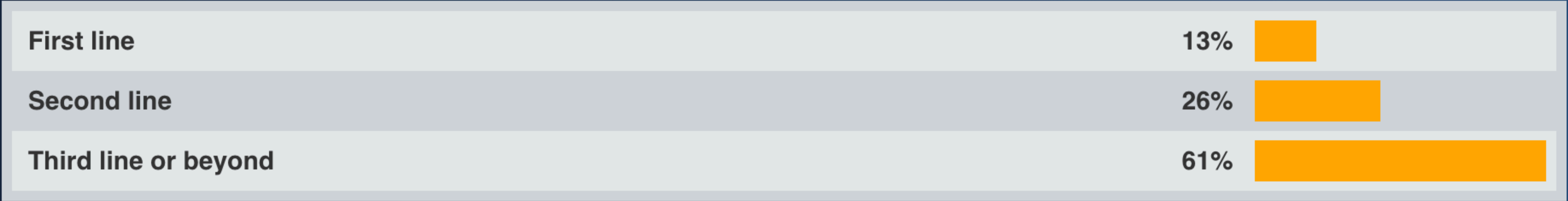


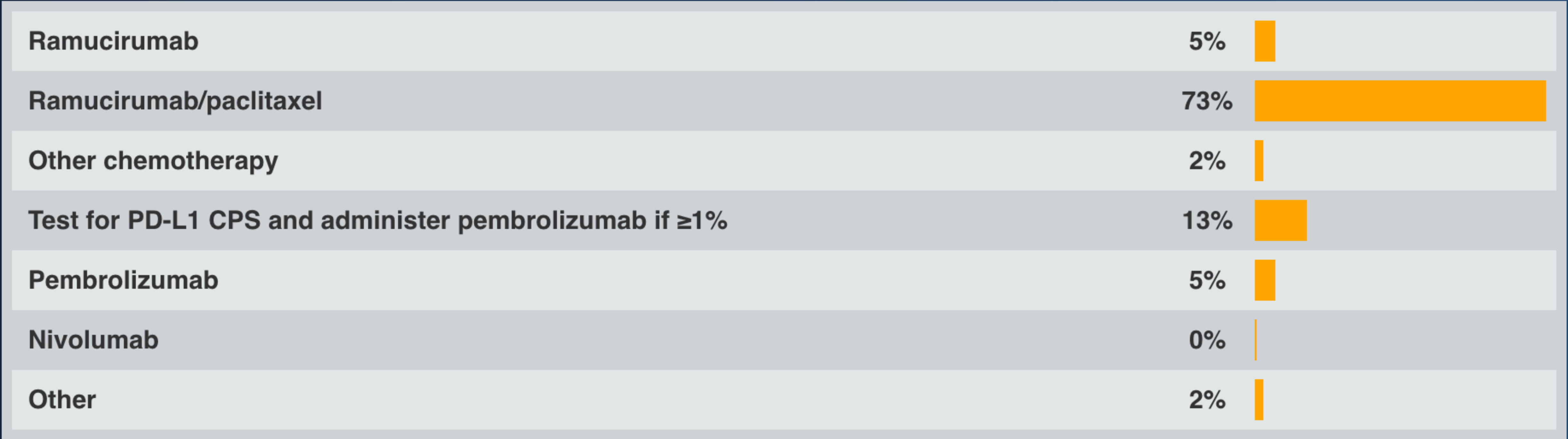
Regulatory and reimbursement issues aside, in what line of therapy would you use an anti-PD-1/anti-PD-L1 antibody in a clinically stable patient with metastatic HER2-negative, microsatellite-stable gastric cancer with a PD-L1 combined positive score (CPS) ≥ 1 ?



Regulatory and reimbursement issues aside, in what line of therapy would you use an anti-PD-1/anti-PD-L1 antibody in a clinically stable patient with metastatic HER2-negative, MSI-high gastric cancer with a PD-L1 CPS ≥ 1 ?



Regulatory and reimbursement issues aside, what would you currently recommend as second-line therapy for a patient with metastatic HER2-negative, microsatellite-stable gastric cancer who has experienced disease progression on first-line FOLFOX?



