



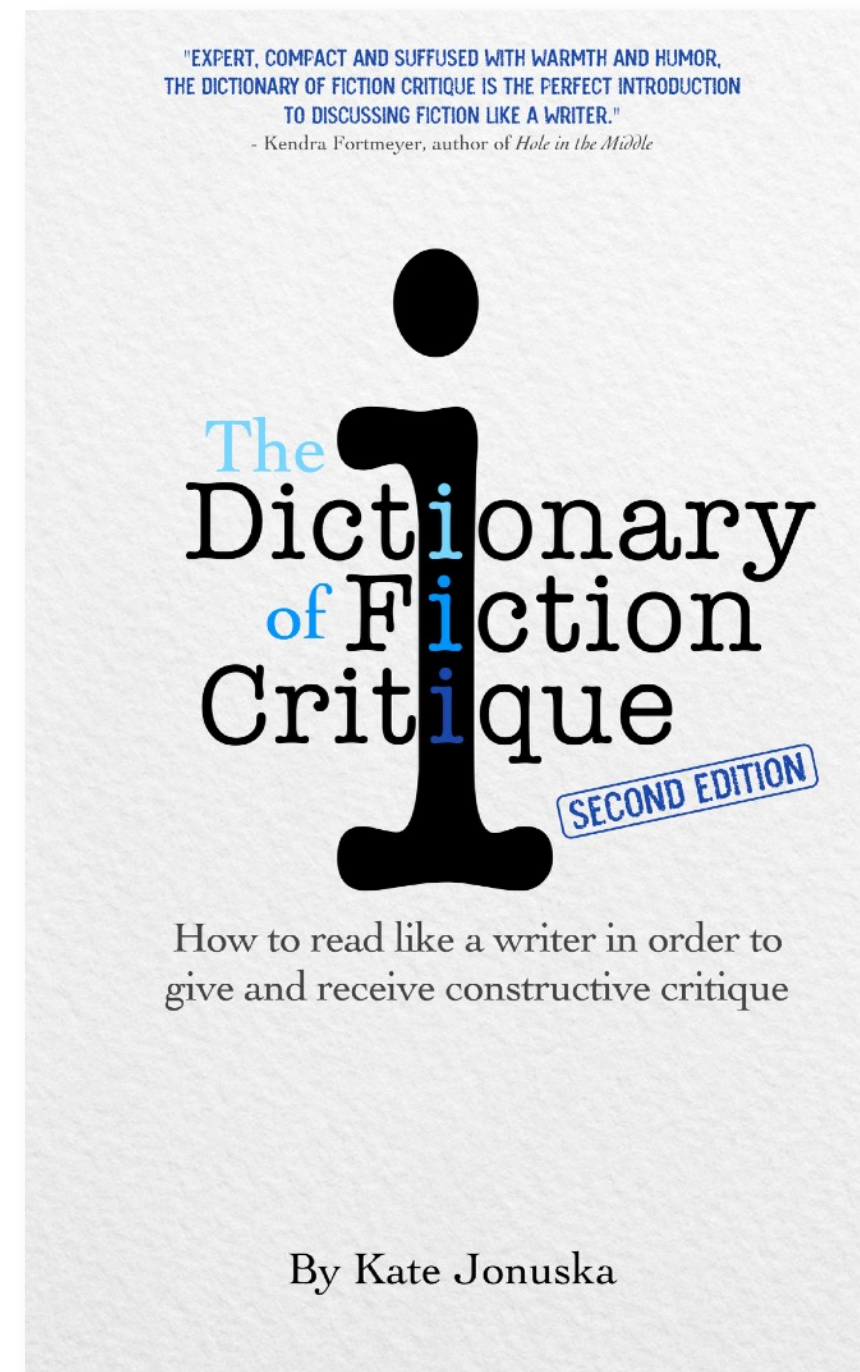
Dissecting the Story:

CRITIQUING LIKE A SURGEON

With Kate Jonuska

WHO AM I?

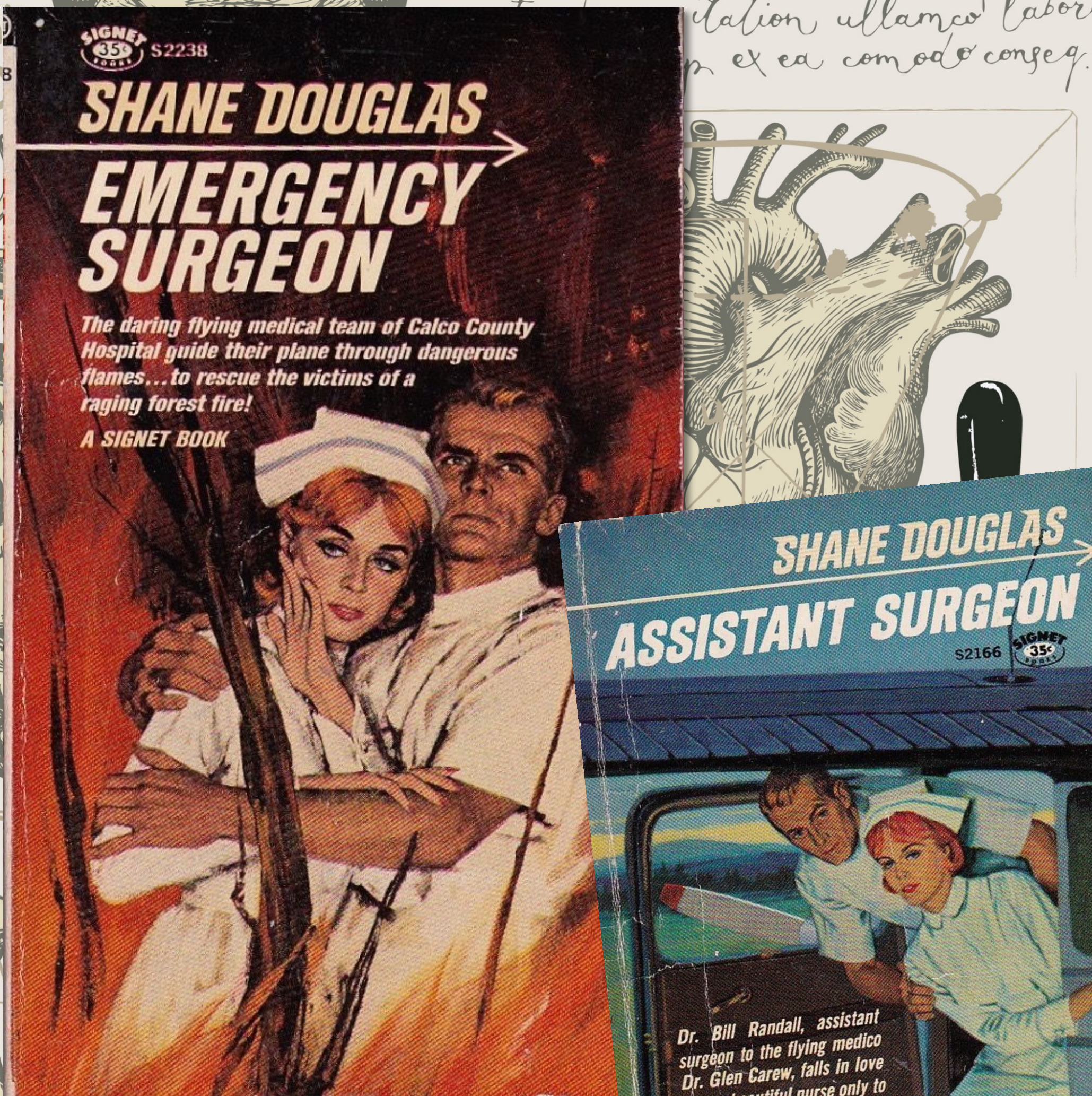
- Author of “*The Dictionary of Fiction Critique*”
- Critique group member
- Critique group leader
- Lover of successful stories





WHY LIKE A SURGEON?

- Surgeons can't become masters by only understanding healthy bodies.
- No surgeon operates alone. They instead collaborate and communicate with a unique professional vocabulary.
- Surgeries have different levels of invasiveness and severity.



WHY LIKE A SURGEON?

- The theme offers chance to use amazing covers from vintage medical fiction.



NO SURGEON OPERATES ALONE

- Every book on the shelf is a product of teamwork.
 - *Though the surgeon/writer is always in charge.*
 - *Most important credential: Creative License.*

NOR ONLY ON HEALTHY BODIES

- Every book on the shelf started as a draft a.k.a. required extensive surgery.
 - *Points of comparison, offering little instruction.*
 - *Ability to appreciate good writing $\neq$ ability to write well.*



TRUE KNOWLEDGE LIES IN ILLNESS

- We hone our skills on the roughest drafts.
 - *Others' works in progress (WIP) are your autopsy lab.*
- The feedback you learn to give can be more valuable than the feedback you receive.
 - *Symbiotic improvement!!*



