

ALASKA MPJE PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Is it legal for pharmacies in Alaska to advertise prescription drugs?**
 - A. No, advertising prescription drugs is prohibited
 - B. Yes, but only if the advertisement adheres to state and federal advertising regulations
 - C. Yes, with no restrictions
 - D. Only government pharmacies may advertise
- 2. What type of drug products can be substituted by a pharmacist?**
 - A. Only over-the-counter products
 - B. Equivalent drug products or interchangeable biological products
 - C. Brand name products only
 - D. Prescription drugs only
- 3. What is the definition of a proprietary name?**
 - A. A scientific term for the substance
 - B. A common name used in pharmacy
 - C. A trademark and registered name
 - D. A government-assigned identifier
- 4. What is the role of a pharmacist regarding generic medication substitution?**
 - A. Pharmacists cannot make substitutions
 - B. Pharmacists can substitute generics only with prescriber approval
 - C. Pharmacists can substitute generics at their discretion
 - D. Pharmacists must always inform patients of substitutions
- 5. What document is essential for pharmacists to practice in Alaska?**
 - A. A pharmacy technician certification
 - B. A valid pharmacist license issued by the Alaska Board of Pharmacy
 - C. A drug enforcement agency registration
 - D. A state medical license

- 6. Which of the following is NOT recommended when managing drug inventory discrepancies?**
- A. Prompt investigation of discrepancies
 - B. Thorough documentation of findings
 - C. Immediate adjustment of inventory without analysis
 - D. Regular staff training on inventory management
- 7. Under what condition is a pharmacy not required to communicate the biologic product information to the prescriber?**
- A. If the product is not interchangeable
 - B. If the same product is dispensed upon refill
 - C. If the pharmacy is unable to reach the prescriber
 - D. If the patient requests no communication
- 8. What is commonly included in the documentation for investigations related to drug inventory discrepancies?**
- A. Merely the final count of drugs
 - B. Specific actions taken and their results
 - C. General feelings about inventory management
 - D. Future predictions about stock sales
- 9. What type of drugs are classified as Schedule II in Alaska?**
- A. Drugs with low potential for abuse
 - B. Non-prescription medications
 - C. Drugs like opioids and stimulants
 - D. Vitamins and supplements
- 10. What underlying principle guides the classification of substances into schedules I-V in Alaska?**
- A. Cost of the medication
 - B. Marketing strategies
 - C. Potential for abuse and medical utility
 - D. Manufacturer reputation

Answers

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1. B
2. B
3. C
4. B
5. B
6. C
7. B
8. B
9. C
10. C

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Explanations

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1. Is it legal for pharmacies in Alaska to advertise prescription drugs?

- A. No, advertising prescription drugs is prohibited
- B. Yes, but only if the advertisement adheres to state and federal advertising regulations**
- C. Yes, with no restrictions
- D. Only government pharmacies may advertise

In Alaska, pharmacies are allowed to advertise prescription drugs as long as they comply with both state and federal advertising regulations. This means that any promotional material must meet the guidelines set forth by the Food and Drug Administration (FDA) and the Federal Trade Commission (FTC), as well as adhere to Alaska's specific pharmacy laws. These regulations typically require that advertisements for prescription medications provide balanced information about the drug, including potential risks and side effects, as well as clearly stating that the medications are available by prescription only. This ensures that consumers receive adequate and accurate information about the medications being advertised, promoting safe and informed choices. While some options suggest bans or restrictions for certain types of pharmacies or forms of advertising, the reality is that lawful advertising is permitted provided it meets the established guidelines. This approach helps to ensure that pharmacy advertising remains ethical and informative for patients.

2. What type of drug products can be substituted by a pharmacist?

- A. Only over-the-counter products
- B. Equivalent drug products or interchangeable biological products**
- C. Brand name products only
- D. Prescription drugs only

Pharmacists are permitted to substitute drug products that are classified as equivalent drug products or interchangeable biological products. This allows pharmacists to provide patients with options that have the same therapeutic effect and are chemically similar to the prescribed medication. The concept of substituting medications hinges on the idea of bioequivalence; products must meet specific criteria established by regulatory bodies to ensure that they can be swapped without significantly affecting the patient's treatment outcome. When it comes to interchangeable biological products, these are proven to be safe and effective for the intended use in the same way as the original biologic product. Substituting only over-the-counter products or limiting substitutions to brand name products would not align with the comprehensive scope of a pharmacist's role, which includes managing prescription drug therapies and promoting cost-effective care. Allowing substitutions for prescription drugs without strict criteria would also pose risks for the patient, emphasizing the importance of requiring equivalency for successful medication management. Therefore, the inclusion of both equivalent drug products and interchangeable biological products provides a broader and more practical approach to medication therapy.

