Arizona MPJE (Pharmacy Jurisprudence) Practice Exam (Sample)

Study Guide

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Questions

1. What is the term used when any wording required to be on the labeling is missing?

A. Adulterated

B. Branded

C. Misbranded

D. Recalled

2. Which department is referred to as "Department" in the context of Arizona pharmacy regulations?

A. Department of Health and Human Services

B. Department of Public Safety

C. Department of Environmental Quality

D. Department of Education

3. What is the concentration of Opium in a Schedule V (CV) controlled substance in mg/ml?

A. 0.5mg/ml

B. 1mg/ml

C. 2mg/ml

D. 2.5mg/ml

4. What is the required notification time for discontinuing a pharmacy?

A. 10 days prior

B. 14 days prior

C. 30 days prior

D. 7 days prior

5. Modafinil is classified under which schedule of controlled substances?

A. CII

B. CIII

C. CIV

D. CV

6. When must medication orders be verified in a hospital setting?

A. Before administration

B. Every 8 hours

C. Within 6 hours of administration

D. Within 4 hours of reopening if in an emergency or pharmacy is closed

7. The Orphan Drug Act of 1982 provides tax incentives and what duration of marketing exclusivity for drugs used to treat rare diseases?

A. 3 years

B. 5 years

C. 7 years

D. 10 years

8. Which of the following is required to be present on a prescription order?

A. Cautionary statements, date of birth, name of drug

B. Date issued, name of patient, refills authorized

C. Drug strength, quantity, expiration date

D. Name of manufacturer, lot number, phone number of patient

9. How many tablets are there in a 3-gram transaction of Pseudoephedrine HCl 120mg?

A. 25 tablets

B. 33 tablets

C. 62 tablets

D. 92 tablets

10. What is required for hospitals with 50 or more beds in terms of pharmacist supervision?

A. Continuous supervision of RPh when pharmacy open

B. No supervision required

C. Supervision only during the day

D. Supervision only during medication dispensing

Answers

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

Explanations

1. What is the term used when any wording required to be on the labeling is missing?

A. Adulterated

B. Branded

C. Misbranded

D. Recalled

The correct term used when any wording required to be on the labeling is missing is "misbranded." Misbranding refers specifically to situations where the labeling of a product does not comply with the required standards set forth by regulatory authorities, such as the FDA. This can include missing information or misleading statements that could affect how the consumer understands the product. Adulteration, on the other hand, relates to the composition of a product being unsafe or unfit for use, often involving contamination or improper strength. Branding refers to the product's market identity and packaging, which does not pertain to the compliance of labeling. A recall involves the process of withdrawing a product from the market because of safety issues or non-compliance. Therefore, in the context of missing required wording on labeling, "misbranded" is the appropriate term.

2. Which department is referred to as "Department" in the context of Arizona pharmacy regulations?

A. Department of Health and Human Services

B. Department of Public Safety

C. Department of Environmental Quality

D. Department of Education

In the context of Arizona pharmacy regulations, the Department referred to is the Department of Public Safety. This department is responsible for enforcing and regulating laws related to drug distribution, storage, and prescribing. The other options, such as the Department of Health and Human Services, Department of Environmental Quality, and Department of Education, do not have jurisdiction over pharmacy regulations.

3. What is the concentration of Opium in a Schedule V (CV) controlled substance in mg/ml?

A. 0.5mg/ml

B. 1mg/ml

C. 2mg/ml

D. 2.5mg/ml

The correct concentration of opium in a Schedule V controlled substance is 0.5 mg/ml. Schedule V substances can contain specific concentrations of certain narcotics that qualify them for this classification; for opium specifically, the established limit is 0.5 mg/ml. This regulation is rooted in the Controlled Substances Act, which aims to differentiate between substances based on their potential for abuse and therapeutic benefits. Understanding this limit is crucial for compliance in pharmacy practice, ensuring that medications remain within legal guidelines while still being effective for patient use. Other potential concentrations might not meet the criteria set for a Schedule V classification, indicating a higher potential for abuse or a stronger intrinsic effect.

4. What is the required notification time for discontinuing a pharmacy?

A. 10 days prior

B. 14 days prior

C. 30 days prior

D. 7 days prior

The correct notification time for discontinuing a pharmacy is 14 days prior. This requirement is in place to ensure that patients, employees, and regulatory bodies have adequate time to make necessary arrangements related to the discontinuation of pharmacy services. A 14-day notice allows for proper transition for patients who may need to transfer their prescriptions and for the pharmacy to handle any outstanding business matters before closing. In the context of pharmacy operations, it is essential to maintain compliance with state regulations regarding discontinuation to safeguard public health and ensure a smooth changeover for all stakeholders involved. This timeframe supports a better planning process and maintains the professional standards expected in pharmacy practice.

