

Intro

I'll never forget the moment I received a diagnosis of melanoma in the doctor's office and the weird details that stuck in my head. The rows of light and shadow cast by the sunlight hitting the blinds. The gentle electronic hum of medical equipment. The way my body went numb with shock while my mind raced with questions about what this meant for me, my partner, and, most importantly, our 13-month-old little girl.

I was lucky, but so many aren't. And it's because of these experiences that I can empathise with each and every character in this campaign. But I'm not alone. Almost everyone watching these spots will have encountered a health scare, whether themselves or through their family and friends.

So here's how I intend to create a genuine, unflinching but also uplifting campaign...

Shooting in a Hospital

My crew and I have had a lot of experience shooting in working hospitals, so we understand the challenges and opportunities that this fast-paced environment offers up. I'm very conscious of the need to be respectful and sensitive to the important, life-saving work that goes on in the hospital, but we won't let this comprise the quality of our films as we tell our stories in real treatment facilities and operating theatres that add another layer of reality to our films.

Look and Feel

We're looking for a cinematic, almost documentary-like realism that looks polished but feels authentic. Immersing our audience in the world of our characters, triggering deep-seated feelings, and giving these real-life stories heart and grit.

That authenticity will come from capturing organic, compassionate moments between characters inside the hospital and lifestyle moments outside with an unforced, observational style.

Sometimes we'll film our actors rehearsing or let the camera run once the scene has finished so we can capture those unplanned, unexpected moments of magic before a scene starts or after it has ended.

We'll draw a visual contrast between the personal life and medical experience of our characters, going handheld for the disorientated lifestyle shots and then being more controlled with composed dolly shots for the hospital scenes. We'll also refrain from showing certain parts of the medical process altogether and let our audiences' imagination fill in the blanks.

Instead of a sterile, overlit environment with a bright commercial look or something too dark and depressing, we want warm dappled sunlight and a rich, golden hour hue with lens flares to illuminate those intricate details and make this high-tech, state-of-the-art hospital feel inviting and comforting rather than unreal or sci-fi-like.

We'll capture most of this advanced technology in camera at the facilities, training labs, and operating theatres you have rented out, but where necessary we can use VFX to recreate specific machines or treatments and make them feel like a natural part of the action.

Structure

Like the most satisfying stories, these spots are broken down into three acts: a beginning, a middle, and an end. This begins by introducing our character and their medical problem, overcoming it with the help of Houston Medical, and then returning to their life with a newfound enthusiasm and sense of connection with the world.

ACT 1

Our diagnosis from a medical professional (perhaps in a doctor's office) leaves our patients in a state of shock or contemplation about what this means for themselves and their family, but without it feeling like it's the end of the world or they're going to die.

Then a handheld portrait shot of our emotional patient in an everyday environment, such as their kid's soccer game or dinner with friends. They're staring into camera with a concerned or pensive expression as their diagnosis sinks in and they feel increasingly alone, creating an instant connection between the patient and our audience.

ACT 2

We'll stay true to the real-life medical journeys but elevate these with composed frames that convey the feeling of control Houston Methodist provides its patients and natural lighting that grounds the high-tech environment in the everyday.

Meanwhile, the interaction between patients and the medical staff will feel warm and caring rather than cool and detached, perhaps with a comforting hand on the shoulder or a friendly, supportive smile that makes the hospital and its staff feel approachable.

ACT 3

Following our patient's medical journey with Houston Methodist, we'll return to the present day and show them fully recovered and thriving with a new lease on life. These uplifting moments are executed with a subtle naturalism, so they feel viscerally real rather than cheesy.

Casting and Characters

Casting and Performance

We want people to see themselves in these characters, so we're looking for subtle, naturalistic performances from those experiencing symptoms and reacting to them. To achieve this, we'll need to reach beyond the pool of commercial actors and seek out skilled, visually interesting actors that our audience can identify with.

In films that contain multiple characters, we can complement leads with non-professional actors, or family members, benefiting from those existing dynamics which provide an unspoken, authentic texture to their exchanges.

Let's also take a long-form approach to working with actors, encouraging different reads in the casting process to see what works. Then creating time for rehearsal so that actors can inhabit and personalise their characters, and discover the blocking for each scene, making them feel real and spontaneous rather than staged.

