

EVALUATION FORM
Tyrosine Kinase Inhibitors and Stem Cell Transplantation
Shaping the Treatment Landscape Of CML
Program ID: 07142

The Medical College of Wisconsin respects and appreciates your opinions. To assist us in evaluating the effectiveness of this activity and to make recommendations for future educational offerings, please take a few minutes to complete this evaluation form. *You must complete this evaluation form to receive a CME credit certificate.*

Please answer the following questions by circling the appropriate rating:

5 = Outstanding 4 = Good 3 = Satisfactory 2 = Fair 1 = Poor

Extent to Which Program Activities Met the Identified Objectives

Upon completion of this activity, participants should be better able to:

Upon completion of this activity, the participant will be able to:

- | | | | | | |
|--|---|---|---|---|---|
| ◆ Identify prognostic features of patients with CML who may be optimal candidates for SCT | 5 | 4 | 3 | 2 | 1 |
| ◆ Compare and contrast long-term survival outcomes associated with SCT- versus TKI-based therapy for management of patients with CML | 5 | 4 | 3 | 2 | 1 |
| ◆ Discuss the roles that both SCT and newer, more potent TKIs play in the context of contemporary challenges for managing patients with CML, such as imatinib resistance | 5 | 4 | 3 | 2 | 1 |

Overall Effectiveness of the Activity

- | | | | | | |
|--|---|---|---|---|---|
| Was timely and will influence how I practice | 5 | 4 | 3 | 2 | 1 |
| Will assist me in improving patient care | 5 | 4 | 3 | 2 | 1 |
| Fulfilled my educational needs | 5 | 4 | 3 | 2 | 1 |
| Avoided commercial bias or influence | 5 | 4 | 3 | 2 | 1 |

Impact of the Activity

The information presented:
(check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Reinforced my current practice/treatment habits | <input type="checkbox"/> Will improve my practice/patient outcomes |
| <input type="checkbox"/> Provided new ideas or information I expect to use | <input type="checkbox"/> Enhanced my current knowledge base |

Will the information presented cause you to make any changes in your practice?

- Yes No

If yes, please describe any change(s) you plan to make in your practice as a result of this activity:

How committed are you to making these changes?

5 (Very committed) 4 3 2 1 (Not at all committed)

Future Activities

Do you feel future activities on this subject matter are necessary and/or important to your practice?

- Yes No

Please list any other topics that would be of interest to you for future educational activities:

Follow-up

As part of our ongoing continuous quality-improvement effort, we conduct post-activity follow-up surveys to assess the impact of our educational interventions on professional practice. Please indicate your willingness to participate in such a survey:

- Yes, I would be interested in participating in a follow-up survey
- No, I'm not interested in participating in a follow-up survey

Additional comments about this activity:

If you wish to receive acknowledgement of participation for this activity, please complete the post-test by selecting the best answer to each question, complete this evaluation verification of participation and fax to the Office of Continuing Professional Education, 414-456-6623, or mail to Office of Continuing Medical Education, Medical College of Wisconsin, 8701 Watertown Plank Road, Milwaukee, WI, 53226. (Note: Persons who claimed CME credit for attending the original presentations on which this program was based (at the BMT Tandem Meetings in February, 2007) may not claim additional credit for participating in this activity.)

Post-test Answer Form

1	2	3	4	5	6	7	8	9

Request for Credit

Name _____ Degree _____

Organization _____ Specialty _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____ E-Mail _____

I certify my actual time spent to complete this educational activity to be:

- I participated in the entire activity and claim 1.0 credits.
- I participated in only part of the activity and claim _____ credits.

Signature _____ Date _____

POST-TEST QUESTIONS

Tyrosine Kinase Inhibitors and Stem Cell Transplantation – Shaping The Treatment Landscape Of CML

Tyrosine Kinase Inhibitors: Redefining Treatment Algorithms for CML

Jerald Radich, MD

1. What is the 5-year overall survival rate for chronic phase CML patients treated with imatinib?
 - a. 20% to 40%
 - b. 40% to 60%
 - c. 60% to 80%
 - d. > 80%
2. Which of the following is the most sensitive method for detecting *bcr-abl* transcripts?
 - a. Cytogenetic analysis
 - b. Peripheral blood PCR
 - c. Peripheral blood counts
 - d. Peripheral blood FISH
3. Which of the following responses evaluates *bcr-abl* at the mRNA level?
 - a. Hematologic response
 - b. Complete hematologic response
 - c. Molecular response
 - d. Cytogenetic response

Stem Cell Transplantation in Patients With CML: When Should It Be Used?

Sergio A. Giralt, MD

4. In patients with chronic phase CML, which age group has the highest probability of survival post hematopoietic stem cell transplantation (HSCT)?
 - a. <20 years
 - b. ≥20 and <30 years
 - c. ≥30 and <40 years
 - d. ≥50 years
5. In which CML patient population undergoing HSCT does pretreatment with imatinib have the greatest relative effect on overall survival?
 - a. Early chronic phase
 - b. Late chronic phase
 - c. Accelerated phase
 - d. Blastic phase

6. Which of the following reflects the effect of imatinib treatment in CML patients pre-HSCT?
 - a. Increased risk of death
 - b. Increased risk of non-relapse mortality
 - c. Increased risk of chronic graft vs host disease
 - d. None of the above

New Options for Patients With Imatinib Resistance

Neil P. Shah, MD, PhD

7. Clinical resistance to imatinib is mainly associated with which of the following mechanisms?
 - a. Bcr-Abl independent mechanisms
 - b. Bcr-Abl kinase domain mutations
 - c. *bcr-abl* amplification
 - d. None of the above
8. Which of the following mutations is highly resistant to all currently approved Bcr-Abl targeted therapies to date?
 - a. H396P
 - b. L387M
 - c. T315I
 - d. Q252H
9. In patients with chronic phase CML treated with dasatinib, what was the percentage of progression free survival after 16 months follow-up?
 - a. > 80%
 - b. 60% to 80%
 - c. 20% to 40%
 - d. 40% to 60%