

# Code Five

*By Marc Holland*

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## **DEDICATION**

*For Erin Shutz Oldford...  
and every other therapist out there trying to heal a broken world*

## **STORY OF THE PLAY**

It is the story of a male nurse and his female therapist who are facing a stalemate after years of sessions. The therapy session that is dramatized is the one where a breakthrough is finally achieved, where the hole in the patient's memory is filled by a moment of terror... his realization that in keeping himself and a few co-workers alive behind a blocked door, others were killed on the other side of the door while begging to be let in. It is, sadly, a story that is all too timely.

It is a play that will open up some conversations that we don't really want to have about an issue we wish would go away. When the evening news no longer leads with the story and the headlines fade, there are still survivors all around us. This is my attempt to tell our story.

## **ORIGINAL PRODUCTION**

Workshopped by Pass the Hat Productions in December 2016, it received a staged reading through Ann Arbor Civic Theater on March 29<sup>th</sup>, 2017. It was performed as a play on April 20<sup>th</sup> at Artomatic in Washington, D.C.

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### **CAST OF CHARACTERS**

*(1 M, 1 W)*

**SCHELL:** (W) A therapist. A middle-aged woman.

**ALEX:** (M) A patient dealing with post-traumatic stress disorder.

### **SETTING**

A therapist's office. There is a desk at stage right with a high-backed chair and a telephone. In front of the desk is a pair of side chairs. At stage left, there is a long sofa and a low-backed, plush easy chair facing it. Next to the chair is a side table. A door is just upstage from the desk. With draped fabrics and autumnal decoration, the room suggests warmth.

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*(AT RISE: We see a therapist's office. There is a desk at stage right with a high-backed chair and a telephone. In front of the desk is a pair of side chairs. At stage left, there is a long sofa and a low-backed, plush easy chair facing it. Next to the chair is a side table. A door is just upstage from the desk. With draped fabrics and autumnal decoration, the room suggests warmth. DR. SCHELL, a middle-aged woman, conservatively but comfortably attired, is speaking into a digital recorder with a file in front of her.)*

**SCHELL:** Alex has recently found new employment, though it is a lower paying, lower prestige job. It may be time to try a more radical therapy. His symptoms have not become any worse, but he continues to have a hole in his memory following the shootings where he...

*(SFX: Cellphone rings. SCHELL turns off the digital recorder and picks up her cell.)*

**SCHELL:** *(Cont'd.)* Oh, hi, baby, how's the mother-to-be today, are you... oh, really? Has your water broken?

*(SCHELL is still talking on her cellphone when ALEX enters. He stops almost immediately, afraid he is intruding. She waves him in as she finishes her conversation, turning away to finish with some privacy.)*

**SCHELL:** *(Cont'd.)* Oh, honey, I'm so excited! Call me just as soon as you... or have Matt call me. God knows you've got your hands full! All right sweetie, don't forget your breathing exercises, okay? I love you, too. I'll be there as quick as I can. B'bye.

*(A grin breaks out on SCHELL's face that ALEX doesn't see. He is looking out over the audience at the book-lined fourth wall.)*

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**SCHELL:** *(Cont'd.)* Alex, I'll be right with you, just give me five seconds.

*(ALEX winces, as if in pain as SCHELL crosses to the door, speaking to an unseen receptionist in a low voice.)*

**SCHELL:** *(Cont'd.)* Deena, I'm about to begin my session. If my daughter calls, just give a quick rap on the door. Oh, and cancel the rest of my appointments for today, okay? *(SCHELL closes the door and goes to her desk, retrieving a thick file. To ALEX.)* Sorry to keep you waiting.

**ALEX:** That's okay. If we need to reschedule, I can...

**SCHELL:** Don't be silly. You specifically asked for the eight A.M. slot and we've finally got it cleared for you.

**ALEX:** It just makes it so much easier, with the new job and all. They're not as forgiving about the doctor visits when you're the new guy.

**SCHELL:** Let's not worry about that. My daughter has just started having contractions. She's going to call me when her water breaks.

**ALEX:** You're going to be a grandma?

*(SCHELL sits in the easy chair at center, placing the file on the side table.)*

**SCHELL:** That I am.

**ALEX:** How do you feel about that?

**SCHELL:** That's... between me and MY therapist.

**ALEX:** *(With a chuckle.)* Excuse me. You see a therapist too?

**SCHELL:** *(Absently making notations on a blank form.)* Many mental health professionals see a therapist. Sometimes, it's because they give all the energy to their patient's problems and don't spend much time on their own. Other times, it's... well, that's not why we're here, is it?

**ALEX:** No, I guess not. I think that's the most detailed thing you've ever revealed about yourself. I mean, I knew you had a daughter, you've mentioned her before, her picture is on your desk. But you're about to become a grandmother? You see a therapist?

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**SCHELL:** It's known as self-disclosure. You can talk about your own life in the abstract, perhaps as an illustration. It's a necessary separation. Doctors sometimes have to stop seeing patients because they've become too close.

**ALEX:** I'm not surprised. You guys take a patient the way some people adopt pets.

**SCHELL:** What does that mean?

**ALEX:** I mean, I've been coming here for what, about five years, right?

*(SCHELL begins looking through the file.)*

**ALEX:** *(Cont'd.)* In five years, you'd think a doctor could cure anything. In six years, I could've become a doctor.

**SCHELL:** I have some patients that continue coming to see me a couple times a year, even after their initial crisis is over. I have a couple of patients I've seen for over ten years.

**ALEX:** Ten years?! What is THEIR problem?

**SCHELL:** I can't talk about other patients' problems. I'm here to talk about yours. Would you like to talk about...

**ALEX:** Sure. If that's what you want to do... Grandma.

**SCHELL:** Nice diversionary tactic.

**ALEX:** I was just joking.

**SCHELL:** Okay. Can we talk about your post-traumatic stress?

**ALEX:** *(Suddenly more interested in the books on the fourth wall.)* Sure. Did you read all of these books?

**SCHELL:** *(After a quick glance.)* Most of them. Some are just for reference.

**ALEX:** Isn't there a book on post-traumatic stress?

*(ALEX glances at SCHELL, who nods.)*

**ALEX:** *(Cont'd.)* Did you read it?

**SCHELL:** There are hundreds of books on post-traumatic stress, with more being written every day. There are articles in periodicals; it's a field that continues to grow, as the science evolves. Why are you asking this?

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