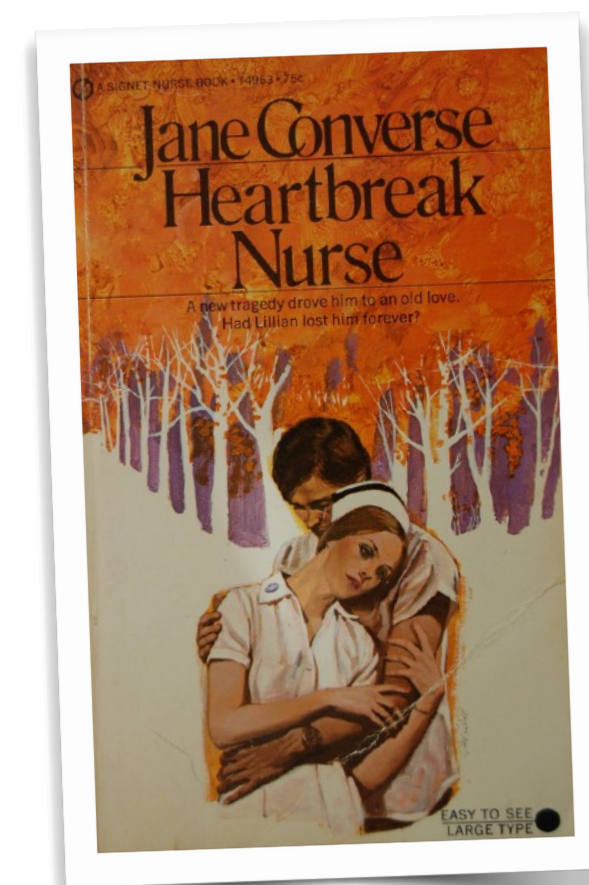
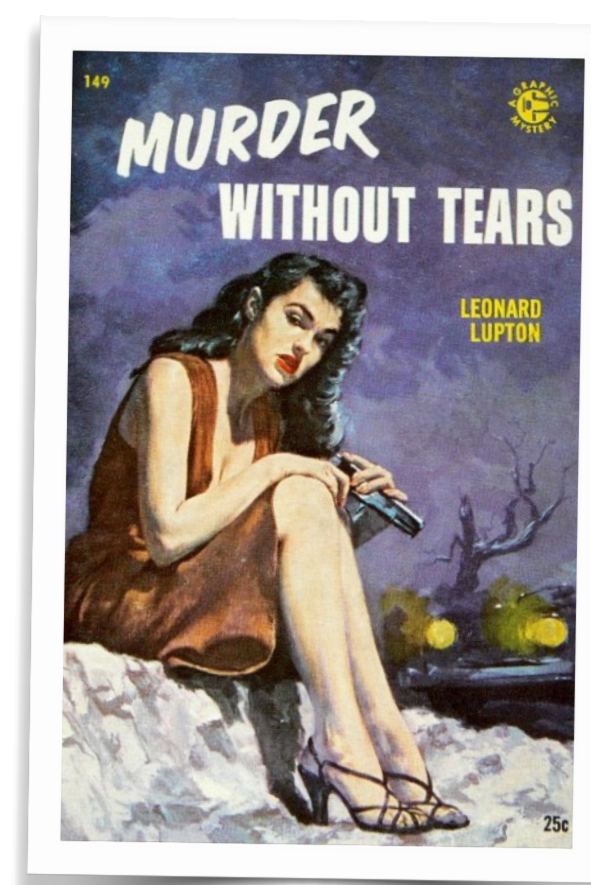
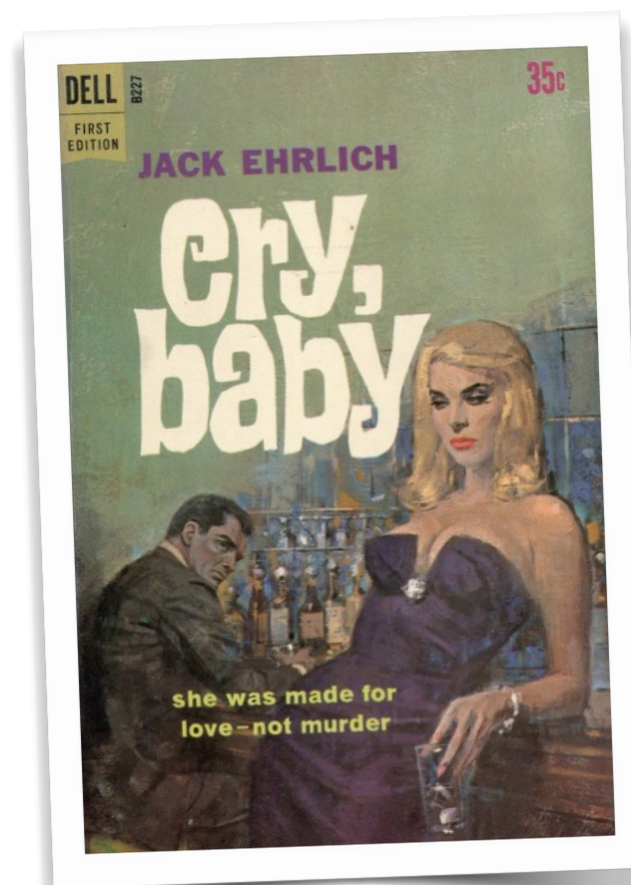
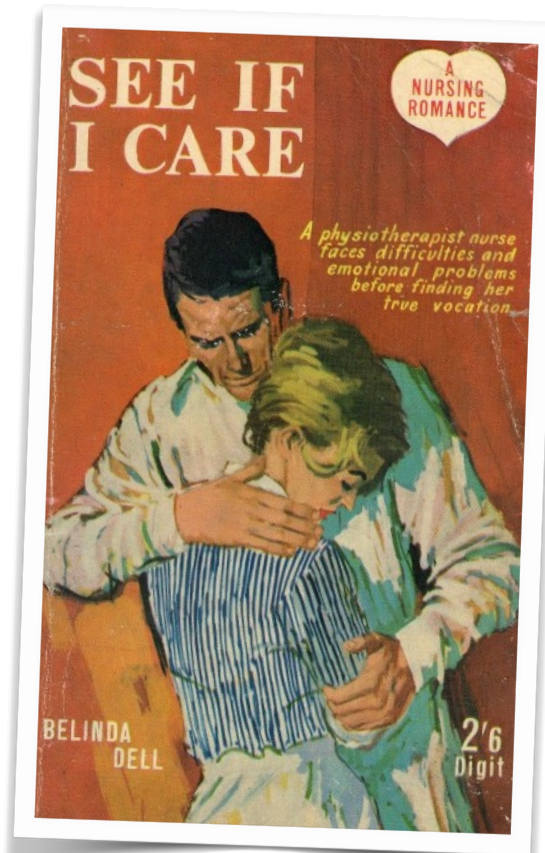
FEEDBACK 101

- Assembling the team/partnership.
 - *Find one or more other writers.*
 - *Lay out structure, including virtual or in person, length and number of submissions, group size, genre, etc.*
 - *Set ground rules for handling conflict and making decisions.*
 - *Encourage honest and open communication.*
 - *Leave room for growth, challenges, and change.*



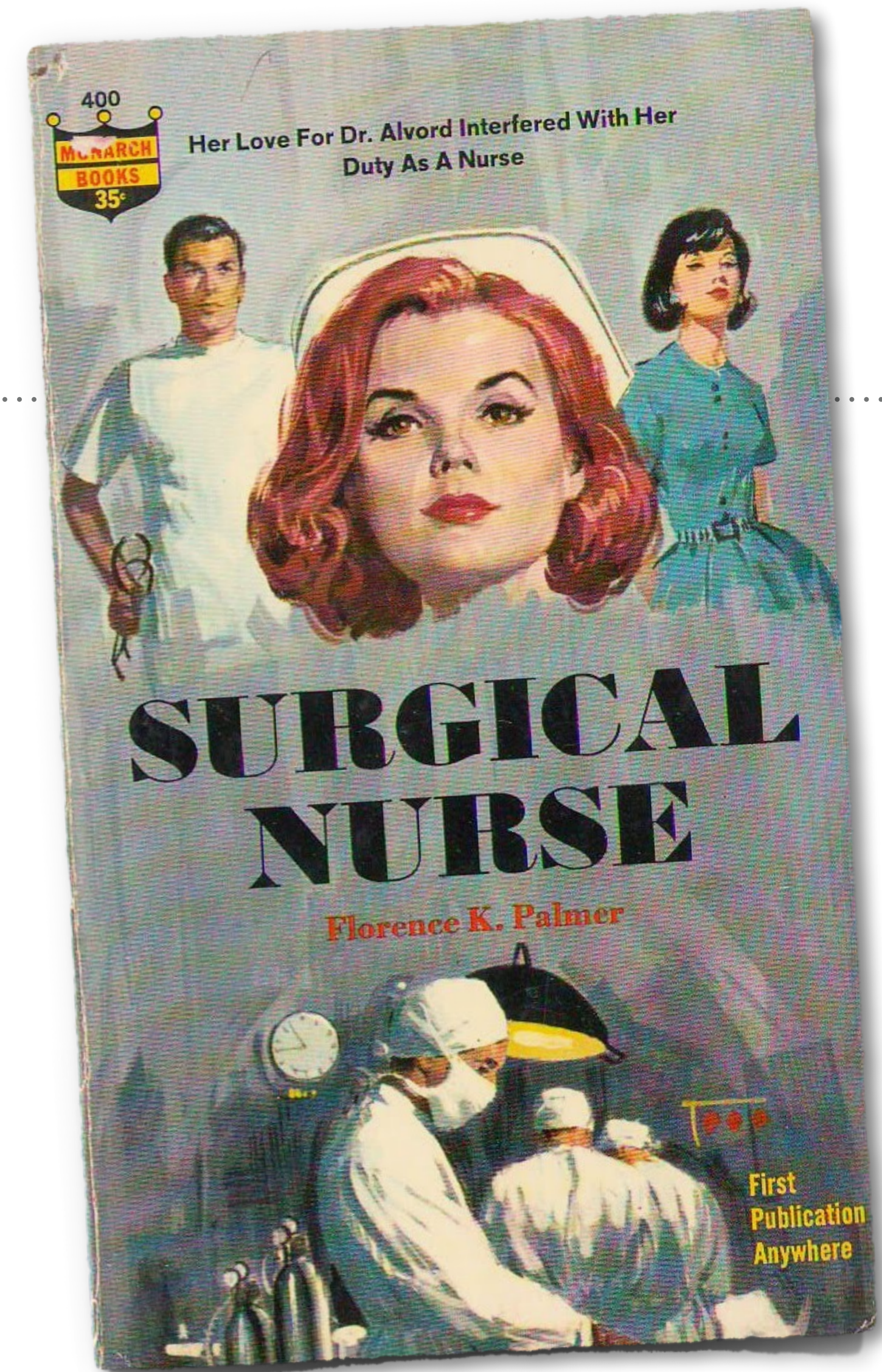
FEEDBACK 101

- Most people first consider how they're going to take feedback.
 - *Remember that you need feedback to improve. You want this.*
 - *Use stock phrases: "I'll think about that." "I hear you." "Thank you."*
 - *Use the sock drawer as necessary.*



