Syllabus
Medical Skills Courses I and II
PMSK 5301
PMSK 5302
Academic Year 2016-2017

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*In the end we retain from our studies only that which we practically apply.*

*Johann Wolfgang von Goethe*
1. General Course Description

The Medical Skills Courses I and II are the first two semesters of a two-year series of courses that are designed to teach each medical student the basic clinical skills needed for medical practice. These skills include effective communication, scheme-based history taking and physical examination, development of clinical reasoning, formation of an initial diagnostic plan, interpretation of basic diagnostic studies, performance of selected procedures, provision of counseling and feedback, and articulate clinical case presentation.

The Medical Skills Courses are closely coordinated with Scientific Principles of Medicine so that each Medical Skills session applies instruction provided during the prior week in SPM. Through this integration, the two courses reinforce each other and deepen the learning of the students.

Learning is accomplished through pre-session review of preparatory material, readiness assurance quizzes, standardized patient interactions, group debriefing following standardized patient encounters, demonstration and guided practice with feedback on performance of simulated clinical procedures, team-based simulated problem solving scenarios, field trips to outlying facilities, and other modalities. Formative feedback on each student's performance is provided through faculty guided review of performance in the standardized patient encounters, peer assessment using predetermined criteria, and periodic review with a faculty member of videotaped SP encounters.

Students are assessed through their performance in simulated settings with standardized patients (OSCE examinations), through their answers on readiness assurance quizzes, and through demonstration of their proficiency with selected procedural tasks. Assessments are administered at the end of each academic unit. At the end of the second year of medical school, a comprehensive OSCE examination is performed testing students over the content covered during the first two years.

2. Overall Course Goal

The overall goal of the Medical Skills Course is for each medical student to achieve proficiency and competence in the fundamental skills of doctoring.
3. Learning objectives

As a result of participation in the MSC course, student will be able to:
### MSC Learning Objectives

- Communicate effectively with patients, family members, faculty, staff, and peers in a respectful and diplomatic manner.

### Institutional Learning Objectives – 2015

- **4.1:** Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.
- **4.2:** Communicate effectively with colleagues and other health care professionals.
- **4.3:** Communicate with sensitivity, honesty, compassion and empathy.

### Assessment Method

- SP checklist criteria – learning encounter
- SP verbal feedback – learning encounter
- Peer feedback – learning encounters
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| Communicate using language that is clear, understandable, and appropriate to each patient. | 1.8 Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.  
2.5 Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care.  
5.1 Demonstrate sensitivity, compassion, integrity and respect for all people. | • SP checklist criteria – learning encounter  
• SP verbal feedback – learning encounter                                                                 |
| Maintain each patient's dignity and modesty during clinical encounters.                  | 5.2 Demonstrate knowledge of and appropriately apply ethical principles pertaining to patient privacy, autonomy and informed consent. | • SP checklist criteria – learning encounter  
• Professionalism criteria assessed during every learning encounter                   |
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<td>Identify the chief reason for the clinical encounter and use questions effectively to find the most pertinent history needed for decision-making.</td>
<td>1.1 Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests. &lt;br&gt;1.5 Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• SP checklist criteria – learning encounter &lt;br&gt;• Faculty debriefing following each learning encounter &lt;br&gt;• SPERRSA video review and discussion &lt;br&gt;• Open Lab practice sessions &lt;br&gt;• End-of-Unit OSCE exam</td>
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<td>Use effective approaches to help patients promote behavioral change for the purpose of avoiding preventable diseases.</td>
<td>1.8 Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making &lt;br&gt;1.9 Provide preventative health care services and promote health in patients, families and communities</td>
<td>Used to include this, but no longer in the curriculum.</td>
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<td>Select and perform the most pertinent physical examination maneuvers to search for findings that support or refute likely diagnoses under consideration.</td>
<td>1.1 Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.</td>
<td>• Weekly learning encounters &lt;br&gt;• Weekly skill building stations &lt;br&gt;• End-of-Unit OSCE exam</td>
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<td>Concisely, accurately, and legibly record the patient's history in the medical record.</td>
<td>1.7 Accurately document history, physical examination, assessment, investigatory steps and treatment plans in the medical record. &lt;br&gt;4.4: Maintain comprehensive and timely medical records.</td>
<td>• Weekly learning encounter SOAP note &lt;br&gt;• OSCE exam SOAP notes &lt;br&gt;• SPERRSA video / SOAP note review and discussion &lt;br&gt;• End-of-Unit OSCE exam</td>
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| Use the patient’s history, physical examination, and diagnostic studies to generate a list of active medical problems. | 1.3 For a given clinical presentation, use data derived from the history, physical examination, imaging and/or laboratory investigation to categorize the disease process and generate and prioritize a focused list of diagnostic considerations. | • Weekly learning encounter debrief  
• End-of-Unit OSCE exam |
| Orally present a patient’s history and physical examination in an organized and concise manner. | 4.2 Communicate effectively with colleagues and other health care professionals. | • Weekly learning encounter debrief - formative assessment only |
| List the appropriate indications, potential risks and intended benefits of common procedures such as venipuncture, bladder catheterization | 1.2 Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment. | • Procedure skill building activities-formative assessment only |
| Proficiently perform several common clinical procedures. | 1.6 Describe and propose treatments appropriate to the patient’s condition and preferences. | • Procedure skill building activities-formative assessment only |
### Syllabus