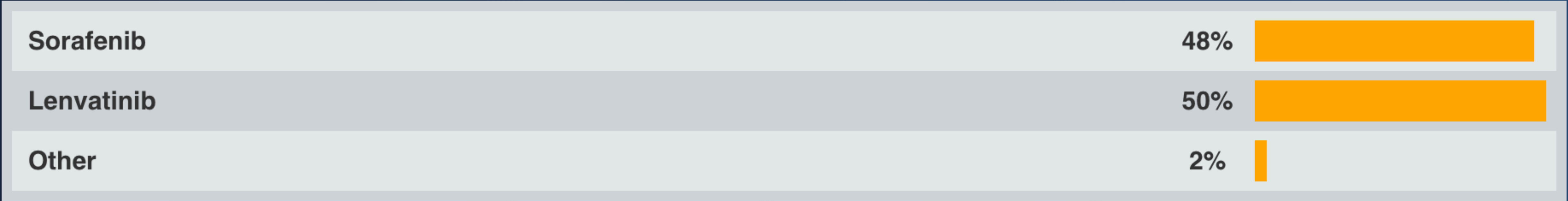
If you could access TAS-102 for your patients with metastatic gastric cancer, how likely would you be to use it?



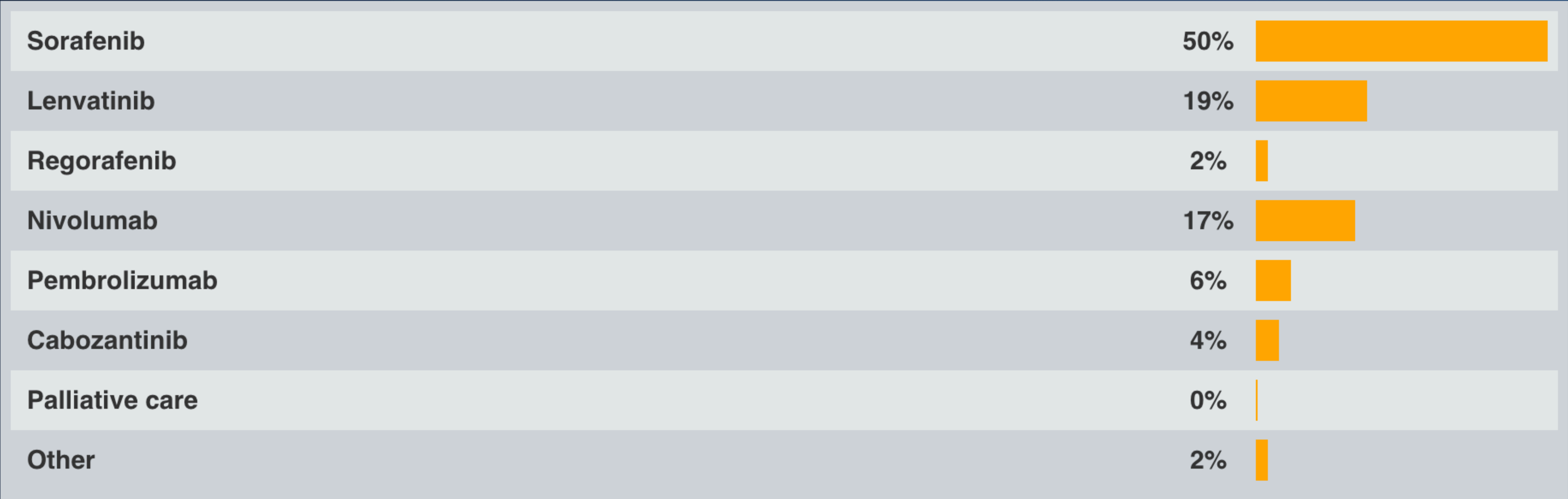
A 60-year-old patient with metastatic HER2-positive, microsatellite-stable gastric cancer responds to FOLFOX/trastuzumab but then experiences disease progression after 8 months. What second-line treatment would you recommend?



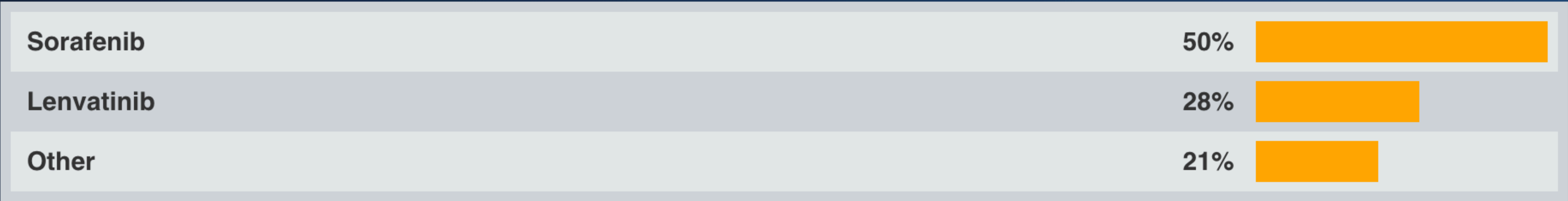
What would be your most likely first-line systemic treatment for a 63-year-old patient with hepatocellular carcinoma (HCC), a Child-Pugh A score and painful bone metastases?