FEEDBACK 101

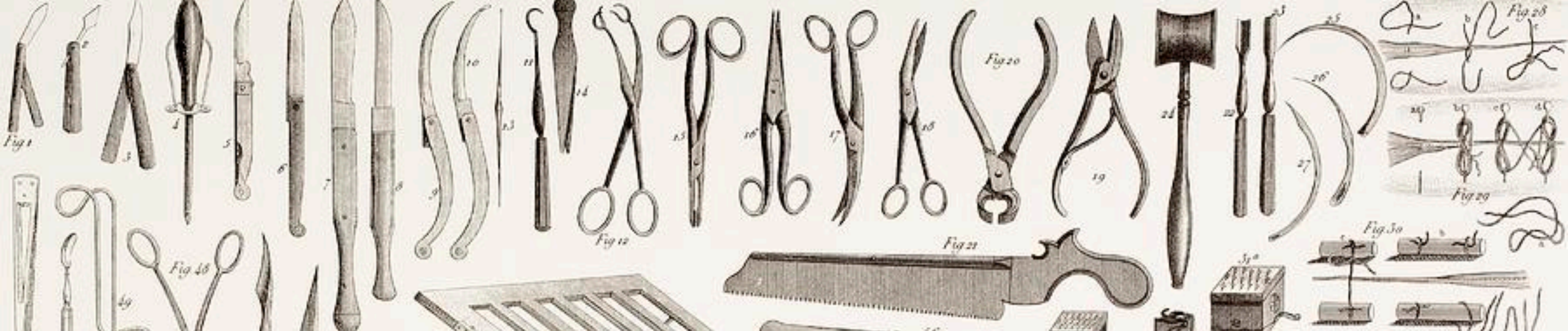
- When giving feedback, the most valuable is:
 - *Peer-to-peer*
 - *Kind but honest*
 - *Specific*
 - *Constructive*
 - *Respectful of creative license*



FEEDBACK 101

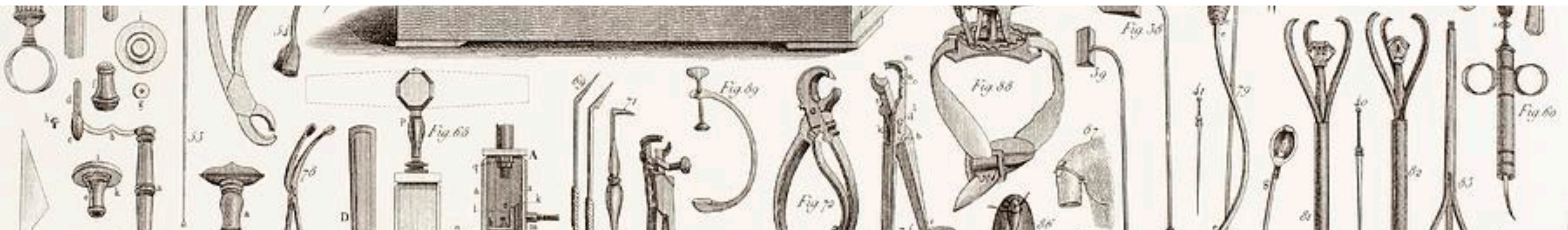
- When critiquing, the most valuable feedback **asks**:
- *~~“Do I like/dislike this?”~~*
 - *“What’s working and not working here?”*
 - *“How can this story become successful?”*
 - *“How can we save this patient’s life?”*





LET'S GO TO MED SCHOOL

...but for stories!





LEVELS OF STORY SURGERY

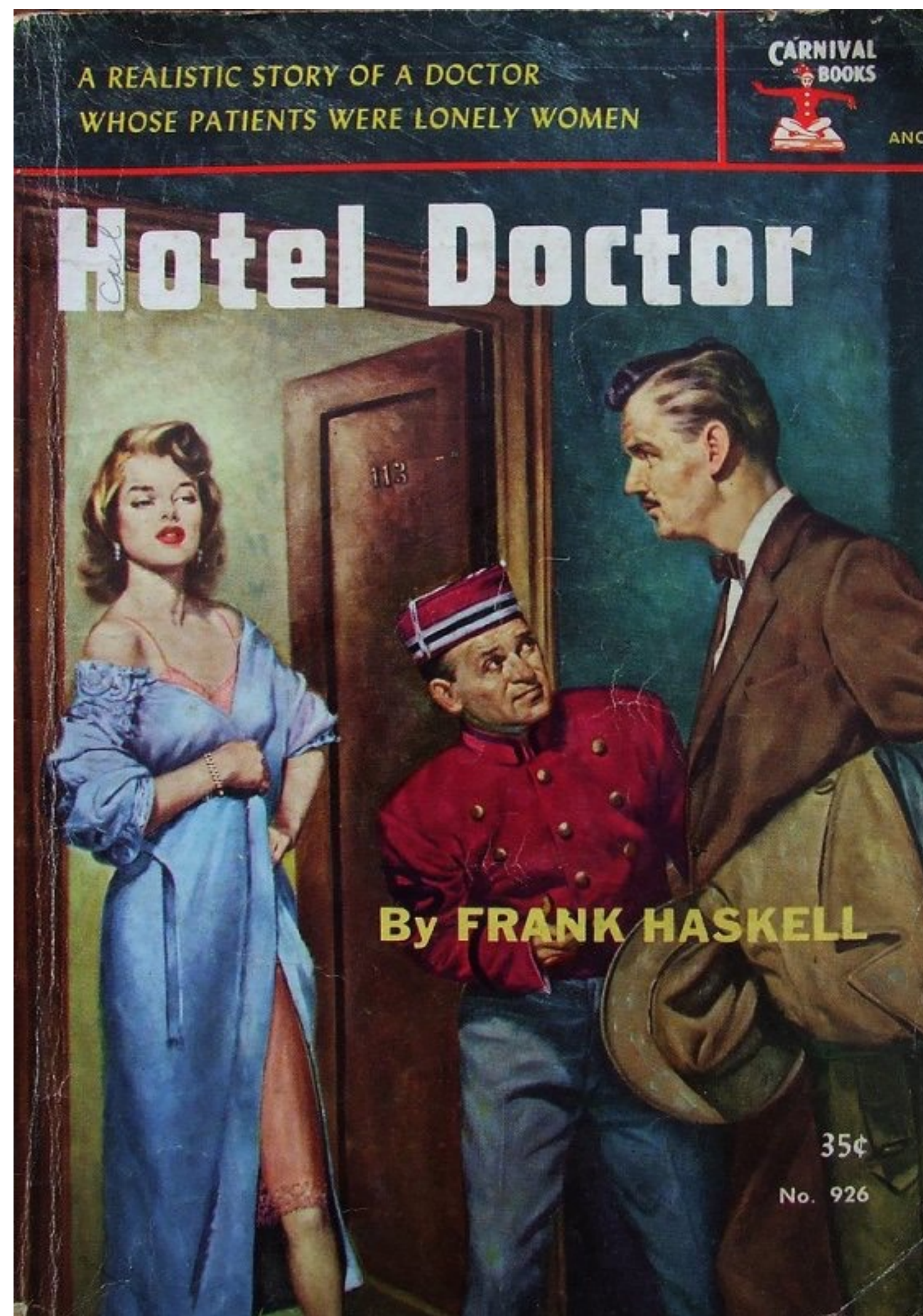
Critique feedback, from the major to the cosmetic:

1. Plot
2. Character
3. Story Mechanics
4. Clarity and Craft

1. PLOT

- *A story's bones, muscles, and blood.*
 - *A story's movement in time and space.*
 - *Plot is what happens!*
- *A plot's movement breaks down into:*
 - *Action*
 - *Tension*
 - *Conflict*

Plot: Action, Tension, Conflict



Action: A hotel doctor does his job, has interesting cases.

This is movement, but not a story.

Tension: His patients are lonely women, potentially illicit

We have tension, but it could draw on forever/ until the doctor's happy retirement.

Conflict: Perhaps this bellboy (or another force) will out this arrangement

Now we have a story!

Plot: Action, Tension, Conflict

Action: A woman is a doctor! Gasp. She does doctoring things in the world

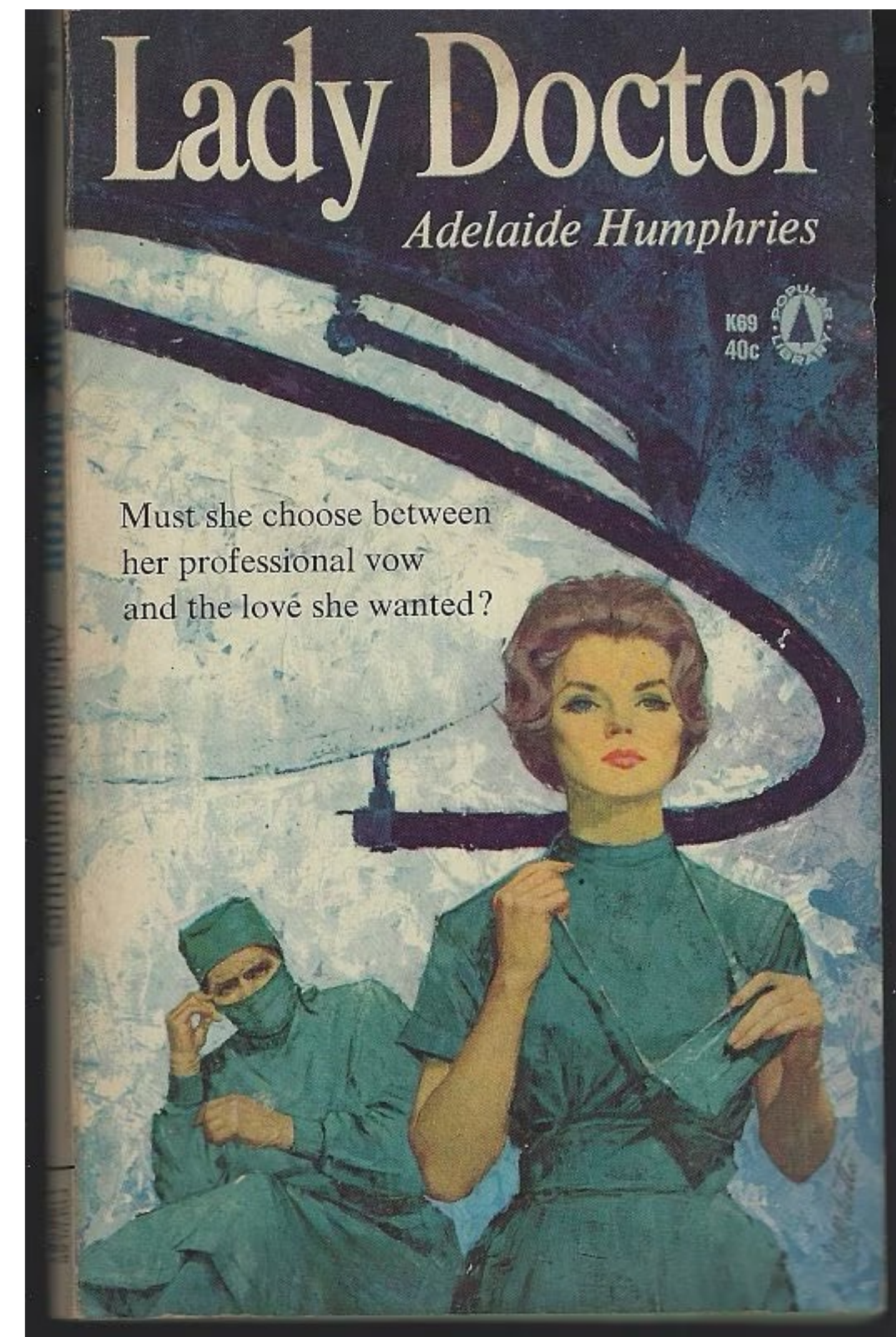
This is movement, but not a story.