#### Medical Skills Courses I and II

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| Participate effectively and collaboratively with a healthcare team in an urgent situation. | 7.1 Describe the roles of health care professionals  
7.2 Use knowledge of one’s own role and the roles of other health care professionals to work together in providing safe and effective care  
7.3 Function effectively both as a team leader and team member  
7.4 Recognize and respond appropriately to circumstances involving conflict with other health care professionals and team members | • Team STEPPS  
interprofessional scenario session - debriefing activity (formative assessment only) |
| Maintain ongoing learning practices that promote the development of optimal medical skills including careful preparation, active engagement, and reflection on formative feedback. | 3.3 Accept and incorporate feedback into practice. | • Mastery based assessment  
of physical examination skills  
• SP learning encounter debrief  
• SPARRSA video reviews |

*Please note session level objectives are posted online for each session.

#### 4. Integration with the Medical School Curriculum

The Presentation-based Curriculum creates an unprecedented opportunity for integration and application of topics in Medical Skills with content covered in Scientific Principles of Medicine. Matching the standardized patient cases and skill building activities with the content of the basic sciences curriculum creates reinforcement between these two courses that deepens and strengthens the learning in both. In addition, the skills developed in the Medical Skills Course are also practiced during clinical experiences in the Society, Community and the Individual. Eventually, the clinical schemes covered during the first two years of medical school will be carried on into the clinical clerkships in the third year of medical school.
5. Instructional Methods

Medical Skills Courses I and II will be presented as a series of weekly sessions throughout the first year of medical school. Students from each college will meet together for each two-hour session. The students will be divided into learning groups, and each group will rotate through the learning activities being presented that day.

- **Preparatory reading assignments:** Prior to each session, students will study the Exam Room Guide that has been prepared for the clinical scheme, and will review the video recording that reviews the Guide. They may also have a reading assignment, for example, a section from Bates' Guide to Physical Examination and History Taking, 10th Edition by Lynn S. Bickley.

- **Objective Structured Clinical Encounter (OSCE):** Both a learning and an assessment tool, the OSCE is a structured exercise in which the student interacts with a standardized patient who has memorized a clinical scenario. Students will be required to demonstrate specific skills in communication, history taking, physical examination, and recording of clinical information. Students receive specific feedback on their performance.

- **Integrated OSCE Station:** During the OSCE, a Cross-Disciplinary Integrated Station drawing on knowledge from other courses may be included for formative assessment. Feedback on this station will be formative will not be included in the Unit grade.

- **Small-group activities:** Demonstrations, facilitated performance, and practice with interview skills, physical examination techniques, and clinical procedures will be principally carried out in small groups supervised by clinical faculty.

- **Clinical simulations:** The ATACS Center is capable of simulating numerous clinical procedures on mannequins or in computer-generated virtual reality. Students will use the Center to develop and refine their skills before performing procedures on actual patients.