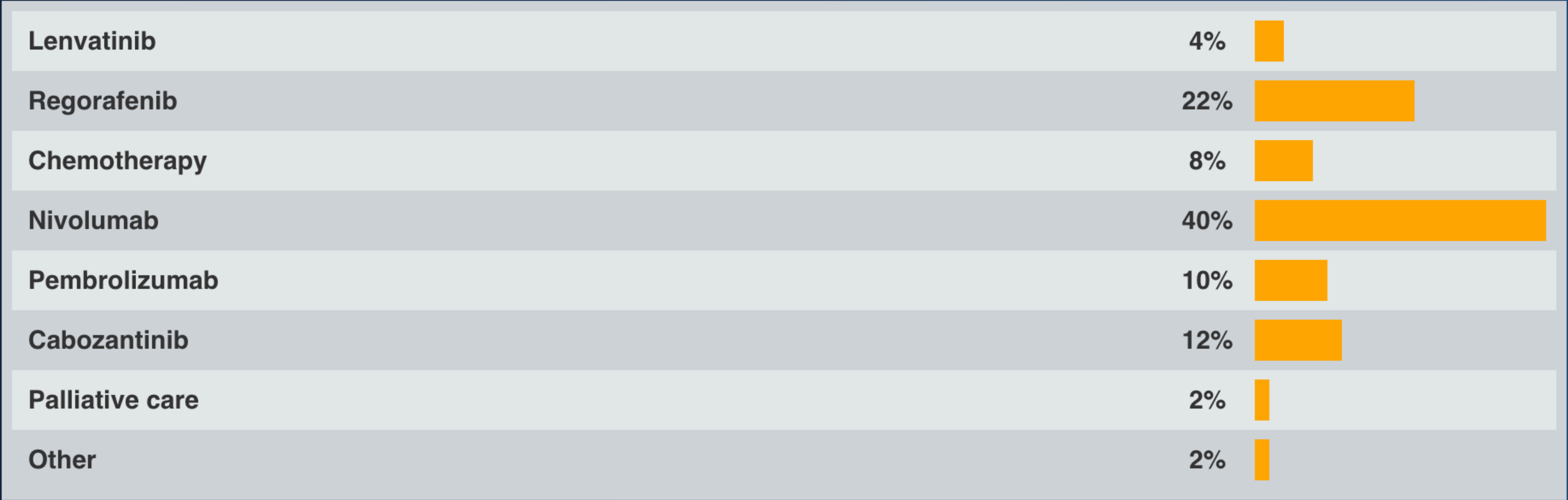
Reimbursement and regulatory issues aside, what would be your most likely first-line systemic treatment for an 80-year-old patient with HCC, a Child-Pugh A score and a PS of 1?



