Answers and Explanations

1. **Answer: c)**

   Explanation: The guidance is designed to advance equity, inclusion, and representation in cancer care by critically examining and improving language.

2. **Answer: b)**

   Explanation: "Patient with cancer" puts the person before the diagnosis, which is the principle of person-first language.

3. **Answer: b)**

   Explanation: Terms like "failure" or "failed" can make patients feel they are personally responsible for the disease progression.

4. **Answer: b)**

   Explanation: The NCCN recommends "non-adherence" because it removes blame and acknowledges potential barriers to treatment.

5. **Answer: b)**

   Explanation: Identity-first language puts the medical condition before the person, such as "cancer survivor" or "deaf person," which some individuals or communities prefer.

6. **Answer: a)**

   Explanation: "Participants" is a more humanizing term compared to "cases" or "subjects," particularly in clinical trial contexts.

7. **Answer: c)**

   Explanation: Many individuals who have completed treatment identify themselves as "cancer survivors," and NCCN respects this preference.

8. **Answer: b)**

   Explanation: "Disease progression" is a neutral, non-blaming term recommended instead of "treatment failure."

9. **Answer: b)**

   Explanation: NCCN acknowledges that treatment barriers can arise from both healthcare system/provider issues and individual circumstances.

10. **Answer: a)**

    Explanation: NCCN recommends "treatment of progressive disease or recurrence" to avoid stigmatizing language like "salvage treatment."

11. **Model Answers:**

    Person-first language avoids defining individuals by their illness and helps maintain their dignity.

    It emphasizes that the person is more important than the disease, reducing the risk of dehumanizing patients.

12. **Model Answers:**

    Barriers include systemic issues like ineffective communication, financial challenges, and transportation problems.

    They can result from both healthcare system/provider factors and individual barriers such as time constraints or lack of support.

13. **Model Answers:**

    Using words like "failure" can make patients feel personally responsible or inadequate for their disease progression.

    Such terms can create unnecessary blame and stigma, negatively affecting patient morale and trust.