- **Patient encounter log:** During medical school, each medical student maintains a log of their patient encounters, including standardized patient encounters. The Online Patient Log (OP Log) can be found on the WebCT page for the Medical Skills Course.

- **SP Encounter Review and Reflective Self-Assessment:** once each semester, every student is required to meet with the Nurse Educators for a small group review of one of their videotaped SP encounters. Prior to the session, each student will view one of their videotaped SP encounters, complete a reflective SP Video Questionnaire, and identify goals for professional development. During the session, students view a sample of each other’s videotapes, and identify opportunities for improvement in communication, interpersonal skills, and clinical reasoning.
• **Field Trip:** Students will visit selected medical facilities where they will be oriented to the operations and healthcare procedures of the facility. Students may interview selected patients during a field trip and maybe assigned to prepare a structured write-up or report of their experience.

### 6. Policies and Procedures

The Medical Skills Course follows all applicable policies and procedures of the Office of Student Affairs of the Texas Tech University HSC, Paul L. Foster School of Medicine.

In addition, the Medical Skills Course has established additional course-specific policies that are created to maintain an optimal learning environment, promote professional conduct with standardized patients, faculty, staff and peers, and protect the resources of the Center for Advanced Teaching and Assessment in Clinical Simulation (ATACS).

#### 6.1. Schedule and Attendance

- **Schedule:**
  - a. Medical Skills sessions for MS1 students are generally held once a week on Thursday. Students are assigned to attend for 2 hours – sessions are held from 10 to 12, 1 to 3 PM, and 3:30 to 5:30 PM. Each student will be assigned a time. **The time of the assigned session will rotate each semester.**
  
  b. Timing may vary for special activities such as visits to the Dialysis Center and TBLs. Calendar will be posted well in advance of the session.
  
  c. Open labs are generally weekly on Wednesday by the Nurse Educators. Times are posted on Blackboard.
  
  d. SPERRSA sessions are held on Wednesday. Attendance at one session is required in the fall semester of second year.

- **Attendance:** Attendance at Medical Skills Course activities is expected. Students are expected to arrive on time and participate in course activities until excused by the supervising faculty member. Students arriving late may receive an unexcused absence for the session from the Course Co-Director.

- **Absences:** Students must notify the Course Coordinator in advance of an anticipated absence, preferentially at least two working days prior to the MSC session (so that adjustments can be made in the number of standardized patients). In the event of an emergency that results in an absence from an MSC session, the student must notify the course Co-Director or Coordinator within three working days or the session will be counted as an unexcused absence. These notifications are in addition to the notice provided to the Office of Student Affairs through the
plfabsence@ttuhsc.edu email address. The Office of Student Affairs makes the final determination regarding whether an absence is excused.

- **Make up sessions:** On a case-by-case basis the MSC Course Co-Director in coordination with the ATACS Center staff may schedule make up sessions for students with absences from MSC sessions.
- **Prior commitments:** For conflicts due to events that are anticipated well in advance (such as religious holidays or weddings), the student must contact the Course Coordinator or Course Co-Director and the Office of Student Affairs. The Office of Student Affairs will make the determination whether the absence is excused.

6.2. **Conduct**

- **Deportment:** Students are expected to be attentive to the activities and instruction in each session, and conduct themselves in a courteous and professional manner with peers, staff, faculty, and standardized patients.
- **Personal belongings:** Students will be provided with dry erase boards during the MSC sessions. Students should bring only required equipment to each MSC session. Do not bring backs, purses, computers, or notebooks into the ATACS Center. These should be stored in your locker. The ATACS Center is not responsible for lost or stolen items.
- **Internet:** In sessions where computers are used, students may use the internet only for purposes related to the MSC session.
- **Cell phones:** Cell phones must be switched off during MSC sessions. Students must not use cell phones without permission of a faculty member. Use of cell phones during End-of-Unit OSCE examinations will be considered a breach of the student honor code and grounds for disciplinary action.
- ** Guests and Children:** Students may not bring friends or children to the ATACS Center during learning sessions.
- **Consumables:** Students may not bring food or drink into the ATACS Center.
- **Security:** The ATACS Center is a secure area. Unauthorized entry is not permitted.
- **Property:** Removing equipment from the ATACS Center is not permitted under any circumstance.