Tension: Misogyny still exists.

*We have tension, but it could draw on forever/
until her hard-won retirement*

Conflict: Tagline says she must choose her career or her love.

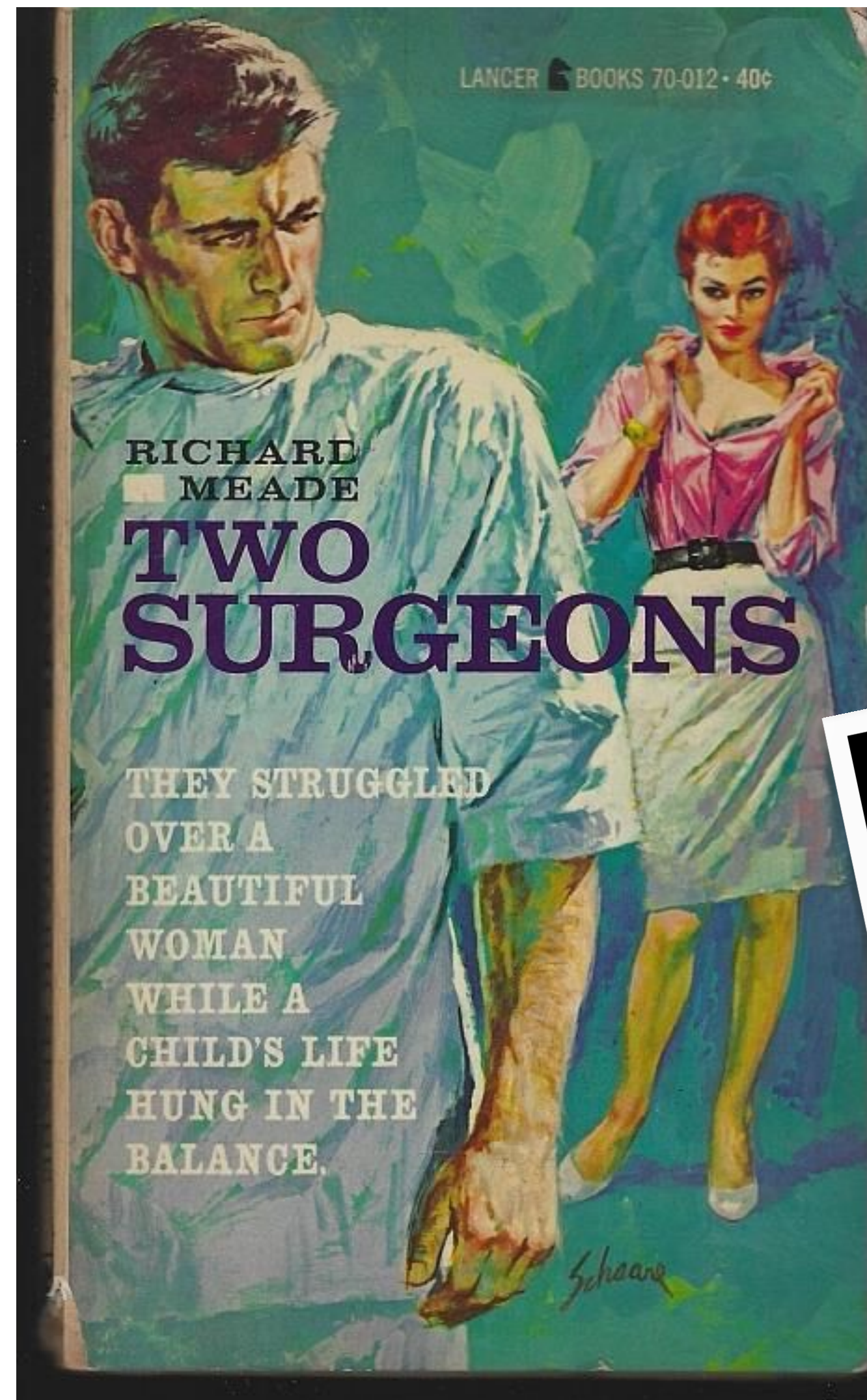
Now we have a story!



Plot: Action, Tension, Conflict

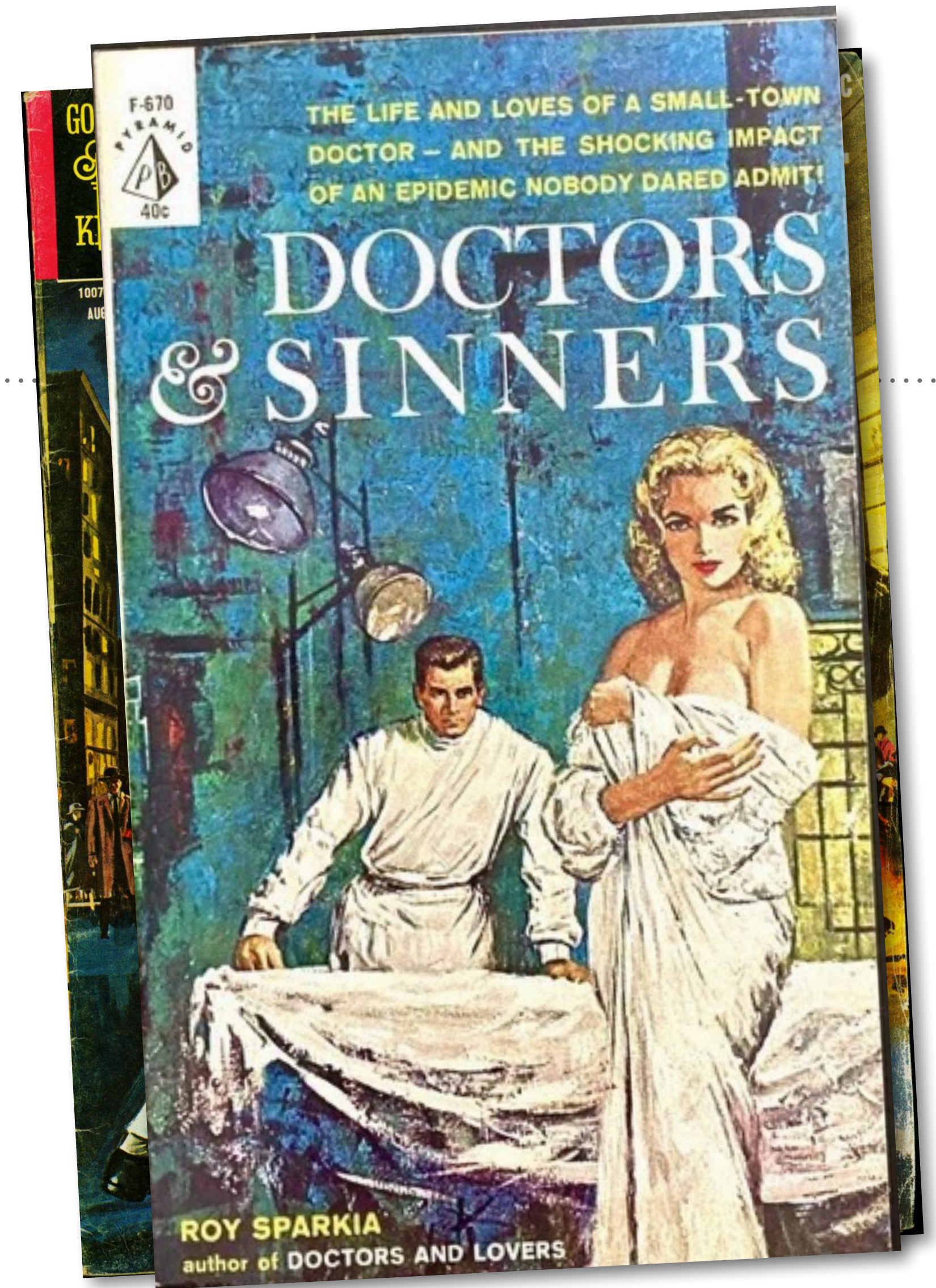
Internal and External Plot Lines
(or main and subplot lines)

*Also require Action, Tension,
Conflict!*



TOOLS FOR WEAK PLOT

- Play with internal and external plot lines
- Turn up the stakes
- Intensify motives
- Increase resonance