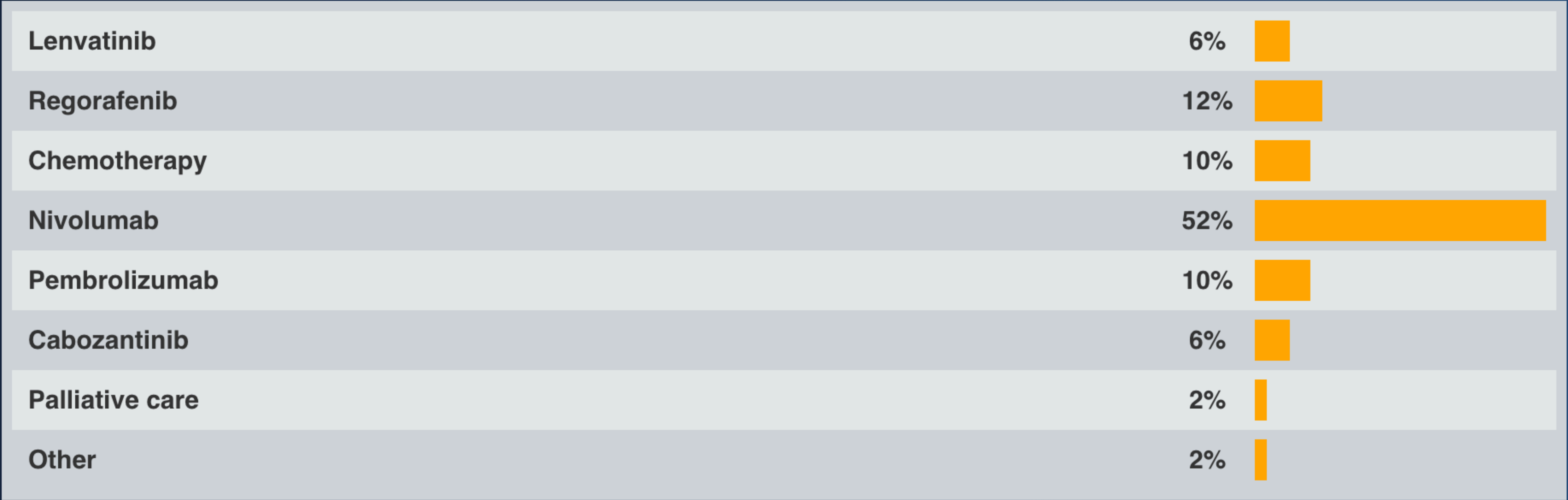
What would be your most likely first-line systemic treatment for a 60-year-old patient with HCC, a Child-Pugh B7 score and a PS of 0?



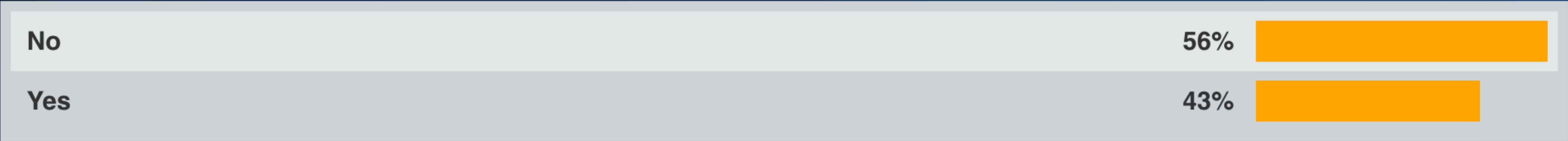
What would be your most likely second-line systemic therapy for a 60-year-old patient with HCC, a Child-Pugh A score and a PS of 0 who responded to standard-dose sorafenib for 12 months with minimal toxicity and then experienced disease progression?



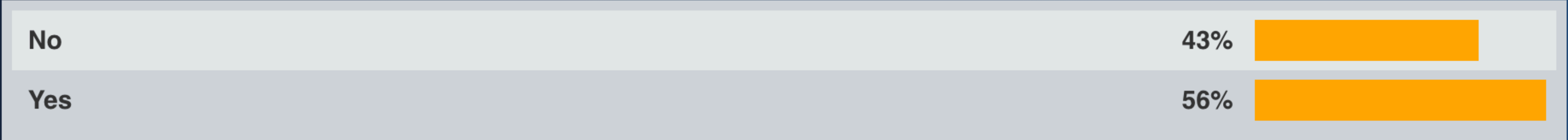
What would be your most likely second-line systemic therapy for a 60-year-old patient with HCC, a Child-Pugh A score and a PS of 0 who responded to sorafenib for 6 months but required a dose reduction to 400 mg daily and then experienced disease progression?



