shuts his laptop in anger and puts it on the bedside table.

SIMON I can turn it down.

TOM Don't bother. You win. It's not like I've got any work to do, thank you very much. Tom starts to roll over onto his left side, the one with the connection, but stops himself just in time. He then rolls over onto his other side, but cries out as that has tugged on the tube.

## TOM (CONT'D)

Damn it!

He lies flat on his back, fuming, staring at the ceiling.

INT. CLINIC ROOM -- DAY

Dr. Anders walks in. Simon is asleep. She checks their monitors briefly.

DR. ANDERS (to Tom) Anything I can get you?

TOM (bitterly) Yeah, you can get me my life back.

## DR. ANDERS

Oh quit being such a prima donna. Lots of people don't get to live the lives they'd like. What makes you think you're entitled?

Tom is a bit flabbergasted by this, and has no answer. She leaves.

INT. CLINIC ROOM -- DAY

Tom is unenthusiastically opening his mail. He reads a letter, laughs a little hysterically, puts the letter down, stares at it, laughs a little more, bitterly, then picks up the phone and dials a number.

TOM Hey, Steve. (beat) Listen, I've been evicted. (beat) I know. (beat)

(CONT'D)

TOM (CONT'D) Well I was wondering if you could go by and get my stuff. I don't -(beat) Well, I was hoping you could keep it there, in your apartment, until -(beat, then with a measured calm) Renting one of those storage rooms would be a very good idea (now breaking into a vell) If I had any fucking money! (long beat) Thanks, man. I owe you. (beat) Later.

He hangs up. Looks over at Simon who is suddenly busy reading a book.

INT. CLINIC ROOM -- DAY

Dr. Anders walks into their room, all cheerful, holding some test results in her hand.

DR. ANDERS I've got good news!

Simon looks at her eagerly; Tom doesn't give a flying fuck.

DR. ANDERS (CONT'D) We've passed a critical point in the process.

(CONT'D)

DR. ANDERS (CONT'D) Chances now increase tenfold that, since we've reached this point successfully, we will reach the end point successfully.

SIMON That is good news. (beaming with relief) I can't thank you enough!

> DR. ANDERS (to the unresponsive Tom)

Unfortunately, that also means that, from this point on, chances are ten times greater that a disconnect will be fatal to you as well.

Beat.

TOM You mean that wasn't certain before now?

DR. ANDERS (slipping her way past this point) Well, the interdependence is gradual, it's hard to say exactly -

TOM But you said - when I asked -

He waves her away. Doesn't matter much now, does it. Pointedly ignores her as she fusses with the equipment a bit before leaving. Simon looks over at Tom all smiles, but immediately looks away, seeing the dull despair in his face, the exhausted storm.

INT. CLINIC ROOM -- DAY

Collage to indicate the passage of time.

INT. CLINIC ROOM -- DAY

Simon's reading; he's looking healthier these days, more energetic. Tom's doing something on his laptop. He tosses it aside in frustration.

> TOM Tell me again why I'm giving up my life for your life? Are you that much better than me?

SIMON You're not giving up your whole life. Just nine months.

TOM Just nine months? (laughing hysterically) Look at me! In just five months, I've gone from up and coming architect to - for god's sake, man, I have no car, no job, no apartment SIMON No savings? TOM Not any more. Paying for all this cleaned me out! It's not like I planned on supporting someone else. He looks at Simon pointedly. SIMON Well there's not a lot I can do at this point, is there. (beat) And it's not exactly my fault. (beat) Can't you collect unemployment? He half nods at his laptop. TOM Loss of job has to be "through no fault of your own". SIMON But it wasn't your fault. TOM They won't see it that way. (beat) Besides I'd have to prove every two weeks that I'm able and available for work. SIMON Well, can't you get medicare or something? TOM I'm not ill. I'm not injured. SIMON They should have another category.

TOM Like what? Name one medical condition other than illness or injury that requires an extended absence from paid employment.

He can't. They're men. Pregnancy doesn't even occur to them (nor, consequently, the need/importance of maternity benefits...).

TOM (CONT'D) And I don't qualify for disability because the condition has to last at least a year and/or end in death.

He hits the laptop and falls back onto the bed.

TOM (CONT'D) So what the fuck am I supposed to live on?

INT. CLINIC ROOM -- DAY

Collage to indicate the passage of time.

INT. CLINIC ROOM -- DAY

Tom and Simon are watching tv, a mid-afternoon soap opera.

TOM Which one is her husband again?

They watch in silence for a bit, then the show ends. Simon turns the tv off and picks up a book. Tom just sits there doing nothing.

TOM (CONT'D) You know, after all this, I'd like to hear you play some time.

SIMON (a little awkwardly) Oh - well - I've decided to give that up.

Tom stares at him, curiously: what career change does he have in mind?