2. CHARACTER

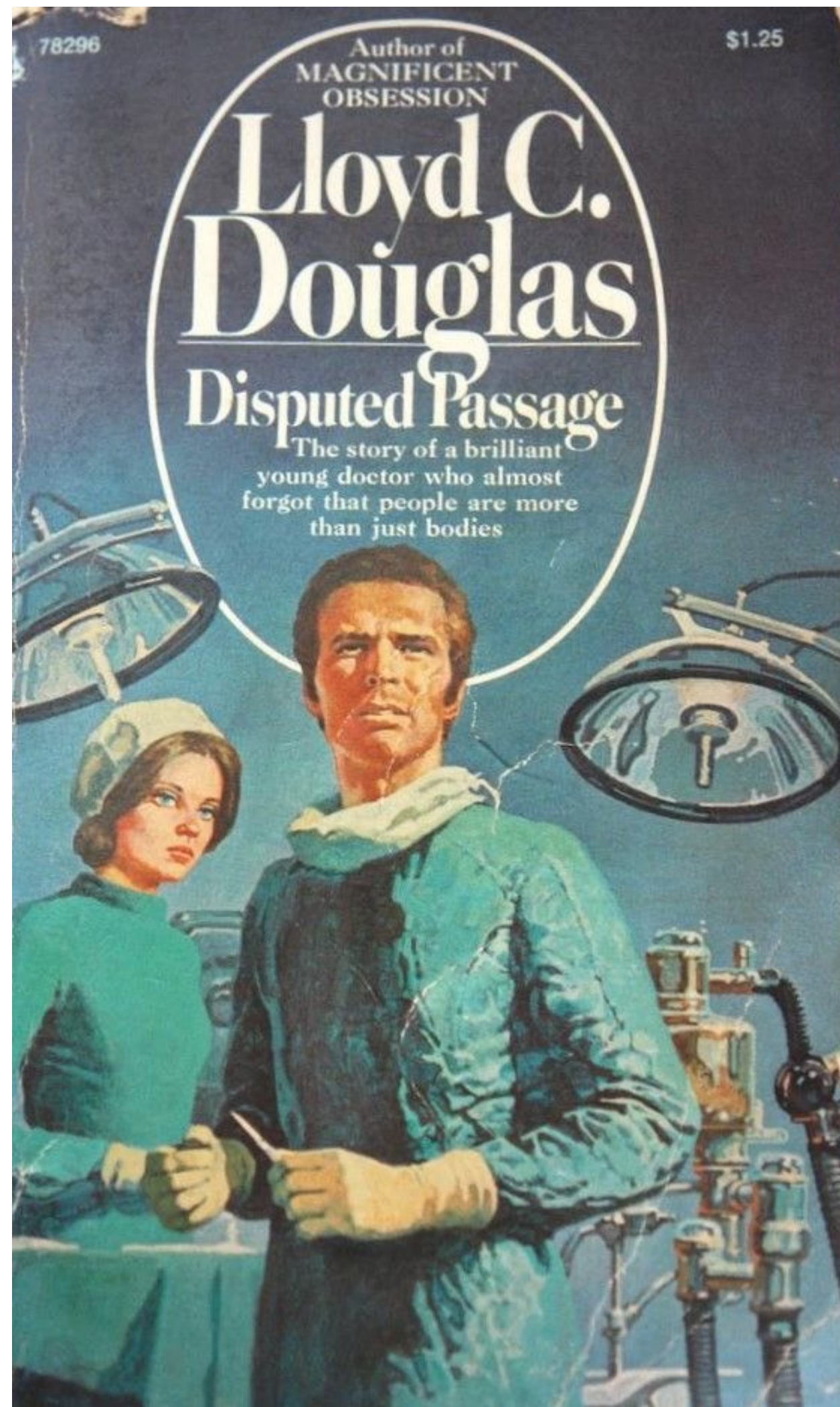
- *Main vehicle for plot/movement*
 - *Source of narrative voice*
 - *Tiers of characters*
 - *Character who is plot happens to!*
- Successful characters are:
 - *Round*
 - *Plausible*
 - *Interesting*
 - *Sympathetic*
 - *Likeable **



- *Round*
- *Plausible*
- *Interesting*
- *Sympathetic*
- *Likeable **

How could this character be...

- Round or flat?
- Plausible or not?
- Interesting or not?
- Sympathetic or not?
- Likable or not?
 - Could she be a gossip we wouldn't want to know but whose adventures we want to follow?



- *Round*
- *Plausible*
- *Interesting*
- *Sympathetic*
- *Likeable **

How could this character be...

- Round or flat?
- Plausible or not?
- Interesting or not?
- Sympathetic or not?
- Likable or not?
 - Could he be a jerk we wouldn't want to know but whose adventures we want to follow?

TOOLS OF CHARACTER

- Choreography
 - *Avoiding character as game piece*
- Dialogue
- POV/Narrative Perspective
 - *Lens of Perspective*



3. STORY MECHANICS

- *The reader experience of the story*
 - Like chronic illness, won't kill our patient today, but will affect their quality of life/reader experience
- *Conscious and unconscious experience*
- *More room for subjectivity*
- *Story mechanics are how the story unfolds!*