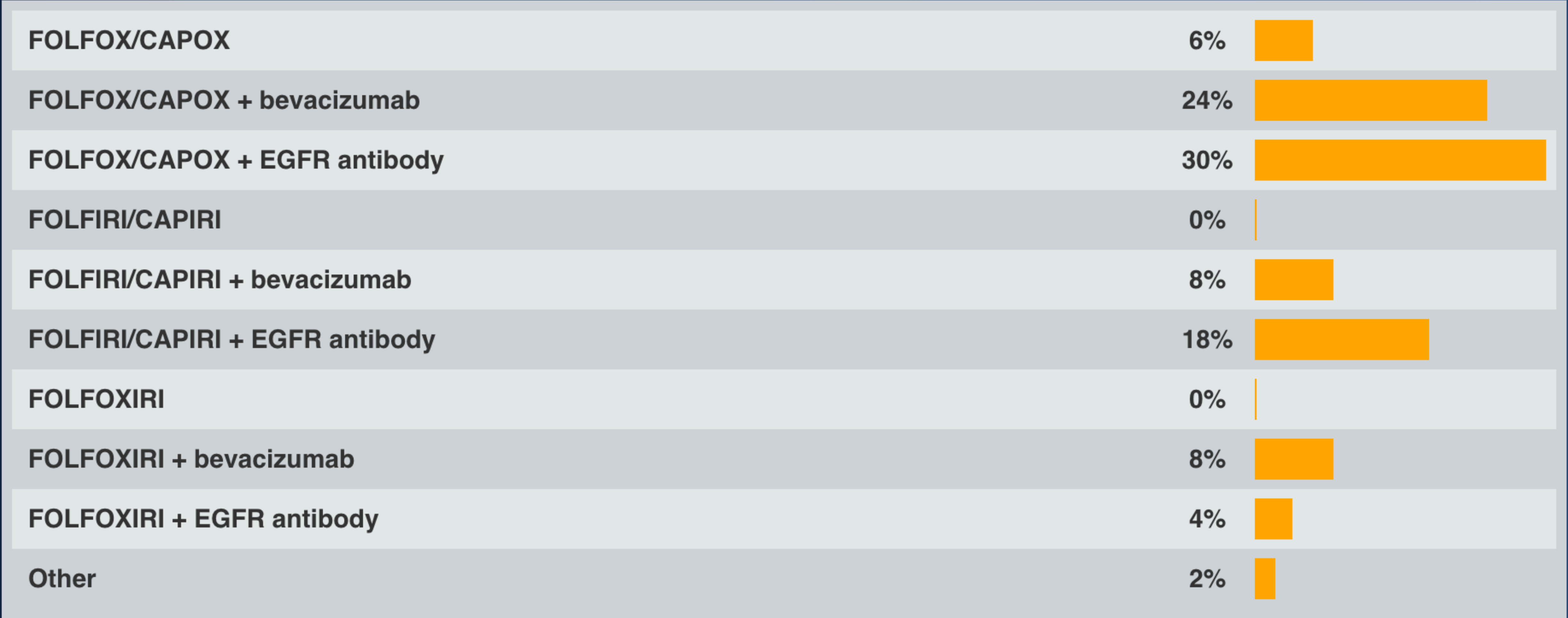
Do you generally test for microsatellite instability in your patients with HCC?



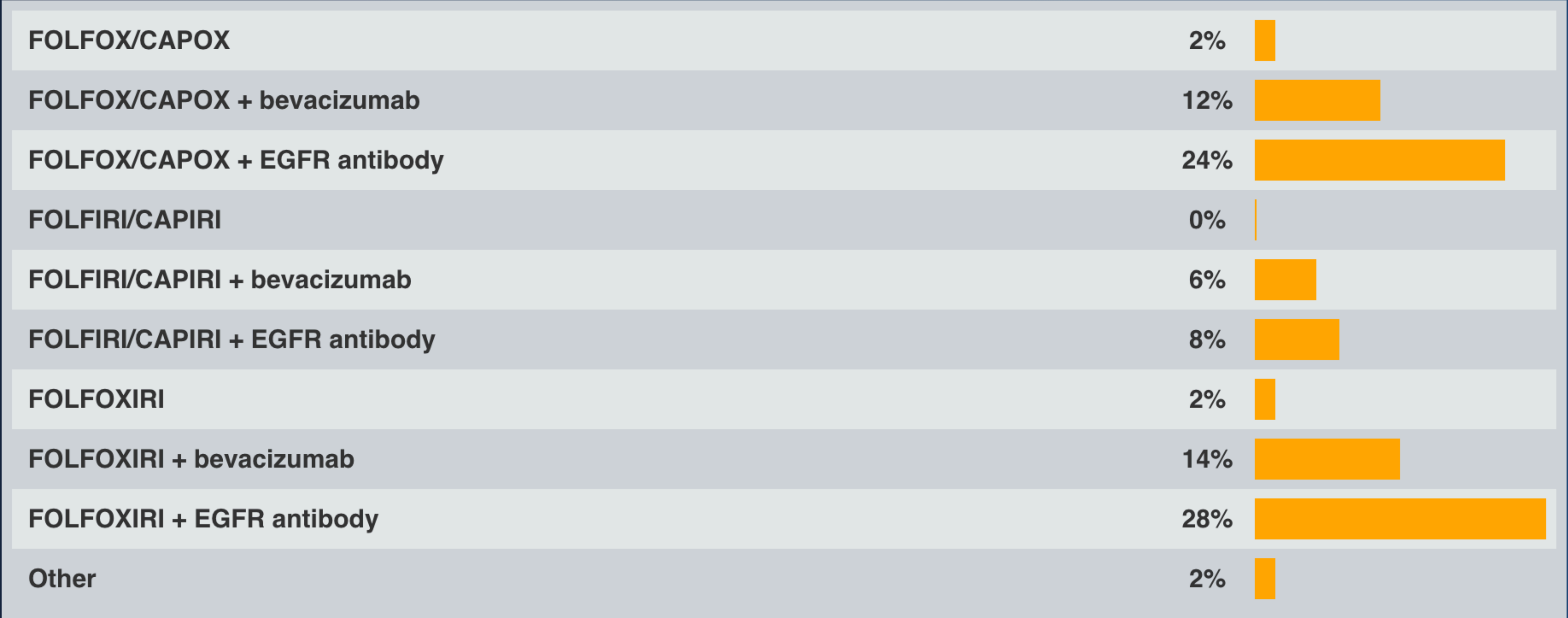
Do you generally offer multiplex genomic testing such as next-generation sequencing to your patients with HCC and a good PS who have exhausted all approved therapeutic options?



