Please select the best answer for each of the following questions. All questions must be answered correctly to become certified:

**Question 1**
All clozapine products are only available under the single shared Clozapine REMS Program.
A. True
B. False

**Question 2**
Clozapine is associated with severe neutropenia, which can lead to serious infection and death.
A. True
B. False

**Question 3**
Severe neutropenia is defined as:
A. A white blood cell count (WBC) less than 2000/μL
B. An absolute neutrophil count (ANC) less than 1000/μL
C. An absolute neutrophil count (ANC) less than 500/μL
D. None of the above

**Question 4**
Before initiating treatment with clozapine:
A. A baseline absolute neutrophil count (ANC) must be at least 1000/μL for a patient with documented benign ethnic neutropenia (BEN)
B. A baseline absolute neutrophil count (ANC) must be at least 1500/μL for a patient who is part of the general population (i.e., the patient does not have documented BEN)
C. A baseline absolute neutrophil count (ANC) is not necessary
D. Both A and B

Please fax this Clozapine REMS Knowledge Assessment for Healthcare Providers to the Clozapine REMS Program at 844-404-8876. Print your full name and NPI below to ensure it is associated with your program record.

Name: ___________________________ NPI: __________________________ Fax: __________________________
Question 5
Before clozapine is dispensed to a patient, a certified prescriber must:
A. Determine if the patient has documented BEN
B. Enroll the patient in the Clozapine REMS Program
C. Counsel the patient/caregiver about the risk of severe neutropenia
D. Order blood work to obtain an ANC
E. Review the ANC and submit it to the Clozapine REMS Program
F. All of the above

Question 6
In the outpatient setting, prescribers must submit the ANC to the single shared Clozapine REMS Program before the patient can be dispensed clozapine.
A. True
B. False

Question 7
Before clozapine can be dispensed, a pharmacist in an outpatient pharmacy must:
A. Verify the patient is enrolled in the single shared Clozapine REMS Program
B. Verify the prescriber is certified in the single shared Clozapine REMS Program
C. Verify the ANC is acceptable or verify the prescriber has authorized continuing treatment if the ANC is abnormal
D. Obtain a “Predisperse Authorization” each time from the Clozapine REMS Program
E. All of the above

Question 8
How much clozapine can be dispensed?
A. A 30-day supply
B. A 90-day supply
C. As much as the patient wants or the insurance will pay for
D. It depends when the patient’s next blood draw is according to the monitoring requirements. Dispense enough medication to treat the patient with clozapine until the next blood draw/ANC or as directed by the prescriber

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Question 9

Regarding patients with documented BEN, which of the following statements are true?

A. Patients with BEN have a different clozapine treatment algorithm and monitoring requirements
B. Patients with BEN are healthy and do not suffer from repeated severe infections
C. Patients with BEN are NOT at increased risk for developing clozapine-induced neutropenia
D. Before starting clozapine, additional evaluation may be needed to determine if baseline neutropenia is due to BEN. Hematology consultation may be necessary
E. All of the above statements are true

Question 10

If a new patient’s baseline ANC is within the normal range, how should the ANC monitoring schedule proceed?

A. Weekly from initiation to discontinuation of therapy
B. Weekly from initiation to 6 months; every 2 weeks from 6 to 12 months; monthly after 12 months
C. Monthly from initiation to discontinuation of therapy
D. No additional ANC monitoring is required if the patient’s baseline ANC is within the normal range

Question 11

If a patient’s ANC indicates mild neutropenia, which of the following statements is true?

A. ANC monitoring should be conducted three times weekly until ANC ≥1500/μL if the patient is part of the general population (i.e., if the patient does not have documented BEN)
B. Mild neutropenia is within the normal range for a patient with documented BEN
C. If the patient has documented BEN, ANC monitoring should be conducted: weekly from initiation to 6 months; every 2 weeks from 6 to 12 months; monthly after 12 months
D. All of the above
Question 12

If a patient's ANC indicates moderate neutropenia, which of the following statements is true?

A. Treatment should be continued regardless of whether the patient is part of the general population or has documented BEN
B. If the patient is part of the general population (i.e., if the patient does not have documented BEN), interrupt therapy and conduct ANC monitoring: daily until ANC ≥ 1000/μL; three times weekly until ANC ≥ 1500/μL; weekly for 4 weeks; then return to the patient's last "Normal Range" ANC monitoring interval
C. The ANC monitoring schedule is the same regardless of whether the patient is part of the general population or has BEN
D. None of the above

Question 13

If a patient's ANC indicates severe neutropenia, which of the following statements is true?

A. Treatment should be interrupted regardless of whether the patient is part of the general population or has BEN and a hematology consultation should be considered; resume treatment only if the prescriber determines that the benefits of clozapine therapy outweigh the risks
B. If the patient is part of the general population (i.e., if the patient does not have documented BEN), interrupt treatment and conduct ANC monitoring: daily until ANC ≥ 1000/μL; three times weekly until ANC ≥ 1500/μL
C. The patient may still be rechallenged with clozapine at the discretion of the prescriber
D. All of the above