

DEPARTMENT HANDOUT: DIRECTOR & EXECUTIVE OVERVIEW

THE PATIENT'S DAUGHTER

2 Male + 1 Female (M + M + F) | Genre: Emotional Drama | Runtime: 6 - 9 Mins

OFFICIAL STORY LOGLINE: A broke young man, his estranged sister, and a weary doctor collide in a hospital waiting area where an ICU crisis forces buried family truths to surface. As the bill, the silence, and the grief pile up, the mother's hidden wish turns their confrontation into an unexpected reunion.
DIRECTOR'S DRAMATIC VISION & TONAL CONCEPT: • Visual tone: cold, clinical, emotionally suffocating hospital realism with one fading pocket of warmth from the evening sun. • Thematic depth: money vs. love, silence vs. truth, abandonment vs. misunderstanding, and how illness can expose the real diagnosis of a family. • Pacing: tense, dialogue-driven escalation with brief darkly funny beats that relieve pressure before the emotional rupture. • Performance style: restrained, internal acting that cracks gradually; no melodrama until the final emotional release. • Spatial storytelling: keep the ICU door, red light, bill, and window as recurring visual anchors of pressure, waiting, and hope.
CAST AT A GLANCE & CHARACTER ARCS: • character: Dr. Sameer age: 45 look: White coat with loosened buttons, tired eyes, controlled posture, professional but visibly exhausted. dramatic_arc: Begins as the calm mediator trying to contain the room, then reveals he is carrying the mother's message, and ends as the quiet witness who helps shift the family from conflict to fragile unity. • character: Rahul age: 22 look: College hoodie, tense body, crumpled hospital bill in hand, restless pacing, anger masking fear. dramatic_arc: Starts defensive and explosive over money and abandonment, then gets destabilized by Alia's truth and the doctor's revelation, finally softening into guilt, responsibility, and a willingness to act. • character: Alia age: 40 look: Simple handbag, red eyes, composed exterior, emotionally bruised but dignified, stillness that hides pain. dramatic_arc: Begins silent and guarded, then breaks through with wounded honesty, revealing she was excluded rather than absent, and ends in mutual regret and a tentative reconnection with Rahul.
FESTIVAL & AUDIENCE TARGET: Ideal for Short Film Festivals, Indie Showcases, and YouTube Creator Channels. Focus on tight performances, sound design, and authentic Hinglish dialogue delivery.

DEPARTMENT HANDOUT: ART, WARDROBE & PROP MASTER

1. SET DESIGN & SPATIAL DEPTH PLAN: Hospital waiting area beside ICU corridor, built with sterile institutional realism: pale walls, reflective floor, cold fluorescent ceiling fixtures, a visible ICU door at corridor end with a red indicator light, and a small window admitting the last strip of orange evening sun. Add layered depth with a bench or wall edge for Alia, open floor space for Rahul's pacing, and a corridor perspective that visually traps the characters. Surfaces should feel slightly worn, cleaned but never warm: scuffed vinyl, matte paint, metal signage, and a faint institutional echo. The set must allow clear sightlines between the bill, the doctor's chart, the handbag, and the ICU door.
2. COSTUME & WARDROBE CONTINUITY: Dr. Sameer: white coat, loosened buttons, slightly rumpled shirt underneath, practical shoes; continuity note: coat should remain open and tired-looking throughout. Rahul: college hoodie, casual pants, youthful but stressed; continuity note: crumpled hospital bill must stay visibly folded and handled repeatedly. Alia: simple, understated clothes with a handbag on shoulder; continuity note: red eyes and composed posture should remain consistent, with subtle emotional breakdown only in the eyes and voice.
3. HERO PROPS MASTER CHECKLIST (PRACTICAL ON-SET ASSETS): • Crumpled hospital bill in Rahul's hand, visibly worn from repeated gripping and waving. • Medical chart held by Dr. Sameer, clinical and slightly bulky, used as a visual authority object. • Folded prescription file from Dr. Sameer's pocket, revealed at the climax. • Simple handbag carried by Alia, practical and unglamorous. • Wallet/cards/cash from Alia's handbag for the final decision moment. • ICU door with red light ON at corridor end, functioning as the emotional and spatial endpoint. • Small window showing fading evening sun, used as a visual clock of diminishing hope.
4. PRACTICAL SFX & MAKEUP (MUA): Dr. Sameer: subtle under-eye fatigue, slight shine on forehead, natural hospital-hour exhaustion. Rahul: mild sweat, tension in jaw and brow, flushed irritation during confrontation. Alia: red-rimmed eyes, restrained tear tracks only when the crack appears, no heavy glam makeup. General: cold fluorescent lighting should flatten skin tones slightly; keep makeup realistic and reactive to the sterile environment. No injury SFX required.