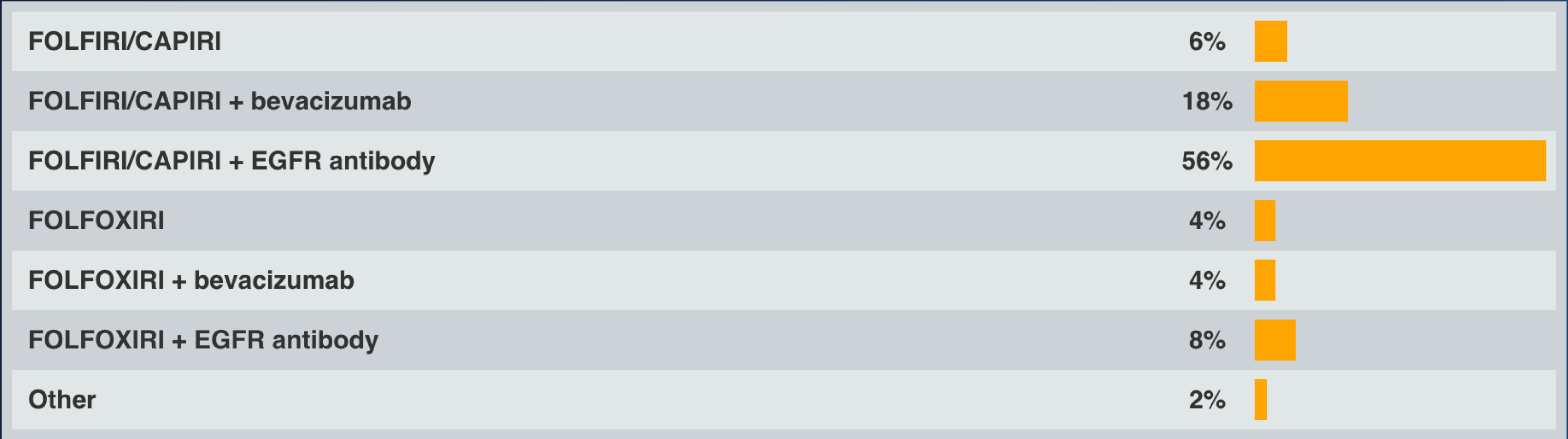
What is your usual first-line treatment recommendation for a 60-year-old patient with left-sided, microsatellite-stable, pan-RAS wild-type metastatic colorectal cancer (mCRC) who is clinically stable?