3. What is the definition of a proprietary name?

- A. A scientific term for the substance
- B. A common name used in pharmacy
- C. A trademark and registered name**
- D. A government-assigned identifier

A proprietary name refers to a trademarked name that is given to a pharmaceutical product by its manufacturer. This name is often known as the brand name and is distinct from the generic name, which is the common name used to identify the drug's active ingredient. Proprietary names serve several purposes: they establish brand identity, help in marketing the product, and provide legal protection against unauthorized use by other companies. The proprietary name is usually highlighted on packaging and promotional materials to ensure that consumers and healthcare providers can easily recognize the product among others in the marketplace. This recognition helps in building brand loyalty and trust with consumers, as well as ensuring consistency in the drug's presentation and formulation. Other options do not capture the essence of what a proprietary name signifies in the pharmaceutical context. For instance, scientific terms describe components or classifications of substances rather than branding. Common names refer to generic designations that are not trademarked. Government-assigned identifiers pertain to systems for classifying and regulating drugs rather than the branding aspect that proprietary names provide.

4. What is the role of a pharmacist regarding generic medication substitution?

- A. Pharmacists cannot make substitutions
- B. Pharmacists can substitute generics only with prescriber approval**
- C. Pharmacists can substitute generics at their discretion
- D. Pharmacists must always inform patients of substitutions

The role of a pharmacist in regards to generic medication substitution varies by state law and specific circumstances. When the correct answer indicates that pharmacists can substitute generics only with prescriber approval, it reflects the necessity for a collaborative approach in medication management. This means that while pharmacists are empowered to make generic substitutions, they are required to ensure that the prescriber agrees with the change, to maintain continuity of care and patient safety. This requirement for prescriber approval helps to uphold the therapeutic integrity of the treatment, as some medications may have unique formulations or implications that the prescriber is aware of but may not be immediately obvious to the pharmacist. In many states, pharmacists can legally substitute a generic for a brand medication without notifying the prescriber as long as it's within the guidelines established by state laws and the patient is informed and agrees with the substitution. However, in situations where prescriber approval is mandated, this safety check reinforces a healthcare relationship built on communication and trust. Hence, the emphasis on the prescriber's role in generic substitutions serves to protect patient health by ensuring that all changes in medication regimens are carefully considered and discussed.

5. What document is essential for pharmacists to practice in Alaska?

- A. A pharmacy technician certification
- B. A valid pharmacist license issued by the Alaska Board of Pharmacy**
- C. A drug enforcement agency registration
- D. A state medical license

To practice as a pharmacist in Alaska, possessing a valid pharmacist license issued by the Alaska Board of Pharmacy is critical. This license serves as official documentation that the individual has met all educational and competency requirements established by the board. It ensures that the pharmacist is adequately trained to handle medications, counsel patients, and perform various pharmacy-related activities according to state laws and regulations. While a pharmacy technician certification might be relevant for those in support roles within the pharmacy, it does not confer the authority to practice as a pharmacist. Similarly, a Drug Enforcement Agency (DEA) registration is necessary for pharmacists involved in dispensing controlled substances, but it does not replace the fundamental requirement of having a pharmacist's license. A state medical license pertains to medical doctors and is not applicable to pharmacists. Thus, the pharmacist license is the cornerstone document that validates an individual's ability to practice pharmacy in Alaska.

6. Which of the following is NOT recommended when managing drug inventory discrepancies?

- A. Prompt investigation of discrepancies
- B. Thorough documentation of findings
- C. Immediate adjustment of inventory without analysis**
- D. Regular staff training on inventory management

The statement that immediate adjustment of inventory without analysis is not recommended highlights a critical aspect of effective inventory management in a pharmacy setting. When a discrepancy occurs, it is crucial to conduct a thorough investigation to understand the root cause of the issue. This involves analyzing the situation and gathering data to determine whether the discrepancy is due to an error, theft, miscount, or some other factor. Adjusting inventory without proper analysis can lead to further complications, such as recurring discrepancies or even potential regulatory issues. It could mask underlying problems and prevent the identification of systemic issues in inventory management practices. Thorough documentation of the findings from any investigation is essential, as it provides a record for future reference and helps in compliance with regulatory standards. Additionally, regular staff training on inventory management ensures that team members are equipped with the skills and knowledge necessary to accurately manage and track inventory, thereby reducing the likelihood of discrepancies. Promptly addressing discrepancies and implementing corrective actions are vital components of maintaining integrity in inventory systems. Thus, it's clear that effective inventory management relies on a careful and systematic approach rather than making hasty adjustments without understanding the full context of the discrepancy.

