

Using the Morbidity and Mortality Conference Model to Explore and Improve Community-Based Oncology Care (Video Program)

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. A survey of lung cancer clinical investigators and general oncologists (n = 79) pertaining to the last patient in their practice who died of metastatic nonsquamous non-small cell lung cancer (NSCLC) with no targetable mutation and for whom they provided care for at least 9 months determined that a strong majority of those surveyed were not very attached to the patient emotionally.
 - a. True
 - b. False
2. The Phase III KEYNOTE-024 study demonstrated a significant improvement in outcomes with pembrolizumab compared to platinum-based chemotherapy as first-line therapy for patients with advanced NSCLC and a PD-L1 tumor proportion score of _____ or greater.
 - a. 10%
 - b. 30%
 - c. 50%
3. The KEYNOTE-024 study demonstrated significant improvement in which of the following study endpoints?
 - a. Overall response rate
 - b. Progression-free survival
 - c. Overall survival
 - d. All of the above
 - e. Both a and b
 - f. Both a and c
4. The Phase II KEYNOTE-021 trial evaluating the addition of pembrolizumab to carboplatin/pemetrexed as first-line therapy for advanced nonsquamous NSCLC demonstrated a statistically significant _____ advantage for patients who received pembrolizumab.
 - a. Overall survival
 - b. Progression-free survival
 - c. Both a and b
 - d. Neither a nor b
5. The majority of oncologists who were surveyed regarding their choice of systemic treatment regimen to administer in any line of therapy as it pertained to the last patient in their practice who died of metastatic colorectal cancer (CRC) for whom they provided care for at least 9 months (n = 77) opted for _____.
 - a. Aflibercept
 - b. FOLFIRI/bevacizumab
 - c. FOLFOX/bevacizumab
 - d. Regorafenib
 - e. TAS-102
6. A strong majority of the oncologists surveyed would use FOLFOX/bevacizumab as _____ for patients with metastatic CRC.
 - a. First-line therapy
 - b. Second-line therapy
 - c. Late-line therapy
7. The majority of surveyed oncologists who treat metastatic CRC found regorafenib to _____.
 - a. Be tolerable with no dose/schedule modifications necessary
 - b. Be somewhat tolerable, and issues were manageable with dose reductions and/or schedule modifications
 - c. Have significant tolerability issues that required discontinuation
8. Current guidelines recommend that _____ undergo BRCA testing.
 - a. All patients with epithelial ovarian cancer (OC)
 - b. Only patients of Ashkenazi Jewish descent
 - c. Only patients with a strong family history of breast cancer or OC at a young age

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9. For which patients with platinum-sensitive recurrent OC did niraparib maintenance therapy provide a significant progression-free survival benefit in comparison to placebo on the Phase III ENGOT-OV16/NOVA trial?
- a. Patients with germline BRCA mutations
 - b. Patients without germline BRCA mutations
 - c. Patients with HRD positivity and no germline BRCA mutations
 - d. All of the above
 - e. Both a and b
 - f. Both b and c
10. A strong majority of the oncologists surveyed referred to hospice care their last patient who died of _____ and for whom they provided care for at least 9 months.
- a. Metastatic CRC
 - b. Metastatic nonsquamous NSCLC with no targetable mutation
 - c. Metastatic epithelial OC
 - d. All of the above