POST-TEST

RTP Live from Chicago: Investigator Perspectives on Recent Advances and Challenging Questions in the Management of Colorectal Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **Which of the following outcomes has been observed among patients with previously untreated microsatellite instability-high metastatic colorectal cancer (mCRC) in the Phase III CheckMate 8HW study?**
   a. Improved progression-free survival (PFS) with nivolumab/ipilimumab compared to pembrolizumab monotherapy
   b. Improved PFS with nivolumab/ipilimumab compared to chemotherapy
   c. Similar PFS with nivolumab/ipilimumab and chemotherapy but increased toxicity with the former

2. **Adaptive resistance to KRAS G12C inhibition can be blocked by which of the following?**
   a. PD-1/PD-L1 inhibition
   b. BRAF inhibition
   c. EGFR inhibition
   d. VEGF inhibition

3. **In the Phase I/II KRYSTAL-1 study, which of the following therapies demonstrated clinically meaningful activity for patients with mCRC with KRAS G12C mutations?**
   a. Adagrasib monotherapy
   b. Sotorasib monotherapy
   c. Adagrasib and cetuximab
   d. Sotorasib and panitumumab

4. **A Phase II study evaluating neoadjuvant nivolumab/ipilimumab for patients with locally advanced mismatch repair-deficient colon cancer demonstrated which of the following outcomes?**
   a. Surgery was delayed in a significant fraction of patients due to autoimmune toxicity
   b. Major pathological responses were observed in approximately 10% of patients
   c. Major pathological responses were observed in almost all patients

5. **Recently presented updates of disease-free survival (DFS) analyses evaluating a personalized tumor-informed assay to detect and quantify circulating tumor DNA (ctDNA) for patients with Stage I to IV radically resected CRC demonstrated which of the following results?**
   a. ctDNA positivity was predictive of inferior DFS for patients with Stage II or III disease only
   b. ctDNA positivity was predictive of inferior DFS for patients with Stage I to IV disease
   c. ctDNA positivity was not predictive of DFS