5. Modafinil is classified under which schedule of controlled substances?

A. CII

B. CIII

C. CIV

D. CV

Modafinil is classified as a Schedule IV controlled substance. This classification is primarily due to its potential for abuse and the presence of valid medical uses. Schedule IV substances are characterized by a lower potential for abuse relative to substances listed in higher schedules, such as Schedule II and III, while still requiring regulation due to the potential for physical or psychological dependence. Modafinil is commonly prescribed for conditions like narcolepsy, sleep apnea, and shift work sleep disorder, demonstrating its therapeutic benefits. However, its stimulant properties and the possibility of misuse or abuse in certain populations necessitate oversight and control under the Controlled Substances Act. This ensures that the medication is used appropriately under the guidance of a healthcare professional, minimizing risks associated with its misuse.

6. When must medication orders be verified in a hospital setting?

A. Before administration

B. Every 8 hours

C. Within 6 hours of administration

D. Within 4 hours of reopening if in an emergency or pharmacy is closed

In a hospital setting, medication orders must be verified before administration to ensure patient safety and effective therapy. This verification process typically involves a pharmacist reviewing the order to confirm its appropriateness based on the patient's condition, relevant lab results, potential drug interactions, allergies, and dosages. The focus on reviewing medication orders before they are given to patients helps to prevent medication errors, including wrong drug, wrong dose, or wrong timing administration. While there are protocols regarding the frequency of medication order reviews and handling of orders during specific circumstances, the critical moment where verification directly impacts patient safety is prior to administration. Thus, the emphasis is placed on making sure the order is correct and appropriate before the medication reaches the patient, which is fundamental to safe medication practices in healthcare settings.

7. The Orphan Drug Act of 1982 provides tax incentives and what duration of marketing exclusivity for drugs used to treat rare diseases?

A. 3 years

B. 5 years

C. 7 years

D. 10 years

The Orphan Drug Act of 1982 is designed to encourage the development of drugs for rare diseases, which often do not attract sufficient commercial interest. This legislation provides various incentives, including tax credits for qualified clinical trials and a significant period of marketing exclusivity. The correct answer, which states that the Orphan Drug Act grants 7 years of marketing exclusivity, reflects the intent of the Act to provide a sufficient incentive for manufacturers to invest in the development of treatments for rare conditions. This exclusivity means that once a drug is approved under this designation, the manufacturer has exclusive rights to market that drug for 7 years, preventing potential competitors from gaining approval for the same indication during that time. In contrast, the other durations listed do not align with the Orphan Drug Act. For instance, 3, 5, or 10 years do not represent the correct length of exclusivity as established by this legislation, which is tailored specifically to support the unique challenge of developing therapies for rare diseases.

8. Which of the following is required to be present on a prescription order?

A. Cautionary statements, date of birth, name of drug

B. Date issued, name of patient, refills authorized

C. Drug strength, quantity, expiration date

D. Name of manufacturer, lot number, phone number of patient

The correct answer provides essential information that is typically required on a prescription order. A prescription must include cautionary statements to inform patients of potential risks or specific instructions related to the medication. Additionally, the name of the drug is crucial for identifying exactly what is being prescribed to the patient, and the patient's date of birth helps confirm their identity and reduce the risk of medication errors, especially in cases where similar names may exist in the system. While the other choices contain some relevant information, they do not encompass the core requirements of a prescription. For instance, while it is important to have the date issued, name of patient, and refills authorized, the required elements can vary based on state regulations. Similarly, details such as drug strength and quantity are important for dispensing the medication but do not cover the broader necessary elements that ensure safety and compliance in prescribing. Other details, such as the name of the manufacturer or lot number, may be relevant for tracking and safety but are not typically considered mandatory components on a standard prescription order.

9. How many tablets are there in a 3-gram transaction of Pseudoephedrine HCl 120mg?

A. 25 tablets

B. 33 tablets

C. 62 tablets

D. 92 tablets

To determine the number of tablets in a 3-gram transaction of Pseudoephedrine HCl at a dosage of 120 mg per tablet, it is essential to first convert grams to milligrams since the dosage is given in milligrams. There are 1,000 milligrams in a gram, so a 3-gram transaction is equal to 3,000 milligrams (3 g x 1,000 mg/g = 3,000 mg). Next, you would divide this total milligrams by the dosage of one tablet, which is 120 mg. Now, perform the division: 3,000 mg ÷ 120 mg/tablet = 25 tablets. It seems there might have been a miscalculation in interpreting the question. To clarify the correct process: After converting grams to milligrams and then dividing by the amount of medication per tablet, the result yields 25 tablets, which is not listed in the provided answer options. Therefore, if 31 tablets is the chosen answer, it may stem from assuming the calculation's interpretation was incorrect or utilizing a different number of total grams. It's essential to carefully review the calculation steps and the scenario presented to ensure accurate results in pharmaceutical

10. What is required for hospitals with 50 or more beds in terms of pharmacist supervision?

A. Continuous supervision of RPh when pharmacy open

B. No supervision required

C. Supervision only during the day

D. Supervision only during medication dispensing

Hospitals with 50 or more beds in Arizona are required to have continuous supervision by a pharmacist when the pharmacy is open. This level of supervision ensures that there is a pharmacist overseeing pharmaceutical care and operations at all times to maintain patient safety and compliance with state regulations. Options B, C, and D are incorrect because Arizona regulations mandate continuous supervision by a pharmacist in hospitals with 50 or more beds; therefore, the correct answer is A.