7. Under what condition is a pharmacy not required to communicate the biologic product information to the prescriber?

- A. If the product is not interchangeable
- B. If the same product is dispensed upon refill**
- C. If the pharmacy is unable to reach the prescriber
- D. If the patient requests no communication

A pharmacy is not required to communicate the biologic product information to the prescriber if the same product is dispensed upon refill. This is important because if a patient is receiving a refill of a medication that is the same as what they have previously been prescribed, there is typically no need for the pharmacy to inform the prescriber again about the specifics of that product. This minimizes unnecessary communication and administrative burdens when continuity of care is maintained with the same product. In situations where the pharmacy dispenses a different product—particularly in the case of interchangeable biologics—it is vital to communicate with the prescriber to ensure that the treatment plan remains aligned with the prescriber's intentions. Therefore, if the patient maintains consistency with their original biologic product, it supports seamless patient care without requiring additional updates to the prescriber.

8. What is commonly included in the documentation for investigations related to drug inventory discrepancies?

- A. Merely the final count of drugs
- B. Specific actions taken and their results**
- C. General feelings about inventory management
- D. Future predictions about stock sales

In investigations related to drug inventory discrepancies, it is essential to document specific actions taken and their results. This thorough documentation helps to create a clear record of how the discrepancy was handled, including what steps were undertaken to investigate the cause of the problem and what conclusions were drawn. Effective documentation can include details such as how the physical count of the drugs was verified, what checks were performed, and any corrective actions that were initiated as a response to the findings. This process not only serves to ensure compliance with regulatory requirements but also helps in establishing a standard operating procedure to prevent future discrepancies. Merely noting the final count of drugs, expressing personal feelings about inventory management, or predicting future stock sales lacks the rigor and accountability needed in such sensitive cases. These alternative approaches do not provide actionable insights or a framework for resolving and understanding discrepancies, which is vital in managing pharmaceutical inventories responsibly.

9. What type of drugs are classified as Schedule II in Alaska?

- A. Drugs with low potential for abuse
- B. Non-prescription medications
- C. Drugs like opioids and stimulants**
- D. Vitamins and supplements

Schedule II drugs in Alaska, as well as in federal law, include substances that have a high potential for abuse, which can lead to severe psychological or physical dependence. This classification primarily encompasses opioids, such as morphine and oxycodone, as well as stimulants like amphetamine and methamphetamine. The regulation of these drugs is stringent due to their potential for abuse and the significant risks they pose. In contrast, drugs with low potential for abuse, non-prescription medications, and vitamins or supplements do not align with the characteristics that define Schedule II substances. These alternatives either have a recognized lower abuse potential or are not controlled substances, thus placing them in different schedules or categories entirely. Hence, the classification of Schedule II drugs specifically pertains to substances that are critical in the context of addiction and potential misuse, making opioids and stimulants key examples in this category.

10. What underlying principle guides the classification of substances into schedules I-V in Alaska?

- A. Cost of the medication
- B. Marketing strategies
- C. Potential for abuse and medical utility**
- D. Manufacturer reputation

The classification of substances into schedules I-V in Alaska, as well as in many other jurisdictions, is primarily guided by the substance's potential for abuse and its accepted medical use. Schedule I substances are considered to have a high potential for abuse and no accepted medical use, making them more tightly controlled. As one moves down the schedules to V, substances are recognized as having lower potential for abuse and often possess accepted medical uses. This scheduling system reflects an understanding of public health and safety concerns, balancing the need for medical treatment options with the risks associated with drug use and addiction. It provides a framework for regulating prescription medications, ensuring that those with higher risks are closely monitored while allowing access to those deemed safer for medical use. Factors such as cost, marketing strategies, or manufacturer reputation do not play a role in this classification process. The focus is solely on scientific evidence regarding abuse potential and therapeutic value, making the correct choice about the principle guiding this classification clear.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://alaskampje.examzify.com>

We wish you the very best on your exam journey. You've got this!

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