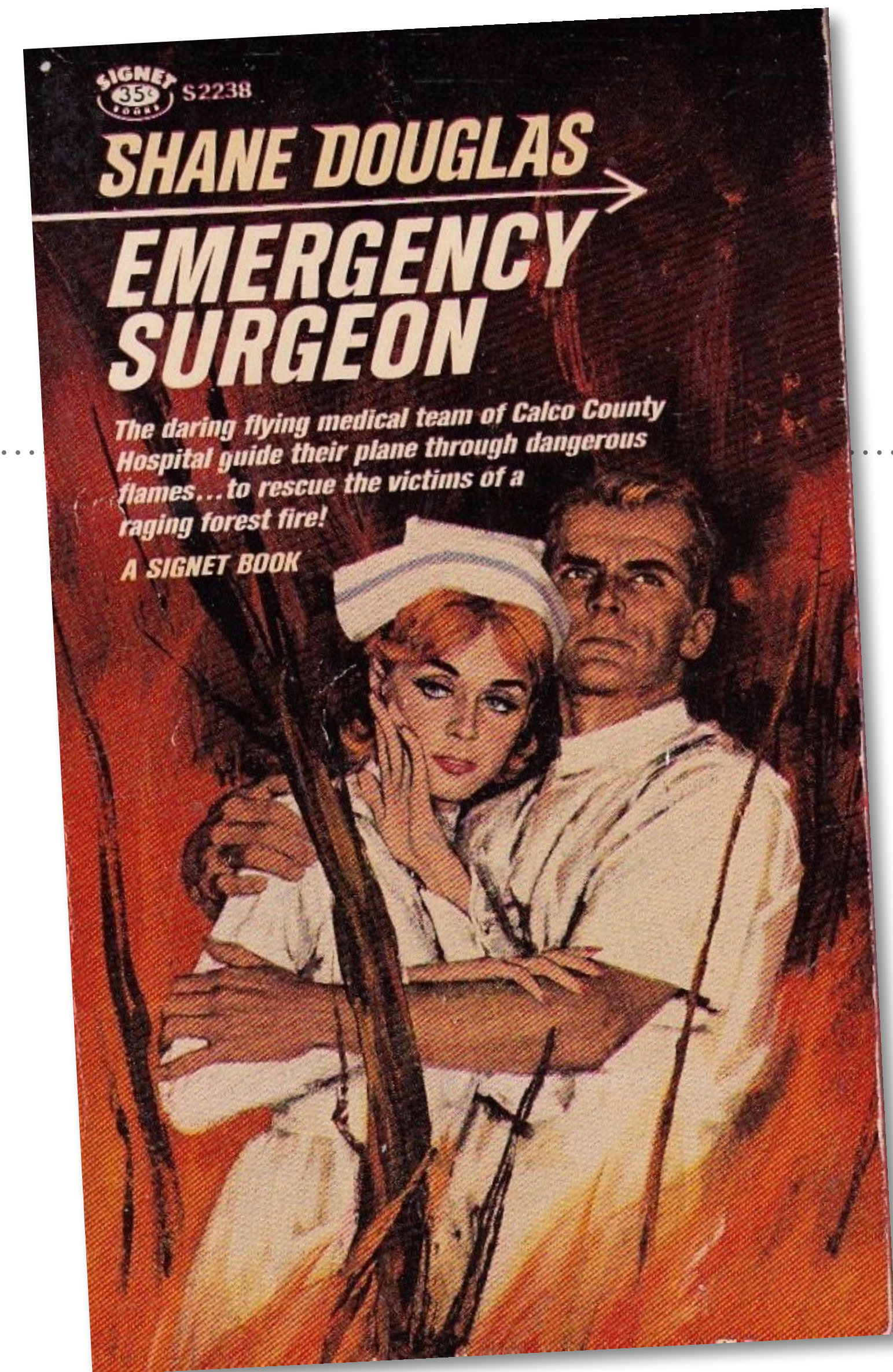
Story Mechanics

- Pacing
- Reality Violations
- Expectations/
Foreshadowing
- Immersion



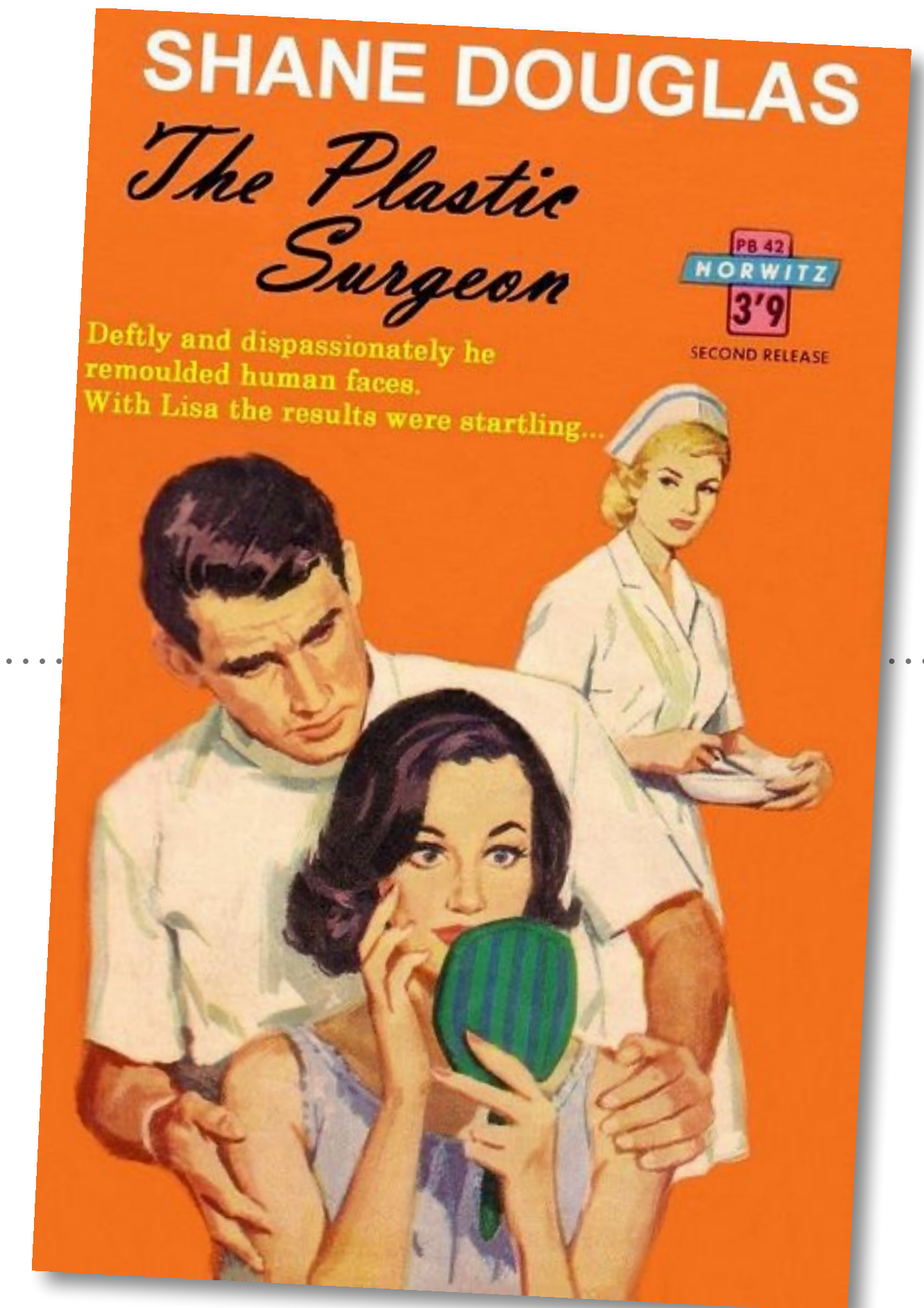
MECHANICAL TOOLS

- Does every detail...
 - *Move plot?*
 - *Build the world?*
 - *Or build character?*
 - *Ideally, more than one!*
- Space on the page
 - *Where to zoom in*
 - *Where to zoom out*



4. CLARITY AND CRAFT

- *Polishing on a paragraph-by-paragraph, sentence-by-sentence level*
- *Often interrogating individual word choice*
- *Applicable to all forms of writing, novel to email*
- *Usually the final stage of editing*
- *Craft is the polish that makes your story sing!*

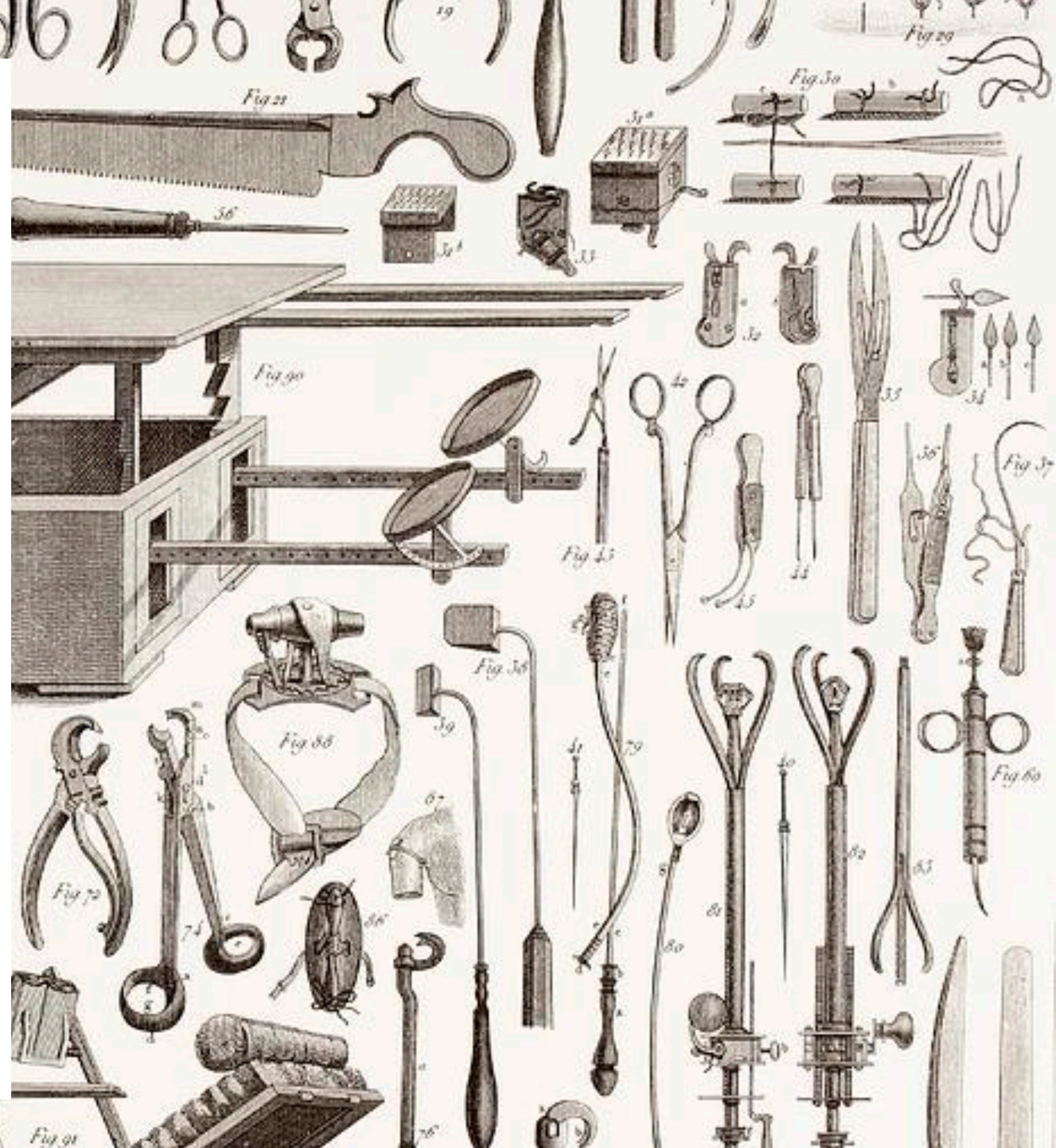


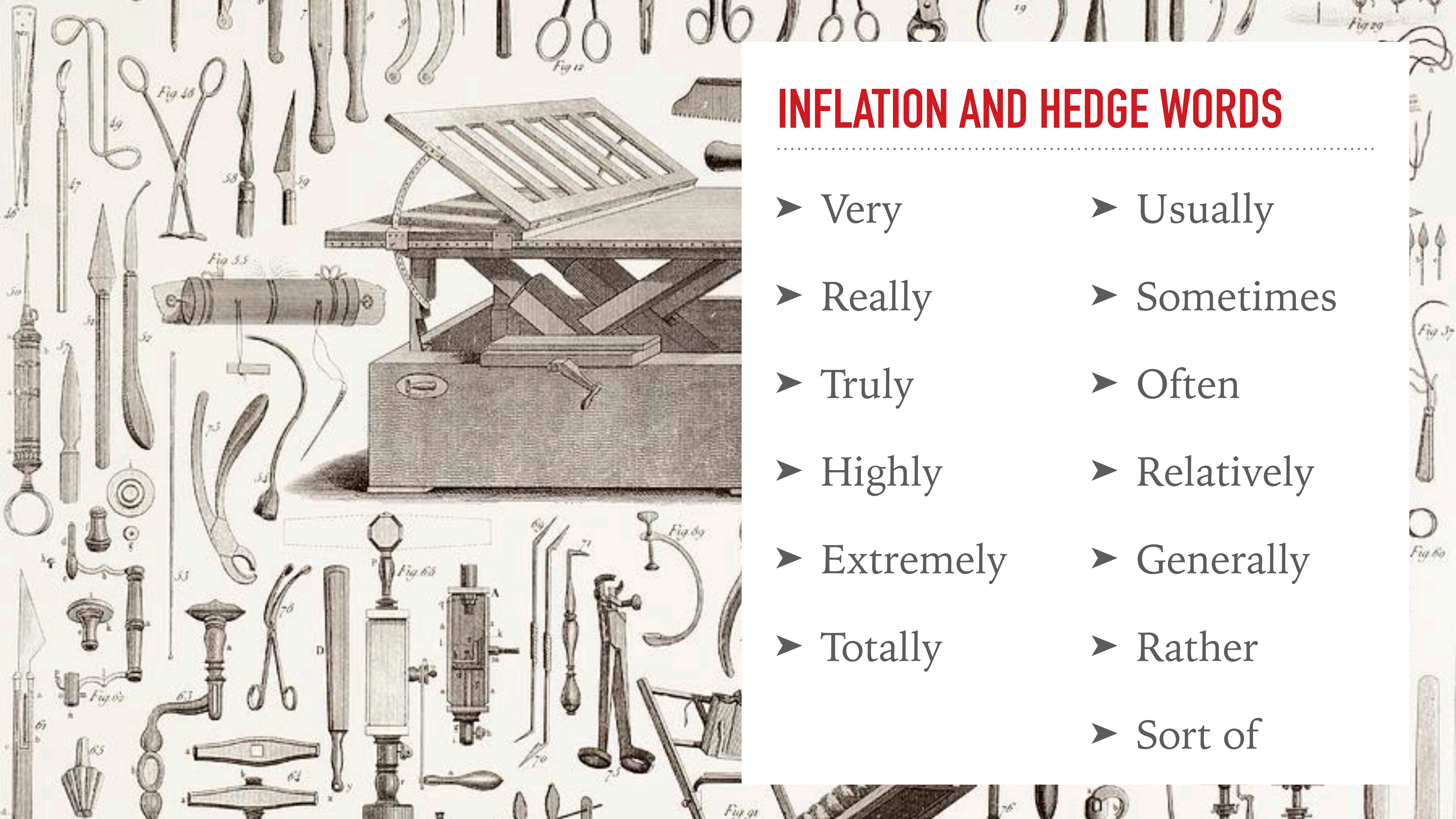
Remember:

We're not offering alternatives to weak language as critique partners. "I've circled some weak language in your submission."