SIMON (CONT'D) I've been giving my life some thought, see - and, well, life's too short. (beat) I've spent my entire life practicing. Ever since I can remember. I've been practicing. (beat) Well - there are other things I want to do. Or not. I've spent days, here, just -(he gestures vaquely) - sitting around and watching tv. It's nice. I'd like to do more of that. Tom stares at him, incredulous. TOM I'm going through all this just so you can watch tv all day? Simon shrugs. TOM (CONT'D) What happened to paying me back? Simon shrugs again. Tom becomes angrier - the money's the least of it. TOM (CONT'D) Listen, I didn't give up nine months of my life my car, my girlfriend, my apartment, my job - my <u>career</u> just so you can sit around and do nothing all day. SIMON What, now I have to be worthy of your great sacrifice? Beat. TOM Damn right you do! Beat. Tom can't believe this. TOM (CONT'D) You ungrateful - !

SIMON Oh no. No you don't. There's no way you're going to make me feel guilty. (holding in his anger) Yes I have a life thanks to you. I am grateful. But there are limits.

TOM

Limits?

Tom laughs, hysterically, at the irony. Beat. Then Simon lets go - it's finally his turn to get angry.

SIMON Am I supposed to live my life for you now? The way you want me to live it? (beat, yelling) I didn't ask you to do it! I don't owe you anything!

INT. CLINIC ROOM -- DAY

Time has passed. Dr. Anders is in their room, fussing over the equipment, perhaps disconnecting some of the IV lines as a gradual preparation for the coming disconnect. Tom has not become any fonder of her.

> TOM What would you have done if my body had rejected this?

Beat.

DR. ANDERS Funny you should mention that.

TOM (immediately suspicious) Why. What's so -

DR. ANDERS If, at the time, you'd been taking any one of a number of drugs all with their own serious side effects, I might add <u>we'd</u> have rejected <u>you</u>.

Tom's silent. He's okay with this. But she continues.

DR. ANDERS (CONT'D) And after the fact, well, back in the first week or so, if you'd taken a specialized immunostimulant -'course you would've had to find a doctor willing to prescribe it - in time - which is stupid because there's no reason it shouldn't be as available as aspirin -She carries on, blithely, seemingly unaware of Tom's increasing rage. DR. ANDERS (CONT'D) I don't even think it's legal everywhere - but if you'd taken it back at the beginning, your immune system would've most certainly induced rejection. You -(she nods to Tom) - would have been free to carry on with your life as planned. And you -(she nods to Simon)

- I imagine we could've found another dialysator for you.

A beat. Another beat.

TOM (in a cold, tight rage) And you didn't tell me this because...?

Tom suddenly reaches over with both hands to the connection. Dr. Anders does not move to stop him.

TOM (CONT'D) Why? WHY?

He has the cord firmly in his grip.

TOM (CONT'D) Because you didn't want me to know? Because you wanted to control me? My life? (he screams now) It's MY life! It's my fucking body!

And yanks the cord out of Simon.

SIMON (screaming as well) NO!! Simon tries unsuccessfully to keep it anchored at his end. They struggle with the cord. Blood begins spurting. The camera focuses on the two of them; Dr. Anders does nothing to interfere one way or the other.

## INT. CLINIC ROOM -- DAY

Time has passed. Dr. Anders enters the room. Tom is in sorry shape indeed. His hands are cuffed to the bedrails again. Simon is lying still on his bed; healthy enough, but a little emotionally detached.

> DR. ANDERS (to Tom) I know you're depressed and all that, but we do wish you'd start eating again. You're on IV nourishment, but solid food is really better for you.

Tom doesn't respond.

INT. CLINIC ROOM -- DAY

Time has passed. Dr. Anders enters the room. Tom is still in very bad shape.

> DR. ANDERS (brightly) Good morning! Tom, we have good news for you! Hope it'll cheer you up!

TOM (hoarsely) The disconnect is today?

DR. ANDERS Oh, no, sorry, that's still two weeks away. But - we're going to need you even after the disconnect. Once in the morning for a two hour connect, say, nine to eleven, and again in the evening, nine to eleven.

Tom's so far gone, he doesn't seem very angry about this. He certainly doesn't respond. There is a long silence. Then Simon anticipates his thoughts.

SIMON You could get a part-time job. My sister waits tables at a restaurant,

afternoons only. That way she can - (he trails off)

Tom looks dully at Simon.

DR. ANDERS (continuing inanely)

DR. ANDERS (CONT'D) Actually, we'd like - there's another person -

DR. BIRCH Tom, you'll have such purpose in life! You are so needed!

Tom doesn't respond.

DR. ANDERS Doesn't it make you feel fulfilled?

Tom is non-responsive.

DR. ANDERS (CONT'D)

Tom?

INT. CLINIC ROOM -- DAY

Tom is pretty much in a vegetative state, totally depressed, and perhaps a little insane. Dr. Anders enters the room and begins preparations for the disconnect.

FADE OUT