When it comes to performance, we're looking for professional but emotive medical staff who feel as though they have delivered bad news or provided expert treatment many times, without losing that gentle, human touch. Our subject matter experts can help to familiarise our talent with the technology and also provide some much-needed insight into the emotional aspects of care.

Houston is a cosmopolitan town with a significant Hispanic community and we'll represent it with diverse casting that also encompasses a variety of genders, ages, ethnicities, and body shapes.

Characters

Cardio

Graphic designer, Maria, has always been the heart of her family, known for her kindness and unwavering strength. But when she discovers she is pregnant with her first child, joy quickly turns to fear. During a routine check-up, doctors find a congenital heart defect that has gone unnoticed all her life. Now, every beat of her heart carries both hope and danger as she navigates a high-risk pregnancy, determined to bring her baby into the world, even if it means risking her own life.

<u>Neuro</u>

Leo is a brilliant guitarist, with fingers that dance across the strings and a passion that moves audiences to tears. Music is his life, his escape. But a persistent headache has revealed a brain tumour lurking in the shadows. As the tumour has grown, it has stolen his coordination and memory, threatening the very essence of who he is. Faced with the possibility of losing his music forever, Leo's life and his future lay in the hands of the skilled medical team at Houston Methodist.

Gastroenterology

David has always dreamt of being the kind of dad who could chase his son through the park, tossing him into the air with effortless joy. But Crohn's disease has other plans. The chronic pain and exhaustion often means he has to watch from the sidelines as his little boy plays while David's heart aches more than his body. But thanks to the treatment that Houston Methodist provides, David's illness no longer defines him and he can join in the fun with his son and create memories that will last forever.

Transitions

We don't want overly elaborate, gimmicky transitions that distract us from the story and undercut the emotion of the scene. Instead, we'll opt for simple, subtle visual motifs infused with meaning.

For the opening transition, we'll pan left to suggest that we are going back in time, then, as our patient is treated and on the road to recovery, we'll pan right to communicate that we're moving into the future.

We'll connect the moments in each of the different acts with simple cuts or the flash technique you mentioned. In addition to this, we'll create visual connections such as the overhead surgical lighting descending into shot, transiting from a static X-ray/CT scan to real-time footage of a surgery being performed on a screen, or using a light beam, lens flare, or wall wipe.

Ultimately, it's all about finding a natural, organic flow between human, emotional moments.

'Cardio' TVC Script :30

We open on a portrait of a heavily pregnant woman, Maria, and her partner sitting on the floor in their large, tastefully decorated living filled with natural light. Both of them are smiling with excitement as Maria holds up a baby grow. Then we pan left, transitioning us into the past...

VO: What if you were expecting...

...to Maria sitting on the end of a hospital bed in an understated doctor's surgery. Her hand clutches her stomach which is in the centre of the frame. A look of concern on her face. We cut from her stomach to...

VO: And got unexpected news?

...a black and white scan of her heart with statistics and graphs beside it.

VO: Your heart valve isn't working properly.

Then to a close-up of Maria sitting on a bench in a park, watching parents play with their children as the extent of her diagnosis sinks in.

VO: Some propose an invasive open-heart surgery...

We're over the shoulder of Maria and her partner as a friendly doctor in a white Houston Methodist lab coat talks to them both.

VO: But your innovative Houston Methodist team has an alternative plan. They create a tiny incision...

We cut between close-ups of...

...a transducer being circled over Maria's stomach while the ultrasound appears on a screen in the background.

...a surgeon injecting a substance into a tube.

...a colourful 3D hologram appearing over Maria's sedated body that can be moved at will with the gesture of the surgeon.

VO: To replace your heart valve and save two lives.

Maria lies down on the bed with her baby wrapped up in a bundle in her arms.

Then we pan right as we transition to the future.

VO: That's the difference between practicing medicine and leading it. For you. Houston Methodist. Leading Medicine.

Maria, back to her normal size and wearing a summery dress, is at peace as she stands on a balcony cradling her baby in the dappled sunlight.

'Neuro' TVC Script :30

A portrait of a young, stylish Leo standing in the street, lit by the sun in the background as a lens flares on the screen. Then we pan left, transitioning us into the past...

VO: Imagine you are him.

...to a quadrant of four evolving black-and-white scans - each capturing the Leo's brain from a different angle.

VO: And you have a brain tumor.

Leo sits at the end of an MRI scanner as the reality of his situation sinks in. Then we cut to him lying down as the bed slowly retracts into the machine and a red crosshair passes over his head.