VAGUE WORDS

- It
 - That
 - Here
 - There
 - They*
 - It!
- Some
 - -where
 - -what
 - -one
 - -thing
 - Every-
 - No-
 - Some-
 - Stuff





INFLATION AND HEDGE WORDS

- Very
- Really
- Truly
- Highly
- Extremely
- Totally
- Usually
- Sometimes
- Often
- Relatively
- Generally
- Rather
- Sort of

WHAT IS PASSIVE VOICE?

- The subject of the sentence doesn't perform the action.

“CPR was started at the scene by EMTs.”

- The subject is absent from or obscured in the sentence or thought.

“The patient was stabbed.”

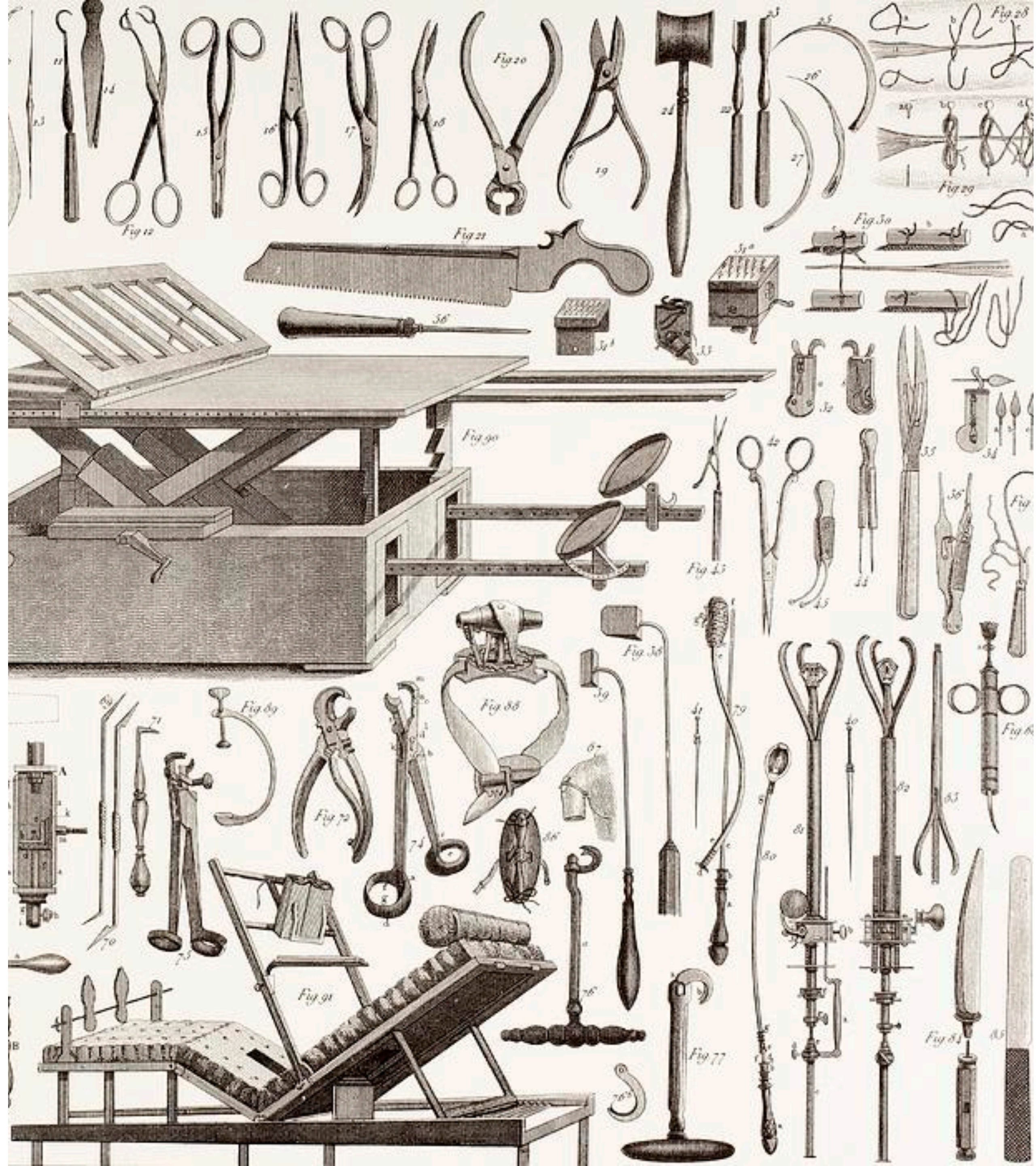
- Valid in certain formats: the news, politics, to evade responsibility...

“A fire started overnight in Aurora...”

“Mission accomplished...”

“Mistakes were made...”

- In fiction, often a type of “telling,” when we want to “show.”



THE TO-BE'S

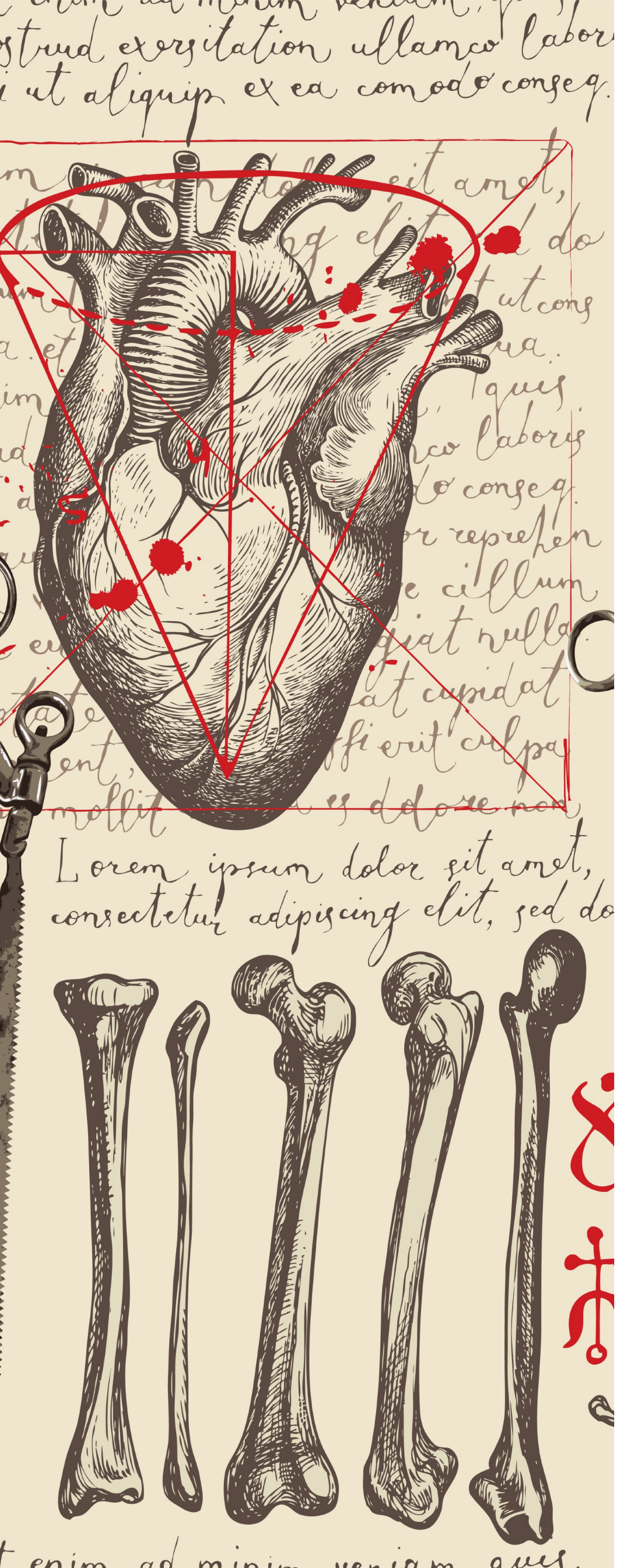
“CPR **was** started at the scene by EMTs.”

“The patient **was** stabbed.”