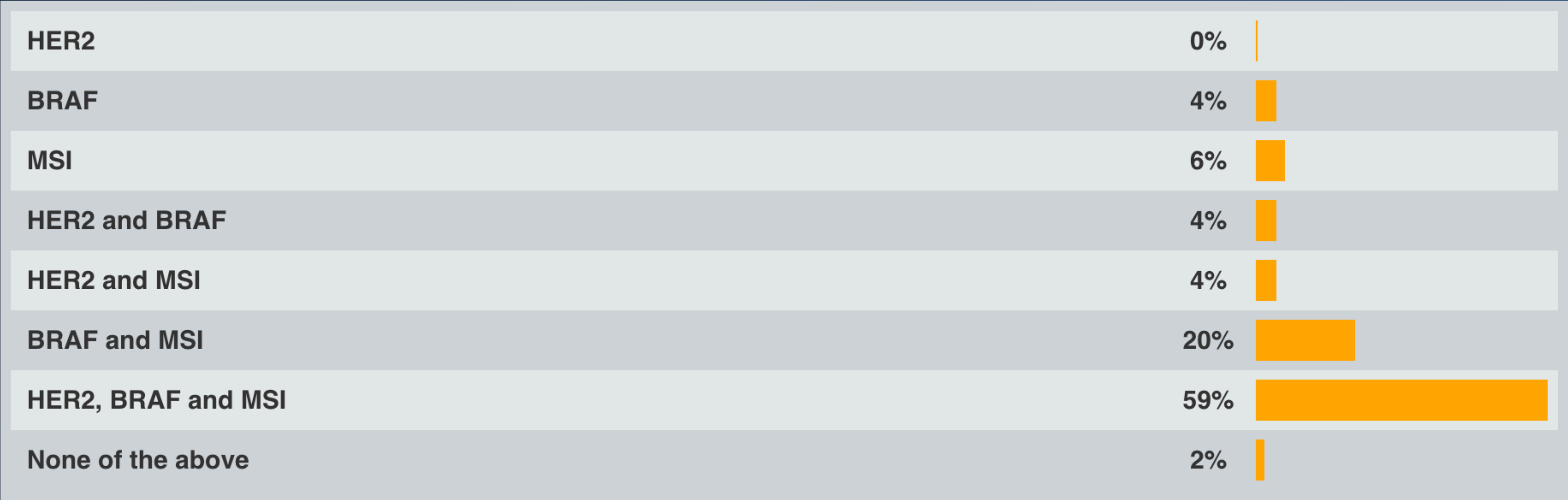
What is your usual first-line treatment recommendation for a 60-year-old patient with left-sided, microsatellite-stable, pan-RAS wild-type mCRC who requires a response?



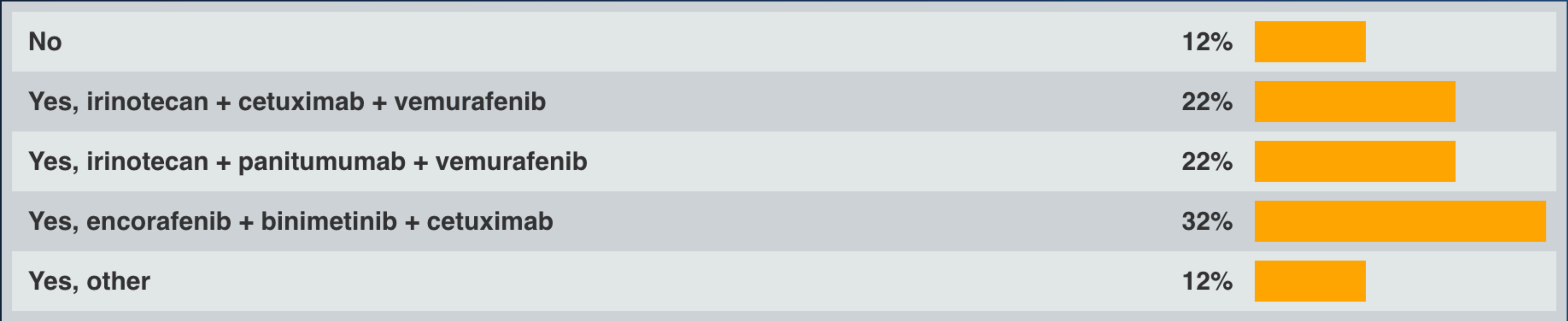
A 60-year-old patient with metastatic left-sided, microsatellite-stable, pan-RAS wild-type mCRC responds to FOLFOX/bevacizumab but then experiences disease progression after 12 months. What second-line treatment would you recommend?



In addition to pan-RAS status, which of the following do you routinely assess in patients with mCRC?



