

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Results of the Phase III ALEX study evaluating alectinib versus crizotinib demonstrated a significant progression-free survival (PFS) improvement with alectinib for _____ advanced ALK-rearranged non-small cell lung cancer (NSCLC).
 - a. Treatment-naïve
 - b. Previously treated
2. The 2017 CAP/IASLC/AMP guidelines recommend the following testing for patients with lung adenocarcinoma and a targetable alteration who have experienced disease progression after an initial response to appropriately targeted therapy.
 - a. For patients with EGFR-mutated disease that progresses after treatment with a first- or second-generation EGFR tyrosine kinase inhibitor (TKI), EGFR T790M mutation testing should be used to guide patient selection for treatment with a third-generation EGFR TKI
 - b. For patients with ALK-rearranged disease, routine testing for ALK mutations should be performed to guide patient selection for treatment with a third-generation ALK inhibitor
 - c. Both a and b
3. The Phase III FLAURA study comparing first-line osimertinib to either erlotinib or gefitinib for advanced EGFR-mutated NSCLC demonstrated a significant improvement in PFS for patients who received osimertinib.
 - a. True
 - b. False
4. Mechanisms of resistance to EGFR TKIs include _____.
 - a. Development of mutations in the EGFR gene (T790M, C797S)
 - b. Transformation to small cell lung cancer
 - c. Activation of alternative pathways (eg, MET amplification)
 - d. All of the above
5. Which of the following statements is true regarding the combination of dabrafenib and trametinib for BRAF mutation-positive metastatic NSCLC?
 - a. The combination has been FDA approved for patients with BRAF V600E mutations
 - b. Research suggests that the combination is not effective for BRAF non-V600 mutations
 - c. Both a and b
6. The Phase III PACIFIC study comparing durvalumab to placebo for patients with Stage III NSCLC after platinum-based chemoradiation therapy demonstrated _____ with durvalumab.
 - a. Significantly higher rates of Grade 3 and 4 adverse events
 - b. A significant improvement in PFS
 - c. Both a and b
7. Results of the CheckMate 153 trial evaluating continuous treatment with nivolumab until disease progression versus stopping nivolumab after 1 year for patients with previously treated, advanced NSCLC demonstrated similar PFS in the 2 arms.
 - a. True
 - b. False

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8. Management of Grade 4 immune-related adverse events associated with checkpoint inhibitors includes _____.
 - a. Administering systemic corticosteroids
 - b. Administering other immune suppressants
 - c. Continuing the checkpoint inhibitor
 - d. All of the above
 - e. Both a and b
9. The STAR study by Basch and colleagues comparing self-reporting of symptoms to standard symptom monitoring for patients receiving chemotherapy for metastatic breast, lung, genitourinary and gynecologic cancers demonstrated that patients who self-reported their symptoms had a significantly better _____.
 - a. Quality of life
 - b. Overall survival
 - c. Both a and b
10. The Phase III CheckMate 816 study is comparing nivolumab with ipilimumab, nivolumab with chemotherapy and chemotherapy alone for NSCLC in which setting?
 - a. Neoadjuvant
 - b. Adjuvant
 - c. Metastatic