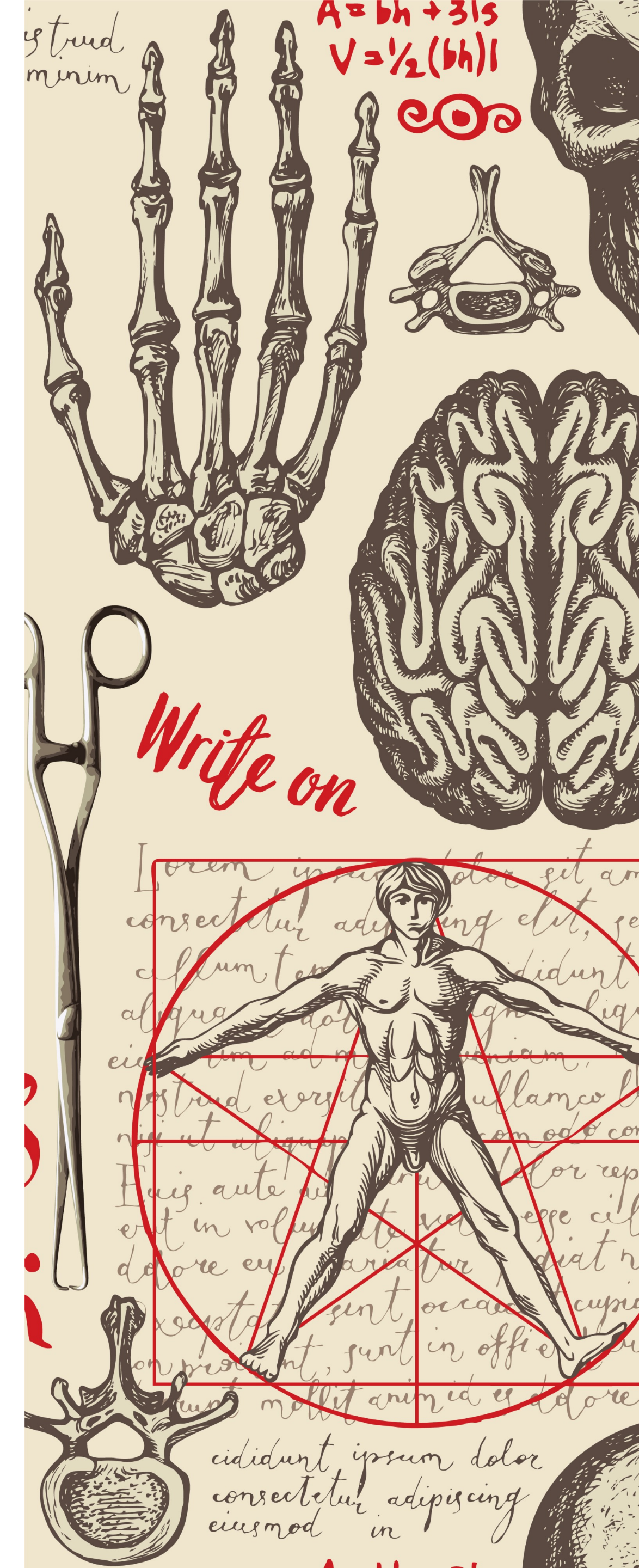
“Mistakes **were** made...”

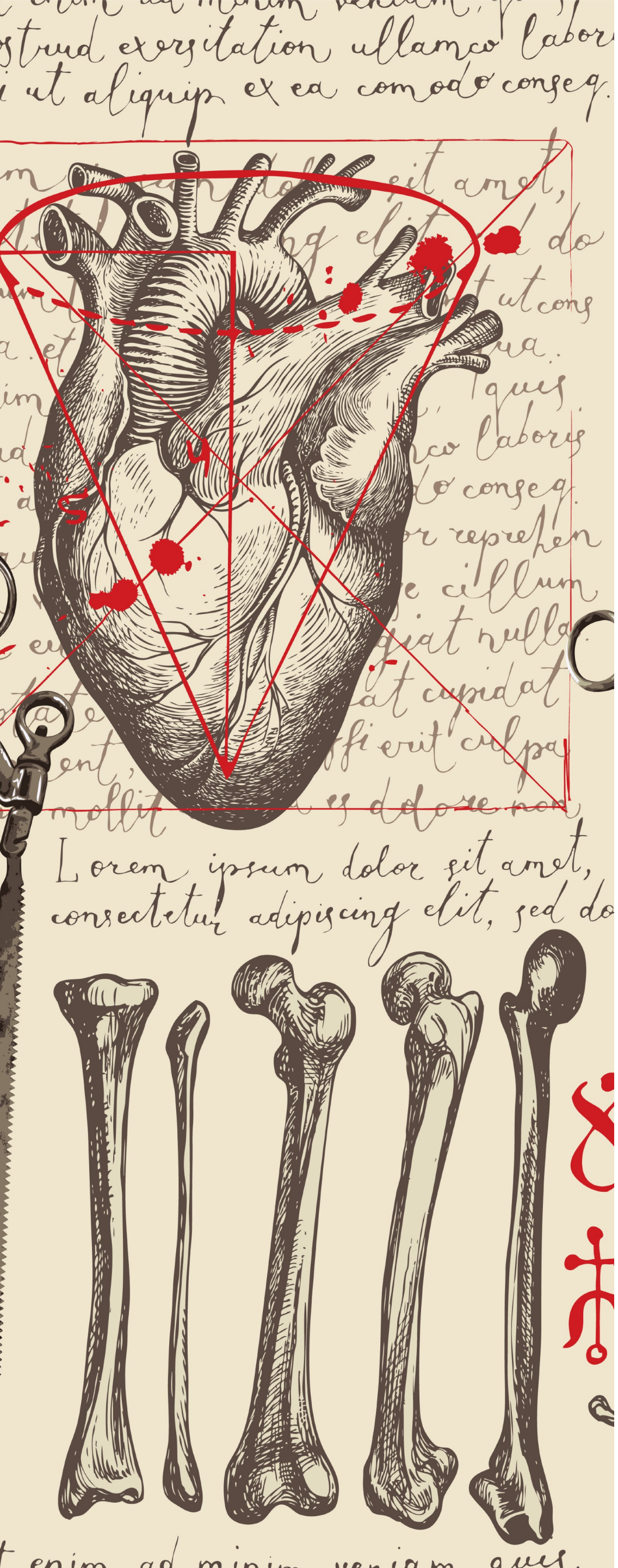
- Avoid with subject specificity.
- Enhance with stronger verbs.
- Add fictional immersion and sensory details.
- Bonus: Add narrator judgment.

	PAST ←	TODAY	→ FUTURE
I..	WAS	AM	WILL BE
HE... SHE...	WAS	IS	WILL BE
YOU... THEY..	WERE	ARE	WILL BE
?	DID	DO	WILL



The night was dark and stormy.



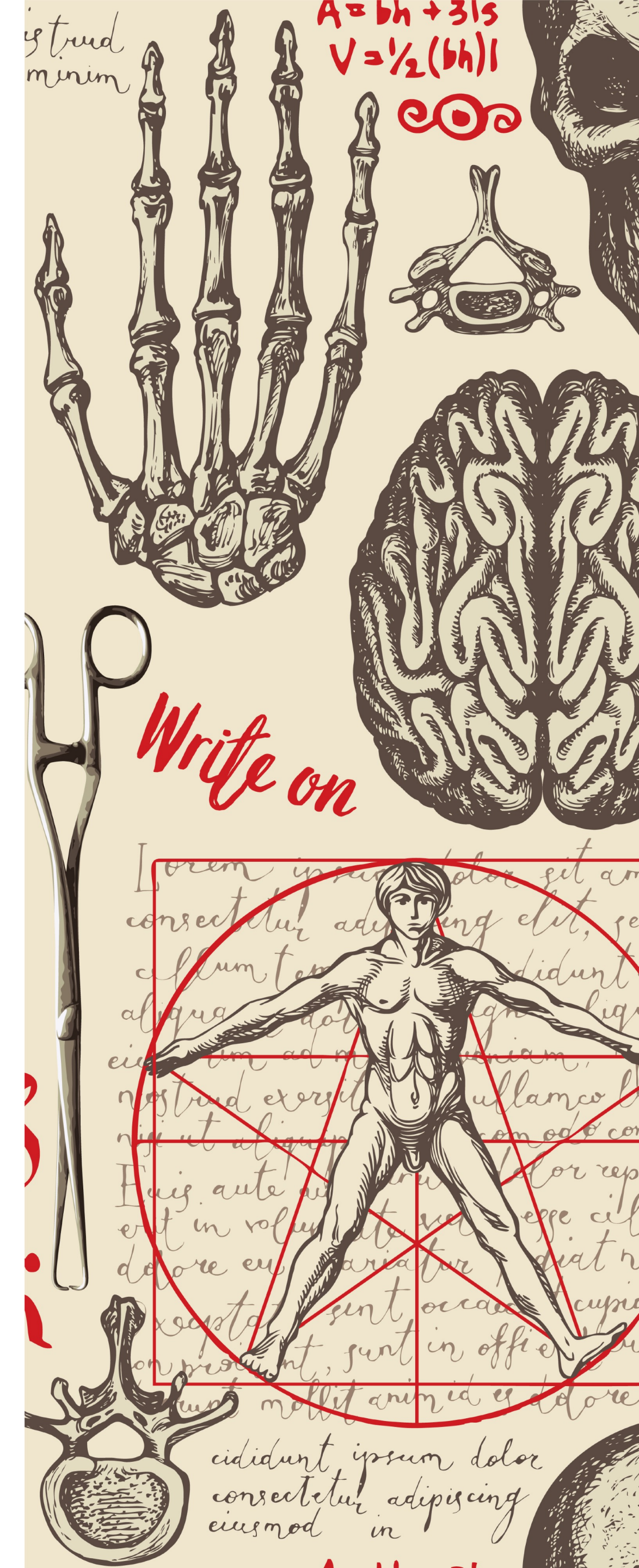


The night **was** dark and stormy.

The night grew dark and stormy.

The night squalled and howled.

The storm attacked the windows that night,
rattling the panes and howling in anger.



SHANE DOUGLAS
ASSISTANT SURGEON

S2166

SIGNET
35¢
BOOKS

Dr. Bill Randall, assistant surgeon to the flying medico Dr. Glen Carew, falls in love with a beautiful nurse only to find that his rival is the patient whose life he is duty-bound to save... A SIGNET BOOK.

STOP
RESTRICTED AREA
SURGICAL PERSONNEL
ONLY

Remember:

We're not offering alternatives to weak language as critique partners.
“I’ve circled some weak language in your submission.”

SHANE DOUGLAS

PB16
HORWITZ
3'9

In her arms he was tempted to forget the deadly epidemic threatening every passenger...

Ship
Surgeon

CHIEF OF SURGERY

- Every story has ONE author.
- Every author retains creative license.
- Every story deserves to live, even if no story is for everybody.
- *Release yourself from responsibility!*
 - You have your own patients...



AND REMEMBER...

- Be kind, even when it's bleeding.
- Say thank you, even when it hurts.
- We sharpen our skills most on the roughest drafts.





Dissecting the Story:

CRITIQUING LIKE A SURGEON

With Kate Jonuska

QUESTIONS?

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