6.3. **Professional Attire**

- Policies regarding appropriate attire are covered in the policies and procedures of the Office of Student Affairs of the Texas Tech University HSC, Paul L. Foster School of Medicine.
• ATACS is considered to be a clinical area, and standardized patients are to be treated the same as actual patients. Because of the requirement that medical students examine standardized patients who are partially disrobed, it is required that students dress in a modest and understated manner, commensurate with proper decorum for clinical work.
  
  o Men are required to wear business casual attire. This includes slacks, a collared dress shirt, dress shoes, and optionally a necktie. Inappropriate attire includes polo shirts, running shoes, blue jeans, cargo pants, shorts, or T-shirts.
  
  o Women are required to wear business casual attire. This includes slacks, dresses, or a skirt with blouse and dress shoes. Inappropriate attire includes low cut necklines, see-through blouses, bare midriffs, and short skirts or dresses that reveal the thigh above the knee.
  
  o The Course Co-Directors may designate specific learning activities as required for wearing clean medical scrubs.
  
  o Closed-toe shoes are required in all clinical settings. Heels should be modest (3” or less). Sandals and shoes with open toes are prohibited in clinical areas by OSHA regulations because of the hazards posed by spills, needles, and sharp instruments.
  
  o Grooming should be hygienic. Students must shower, use deodorant, and use daily oral hygiene. Long hair must be tied back so that it does not contact the standardized patient or interfere with the physical examination. Facial hair such as beards and sideburns must be neat, clean, and well-trimmed. Fingernails should be clean and length of nails should not be so long as to interfere with the proper performance of the physical examination.
  
  o Students will wear their short white coats during Medical Skills Course sessions including review sessions and OSCE examinations.

• The Course Co-Directors reserve the right to decline permission for a student to participate in a session if it is their judgment that attire, grooming, or hygiene does not meet the standards stated above.

6.4 Immunization Policy

• In accordance to TTUHSC Operating Policy, students must be current on all immunizations prior to entering a patient clinic or hospital unit. To review the TTUHSC Health Surveillance Program, go to http://www.ttuhsc.edu/fostersom/studentaffairs/

6.5 Occupational Exposure Management
7. Formative Assessment and Feedback

Formative feedback is provided to the students on a weekly basis through the following mechanisms: Standardized Patient checklist and feedback, peer observer feedback, group debriefing and note writing. One on one feedback to each student is also provided by faculty supervising the skill practice stations. In addition, SPERRSA and Open Lab are designed to provide formative feedback.

8. Student Summative Assessment and Grading

On the basis of a composite assessment, each student in the Medical Skills Course will receive a grade of either Pass or Fail for each semester of the course. The components of the composite assessment are:

- **Attendance**: Attendance will be recorded weekly. Cumulatively, session attendance will account for 30% of each student’s grade for each Unit.

- **Performance on weekly quizzes**: A Readiness Assurance Quiz is regularly presented at the beginning of each Medical Skills session. Students achieving a cumulative score of 80% on these quizzes will receive one bonus point added to their summative score for the Unit.

- **Completion of the OP Log**: Students are expected to record each standardized patient encounter in their Online Patient Log (OP Log). Students completing their OP Log with all of their standardized patient encounters by the end of the Unit will receive one bonus point added to their summative score for the Unit.

- **Performance on OSCE examinations**: Each End-of-Unit OSCE will have between 2-4 stations. One or more of these stations will be a Standardized Patient encounter. In addition, one station may be a Cross-Disciplinary Integrated station that draws on content from other courses such as SCI or Masters Colloquium. Assessment at each station will be based on demonstration of proficiency as assessed using predetermined criteria that assess skills in history taking, physical examination, communication, clinical reasoning, documentation, and professional demeanor. Feedback on the Cross-Disciplinary Integrated Station will be formative and will not be included in the Unit grade. Performance on the OSCE examinations will constitute 70% of the summative score for each Unit.

