1. Which of the following statements about the cost for oral anticancer medications is true?

   a. The average monthly cost has risen from ~$1870 in 2000 to ~$11325 in 2014.
   b. The average monthly cost decreases yearly following FDA approval.
   c. The out-of-pocket cost is often less than $2000 per month.
   d. Payers limit high costs by requiring dispensing from patient’s retail pharmacy.

2. Which of the following statements is true regarding insurance coverage for oral anticancer medications?

   a. Medicare patients are ineligible for manufacturer coupons.
   b. Manufacturer- or foundation-sponsored prescription assistance programs are only for Medicare patients.
   c. Copays are minimal for patients receiving oral anticancer medications.
   d. Medicare Part B will cover cost of all oral anticancer medications.

3. Access to oral anticancer medications may be limited by all EXCEPT:

   a. Access to medical records/healthcare team.
   b. Lost prescriptions.
   c. Prior authorization requirements.
   d. Mail-order delivery.

4. You are a pharmacist at pharmacy that fills specialty medications. You receive a new prescription for imatinib 400 mg po daily. Which of the following is the most important thing a community pharmacist can do to facilitate adherence?

   a. Provide manufacturer’s patient information
   b. Refer patient to cancer care team
   c. Determine adherence with each refill
   d. Fill a pill box with medication

5. A 67-year-old female with metastatic colorectal cancer has been prescribed regorafenib (a vascular endothelial growth factor [VEGF] multikinase inhibitor). You are preparing the prescription for dispensing and will be counseling the patient on proper administration and side effects. Which of the following statements is correct?

   a. Regorafenib should be taken with a low-fat breakfast.
   b. Regorafenib should be taken on an empty stomach.
   c. Regorafenib should be taken with or without food but avoid Seville oranges and grapefruit.
d. Regorafenib should be taken with food but avoid tyramine-containing foods.

6. KS 62 yo BF with metastatic breast cancer cancer now receiving capecitabine 1000 mg/m² PO BID days 1-14 and lapatanib 1250 mg po days 1-21. Which of the following is correct regarding food interactions with these drugs?
   a. Capecitabine with food, lapatinib without food
   b. Capecitabine without food, lapatinib with food
   c. Both with food
   d. Both without food

7. A lung cancer patient picks up her refill for erlotinib and a new prescription for varenicline. Which of the following statements is true regarding drug-drug interactions?
   a. No drug-drug interaction exists.
   b. Immediately increase erlotinib dose once smoking cessation commences.
   c. Immediately reduce erlotinib dose once smoking cessation commences.
   d. Reduce erlotinib dose now.

8. You are preparing a capecitabine prescription for dispensing. Which of the following handling instructions is correct?
   a. Wash hands and use a separate counting tray.
   b. Wash hands, don gloves, and use a separate counting tray.
   c. Wash hands, don gloves, and use an automatic counting machine.
   d. Wash hands and use automatic counting machine.

9. Which of the following publications provides a comprehensive list of antineoplastic and other hazardous drugs?
   a. American Society of Health-System Pharmacists (ASHP)
   b. Institute for Safe Medicine Practices (ISMP)
   c. National Institute for Occupational Safety and Health (NIOSH)
   d. Occupational Safety and Health Administration (OSHA)

10. An unused hazardous oral anticancer medication like lenalidomide should be disposed of by:
    a. Placing in the trash.
    b. Flushing down the toilet.
    c. Taking to a drug take-back program.
    d. Following instructions of the patient’s cancer care provider.