1. The Phase II ADAPT trial evaluating neoadjuvant T-DM1 for 12 weeks with or without endocrine therapy for ER-positive, HER2-positive early breast cancer (BC) demonstrated ___________.
   a. A pathologic complete response (pCR) rate of more than 40% for patients who received T-DM1
   b. That adding endocrine therapy to T-DM1 increases the rate of pCR for pre- and postmenopausal patients
   c. Both a and b

2. The Phase III ExteNET trial, which investigated neratinib after adjuvant chemotherapy and trastuzumab for patients with HER2-positive BC, demonstrated higher efficacy among patients with ___________ disease.
   a. Hormone receptor-positive
   b. Hormone receptor-negative
   c. Neither a nor b; both subsets benefited equally

3. The final results of the randomized Phase II PALOMA-1 trial evaluating letrozole with or without palbociclib as first-line therapy for postmenopausal patients with ER-positive, HER2-negative advanced BC demonstrated a statistically significant improvement in ___________ with the combination.
   a. Overall survival
   b. Progression-free survival
   c. Both a and b

4. Compared to patients receiving abemacliclib, those receiving the CDK4/6 inhibitor palbociclib experience higher rates of ___________ as a treatment-related adverse event.
   a. Diarrhea
   b. Nausea
   c. Neutropenia

5. The results of the Phase III GeparSepto (GBG 69) trial evaluating neoadjuvant chemotherapy with weekly nanoparticle albumin-bound (nab) paclitaxel versus solvent-based paclitaxel, followed by anthracycline and cyclophosphamide, for patients with early BC yielded a statistically significant improvement in ___________ with nab paclitaxel.
   a. Rate of neuropathy
   b. pCR
   c. Both a and b

6. The Phase II MDV3100-11 study demonstrated a clinical benefit with ___________ for advanced androgen receptor-positive, triple-negative BC.
   a. Abiraterone
   b. Enzalutamide
   c. Tamoxifen

7. A retrospective analysis by Krop and colleagues assessing outcomes for patients on the EMILIA study who had asymptomatic brain metastases demonstrated a statistically significant improvement in overall survival with ___________ compared to capecitabine/lapatinib.
   a. T-DM1
   b. Neratinib
   c. ONT-380

8. Recent data from Sestak and colleagues indicated that the PAM50-based ROR (risk of recurrence) score added clinically meaningful prognostic information to the CTS (clinical treatment score) for all patients and all subgroups in predicting late recurrence after year 5 for patients with ER-positive BC.
   a. True
   b. False
9. Data from the TAILORx trial evaluating a 21-gene expression assay demonstrated a 5-year rate higher than 90% for __________ among patients with hormone receptor-positive, HER2-negative, axillary node-negative BC and a Recurrence Score of 0 to 10 who received endocrine therapy alone.
   a. Invasive disease-free survival
   b. Freedom from distant BC recurrence
   c. Freedom from BC recurrence at any site
   d. Overall survival
   e. All of the above

10. The TBCRC 022 study will evaluate __________ for patients with HER2-positive BC and brain metastases.
   a. Neratinib
   b. T-DM1
   c. ONT-380