- **Physical Exam Skill Evaluation**: Each Unit may require that students demonstrate mastery of a physical examination set. Testing times will be arranged during each
Unit. Performance criteria will be predetermined and these criteria will be available to the students. Students must correctly perform 90% of the predetermined criteria in order to receive a passing score. Students will have multiple opportunities to achieve a passing score on this activity.

- **Team-based learning sessions**: Several Units include one or more TBL sessions. TBL sessions consist of an individual readiness assurance test, a group readiness assurance test, and an application exercise. All of these activities are graded. It is noted that a small contribution of this grade comes from group activities. Therefore each student’s individual Unit grade will, to a small extent, reflect the performance of their peers. Student scores on the TBL activity will be included in the final score for the Unit as part of the OSCE exam score.

- **Medical Record Keeping**: During the renal unit, students will visit one of the dialysis centers in the surrounding community. They will interview a dialysis patient to assess the psychological and social factors, in addition to the medical issues, affecting the patient’s life. They will be required to submit a progress note documenting this visit which will be graded and included in the end of unit assessment.

- **Passing score**: Students must demonstrate a cumulative score of 75% or greater in order to receive a grade of Pass for an academic Unit. Students must receive a grade of Pass in all constituent Units in order to receive a grade of Pass for a semester of the Medical Skills Course.

- **Unprofessional behavior**: Students demonstrating unprofessional behavior may receive a grade of Fail for a Unit regardless of their cumulative score.

- **Make up examinations**: Students who have attended the majority of sessions during the academic Unit and who achieve his summative score of less than 75% will be offered an opportunity to take a makeup OSCE examination. Arrangements will be made to take the makeup OSCE examination within one month of the end of the academic Unit. Students will only be required to retake the portions of the examination on which they received a score of less than 75%. Those students who achieve a score of less than 75% on the makeup examination will receive a grade of Fail for the Unit. Those students will be offered an opportunity to repeat the Unit examination at the end of the academic year. If they successfully remediate the failed Unit at the end of the academic year, the grade of Fail will be changed to a grade of “Successfully Remediated”.

- **Posting of grades**: Each student’s Unit OSCE grade will be released upon receipt of a completed course and faculty evaluation, achieving a passing score on the Physical Exam Skills Evaluation (if required), and successful completion of any make-up examinations. If the student does not achieve a passing score on a required Physical Exam Skill Evaluation prior to the end of the semester, the student’s grade will be listed as incomplete until the student successfully completes this requirement.
8. Professionalism

Students are expected to adhere to the Standards of Professional Conduct that are delineated in the Medical Student Handbook of the Paul L. Foster School of Medicine. Unprofessional conduct may result in a Unit grade of Fail regardless of examination scores or attendance. Episodes of unprofessional behavior may be documented by a course faculty member or by a member of the staff on an incident card. These cards will be handled according to policies established by the Office of Student Affairs.

9. Textbooks

The required textbook for the course is:

Optional textbooks for the course include:
- Symptoms to Diagnosis, An Evidence-Based Guide, 3rd ed. (2014), by Scott D. Stern, Adam S. Cifu, Diane Altkorn
- The Patient History, Evidence-Based Approach, (2015), by Mark Henderson
- Dan Longo, et al., Harrison’s Principles of Internal Medicine; 18th edition (2011), which is available online through the TTUHSC Library web site. Click on TTUHSC > Library > eBooks > AccessMedicine > Harrison’s Online.

Electronic Resource:
- UpToDate which is available online through the TTUHSC Library web site. [http://www.uptodate.com/](http://www.uptodate.com/)

10. Required Equipment

1. A stethoscope
2. A 256 Hz tuning fork
3. A Dejerine reflex hammer
4. A penlight
5. A tape ruler
6. A Snellen eye card (for vision testing)
7. A white coat

**Note:** Each exam room in the ATACS Center is equipped with an otoscope, an ophthalmoscope, and a blood pressure cuff. Therefore, students do not need to purchase a diagnostic instrument set or sphygmomanometer for the Medical Skills Course.
11. Staff and Faculty Roster and Scheduled Office Hours

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Dr. Htay has an open door policy. Students are welcome to visit any time if the office door is open.
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