ACTOR MASTERCLASS & HINGLISH AUDITION SIDES

STORYDILSE PRODUCTION BIBLE

DEPARTMENT HANDOUT: ACTORS & CASTING DIRECTOR

STANISLAVSKI SUBTEXT & CHARACTER DRIVERS:

- **character:** Dr. Sameer | **super_objective:** To get the family to face the truth and make the urgent treatment decision without collapsing emotionally. | **subtext:** He is not just treating a patient; he is trying to heal a family fracture while carrying the mother's trust.
- **character:** Rahul | **super_objective:** To protect his mother and survive the financial pressure without being seen as weak. | **subtext:** His anger is a shield for fear, guilt, and the shame of not being able to provide or explain the truth.
- **character:** Alia | **super_objective:** To reclaim her place in the family and be heard after years of exclusion. | **subtext:** Her calmness is a defense against old abandonment; she wants acknowledgment more than victory.

CANONICAL HINGLISH AUDITION SIDES (CLIMACTIC SCENE):

RAHUL

((agitated))

Doctor, bas itna bata do—aur kitna paisa lagega?

DR. SAMEER

((calming))

Rahul, "bas itna" hospital mein kabhi bas itna nahi hota.

RAHUL

((to Sameer))

Sach? Sach yeh hai ki meri maa ICU mein hai aur mere paas aadha bhi nahi hai.

RAHUL

((irritated))

Aap yahan kyun khadi ho?

ALIA

Kyuki mujhe bulaya gaya tha.



DEPARTMENT HANDOUT: CINEMATOGRAPHY & SOUND DEPT**1. CINEMATOGRAPHY CONCEPT & LENS PALETTE:**

Use intimate 35mm and 50mm coverage for dialogue tension, with occasional 85mm close-ups for emotional fractures and the bill/file inserts. Keep the camera mostly observational and restrained, using slow push-ins as truths emerge. Favor locked-off frames at the start to emphasize emotional stasis, then subtle handheld or gentle drift during confrontation. Frame the ICU door and red light as a constant background pressure, and use over-the-shoulder compositions to trap characters in the same emotional space.

2. 3-TIER LIGHTING SCHEMATIC:

- 1) Base layer: cold fluorescent top light, slightly green-blue, creating a clinical and emotionally flat environment.
- 2) Accent layer: fading orange window light from the small window, used as the last warmth in the frame and gradually diminishing.
- 3) Emotional reveal layer: soften key light subtly on faces during the prescription-file reveal and final reconciliation, while keeping the corridor and ICU door colder to preserve tension.

3. SOUND DESIGN & FOLEY ATMOSPHERE:

Low AC hum throughout, faint corridor footsteps, distant hospital ambience, soft paper rustle from the bill and file, and occasional room tone with sterile acoustic reflections. Dialogue should feel close and dry, with the hospital space adding a slight echo. The ICU red light and door should be accompanied by a subtle mechanical hush rather than overt sound effects.

4. COLOR GRADING LUT & PALETTE:

Cool hospital LUT with desaturated whites, pale cyan shadows, and muted skin tones under fluorescent light. Preserve a thin band of warm orange from the window as the only emotional color contrast. Keep reds limited to the ICU indicator light and Alia's eyes, so they read as emotional warning signals. Final frames should feel slightly less cold without becoming warm.



DEPARTMENT HANDOUT: PRODUCER & LINE MANAGEMENT

TIME	ACTIVITY / SCENE BLOCK	KEY DEPARTMENTS INVOLVED
08:00 - 09:00	Load-in, set dressing, and placement of ICU corridor practicals	Art, Grip, Electric
09:00 - 10:30	Block and rehearse pacing, confrontation positions, and reveal beats	Director, Cast, AD
10:30 - 12:00	Rig fluorescent base lighting and window sun simulation	Camera, Electric, Grip
12:00 - 13:30	Shoot opening tension, bill exchanges, and Rahul-Sameer dialogue	Camera, Sound, Cast
13:30 - 15:00	Shoot Rahul-Alia confrontation and emotional crack	Camera, Sound, Cast
15:00 - 16:30	Shoot prescription file reveal and final reconciliation	Camera, Cast, Art

LOCATION HACK & BUDGET SAVING TIPS:

Use one real hospital-like corridor or a minimally dressed room with practical fluorescent tubes and a single window gag. Keep the ICU door and red light as a simple practical sign or LED indicator. Limit cast movement to blocking that uses the same 10–15 feet of space repeatedly. Shoot coverage efficiently with a master, two singles, and insert shots of the bill/file. Let performance carry the drama instead of expensive production design. Use natural sound and minimal score to avoid post-production cost while preserving tension.

• **Mandatory Licensing:** Completely free for student/commercial production with on-screen credit: 'Story & Screenplay by Story Dil Se (storydilse.in)'.