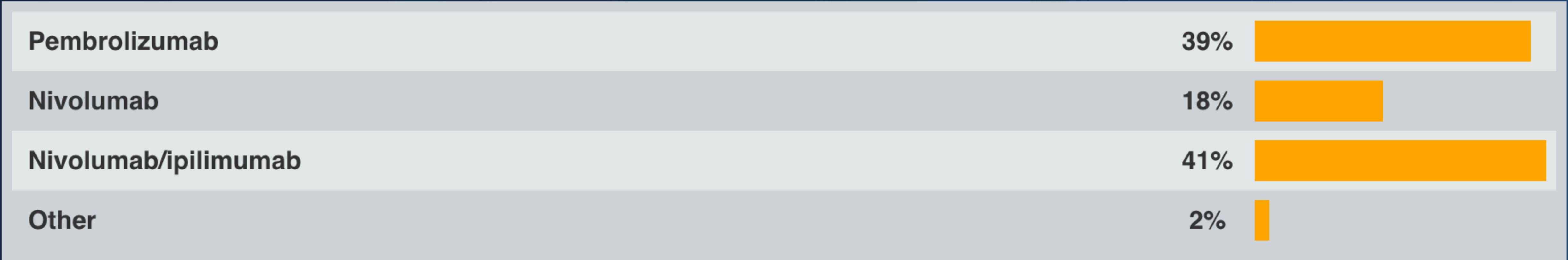
Reimbursement and regulatory issues aside, for a patient with mCRC and a BRAF V600E mutation, would you likely administer targeted therapy outside of a clinical trial setting?



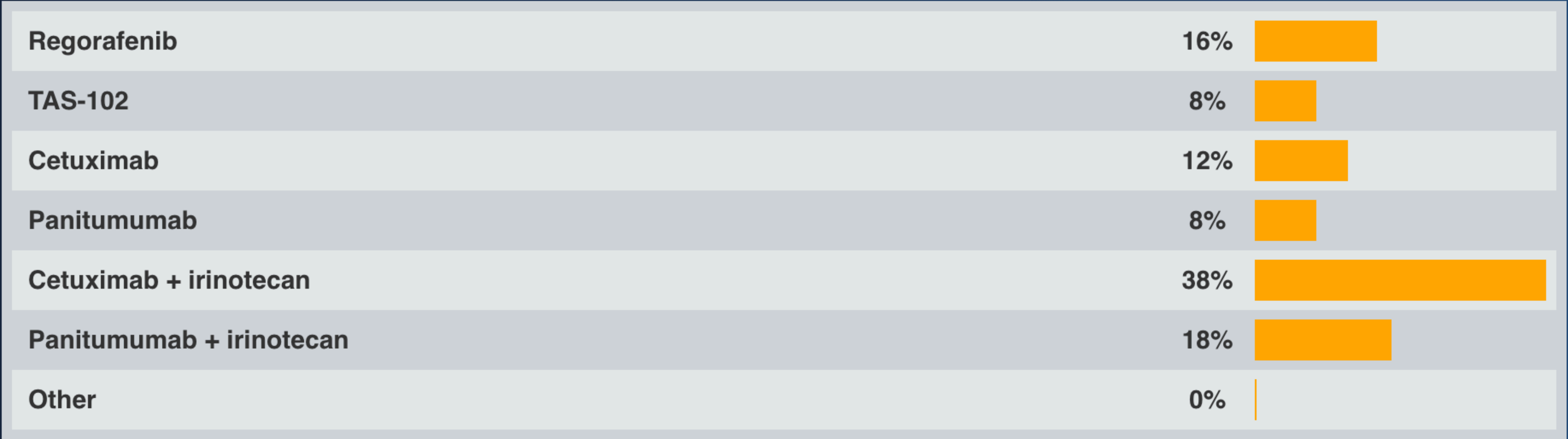
Reimbursement and regulatory issues aside, for a patient with minimally symptomatic MSI-high mCRC with modest tumor burden, in what line of therapy would you like to use an anti-PD-1/PD-L1 antibody?



What would be your usual initial choice of immunotherapy for a younger, otherwise healthy patient with MSI-high mCRC?



A 60-year-old man with pan-RAS wild-type, microsatellite stable, right-sided mCRC receives first-line FOLFOX/bevacizumab and second-line FOLFIRI/bevacizumab and is now experiencing disease progression. What would be your most likely third-line treatment recommendation?



In general, for a younger patient with mCRC, what is your usual starting dose of regorafenib?

