

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. The IDEA pooled analysis of studies evaluating the duration of adjuvant oxalipatin-based therapy for patients with Stage III colon cancer demonstrated that survival outcomes were not inferior for patients with lower-risk disease who received 3 months compared to 6 months of therapy.  
a. True  
b. False
2. Which of the following patients with mCRC do not derive clinical benefit from the addition of EGFR antibodies to first-line chemotherapy?  
a. Patients with left-sided primary cancers  
b. Patients with right-sided primary cancers
3. Approximately what proportion of patients with CRC have HER2-amplified or HER2-mutated disease?  
a. 20%  
b. 10%  
c. 4%
4. In the randomized Phase II SWOG-S1613 study, which nonchemotherapy-containing HER2-targeted doublet will be compared to cetuximab/irinotecan for HER2-amplified mCRC?  
a. T-DM1/lapatinib  
b. Trastuzumab/lapatinib  
c. Trastuzumab/pertuzumab
5. Which of the following phenotypes tends to be associated with MSI-high colon cancer?  
a. Right sidedness  
b. Mucinous type  
c. BRAF mutation  
d. All of the above
6. What was the response rate in the CheckMate 142 study of single-agent nivolumab for previously treated MSI-high or mismatch repair-deficient mCRC?  
a. 50%  
b. 25%  
c. 10%
7. Both pembrolizumab and nivolumab are indicated for the treatment of metastatic MSI-high or mismatch repair-deficient CRC that progresses after previous therapy.  
a. True  
b. False
8. In patients with MSI-high CRC the mutational load is \_\_\_\_\_ compared to the mutational load in patients with MSS CRC.  
a. Approximately 100 times higher  
b. Roughly equivalent  
c. Lower
9. Which of the following results was observed in the SWOG-S1406 study with the addition of vemurafenib to cetuximab/irinotecan for patients with treatment-refractory BRAF V600E-mutated mCRC?  
a. Doubling of progression-free survival  
b. Tripling of the disease control rate  
c. Significant increase in skin toxicity  
d. All of the above  
e. Both a and b
10. The onset and delayed recovery of neutropenia has been demonstrated to be a positive predictive factor for outcomes with TAS-102 treatment.  
a. True  
b. False