VO: Like you, your brain tumor is unique.

We cut to a close-up of the tightly-packed tumour on the scan.

VO: Inoperable to some...

Then to a couple of doctor's in white Houston Methodist lab coats studying the scan.

VO: But your innovative team at Houston Methodist...

They use their fingers to reposition the colourful 3D map of the brain and study the tumour from a different angle.

VO: Uses 3D mapping...

The two doctors turn to each other and meet eyes with cautious optimism.

VO: To find a hidden path...

A team of surgeons, in masks and gowns, stand around an operating table in a theatre filled with state-of-the-art technology.

VO: That makes your tumour operable.

We cut between close-ups of the focused surgeons working away.

Then we pan right, as we transition to the future and...

VO: That's the difference between practicing medicine and leading it. For you. Houston Methodist. Leading Medicine.

...Leo sitting on stage playing guitar to an appreciative crowd/playing football with his friends and leaping in the air to head the ball.

'Gastroenterology' TVC Script:30

We open on a close-up portrait of a young bearded David looking to camera. Then we pan left, transitioning us into the past...

VO: Put yourself, in his shoes. After a primary care visit...

Now we're with him in a clinical surgery as a doctor speaks, but David struggles to process what he's hearing.

VO: You learn you have Crohn's disease-

David sits on one-in-a-row plastic seats in an artificially lit doctor's waiting room as the reality of his diagnosis hits.

VO: Some propose repeated colonoscopies...

A close-up of David's face as it distorts with discomfort and we see the blurred video of his colonoscopy on a screen in the background.

VO: But your expert Houston Methodist team...

David sits across from a doctor in a white Houston Methodist lab coat as the dappled sunlight from outside passes through the window and illuminates them both.

VO: Uses a less-invasive, more efficient, diagnostic technique...

We cut to a close-up of a transducer being circled over David's stomach while the ultrasound appears on a screen in the background. The hand of a medical professional gestures to the screen and explains what is happening.

VO: To see you better, heal you faster...

David and the doctor return to sitting across the table from one another and this time they're shaking hands and smiling.

Then we pan right, as we transition to the future and...

VO: And keep you living symptom free.

...David running through the corridor of his naturally-lit house with his excited little boy on his back.

VO: That's the difference between practicing medicine and leading it. For you. Houston Methodist. Leading Medicine.

A close-up of our young man cradling his sleeping child in his arms as they are backlit by the dappled sunlight, creating a lens flare on the screen.

Cinematographers

I like to work closely with my DoP and involve them from the very start of the project, drawing on their wealth of experience and expertise to decide which lenses, equipment,

and camera movement will be the most exciting and emotionally resonant for our audience.

This collaborative relationship continues throughout the shoot, as I empower them to make decisions about how we frame and light each shot, giving me the freedom to focus on getting believable, human performances from our actors.

I think these cinematographers have an instinctive understanding of how to tell a story and a distinctive style that would bring something unique and beautiful to our project.

Cole Graham - https://www.colegraham.com/

Bryn McCashin https://www.brynmccashin.com/

Ian Rigby - https://ianrigby.com/

Art Direction

Like the camerawork and the performances of our characters, naturalism is key. Whether we're outside, at home, or in the hospital, we want the locations to feel authentic, functional, and lived-in rather than stylised or overly considered.

Subtle set dressing will be crucial to achieving this look, but we'll also craft natural and practical light to evoke contrasting emotions from our audience at different points throughout each film.

Editorial

So much of this story is about the subtle, nuanced character reactions and interactions. A glance here. A gesture there. A forced smile or a heavy exhalation as their diagnosis hits hard. We'll weave these moments together in a thoughtfully-paced, reflective edit that lingers on the negative and positive emotional beats of our characters so they land with the audience.

VFX will also help us to create the interactive hologram that our medical professionals use to assess their patients and plan their surgery, and perform light-touch edits to the scans and 3D mapping of our patient's illnesses.

Sound and Music

We'll look to create a realistic, diegetic soundscape for each of the environments that our characters are in, but we can also distort and accentuate certain sounds, such as the

electrical hum of machines or birdsong to exaggerate the sense of anxiety or hope that our character feels.

Although music won't drive our films, let's compose an optimistic, poetic bespoke song that works in tandem with our sound design and subtly tracks the emotional peaks and troughs of our characters.