

# DEA Pharmacist's Manual Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

**This is a sample study guide. To access the full version with hundreds of questions,**

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.**

## 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.**

## 7. Use Other Tools

**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!**

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## **Questions**

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**1. In what circumstance may a CII be partially dispensed apart from running out of stock?**

- A. When there is no refill remaining**
- B. When the patient is terminally ill or in a long-term care facility**
- C. When the prescriber is unavailable**
- D. When the patient requests it**

**2. Are pharmacists permitted to compound controlled substances?**

- A. Only without regulations**
- B. Yes, at their discretion**
- C. Only under specific regulations and guidelines**
- D. No, it is completely prohibited**

**3. What must be done if a pharmacy receives damaged controlled substances upon delivery?**

- A. Accept and log the damages**
- B. Reject the delivery and report to DEA**
- C. Document and inform the supplier**
- D. Dispose of them immediately**

**4. What is considered a "duplicate prescription"?**

- A. A prescription for a drug with a different dosage**
- B. A prescription for the same medication intended to be dispensed multiple times**
- C. A prescription that is lost and needs to be replaced**
- D. A prescription with incorrect patient information**

**5. Why is it important to distinguish between "legitimate" and "illegitimate" sources of controlled substances?**

- A. To maintain adequate supply for pharmacies**
- B. To ensure access to medications for all patients**
- C. To prevent diversion and abuse while ensuring access to necessary medications for patients**
- D. To comply with pharmacy laws**

**6. What form is required for a pharmacy to register with the DEA?**

- A. DEA Form 222**
- B. DEA Form 224**
- C. DEA Form 223**
- D. DEA Form 225**

**7. What does DEA Form 224a relate to?**

- A. Application for a new registration**
- B. Renewal of registration**
- C. Request of duplicate registration**
- D. Inventory of controlled substances**

**8. Which facilities are classified as Long-Term Care Facilities (LTCFs)?**

- A. Pharmacies and clinics**
- B. Nursing homes and mental care facilities**
- C. Urgent care centers**
- D. Educational institutions**

**9. What details must a receiving pharmacy include on the prescription when accepting a transfer?**

- A. Previous prescription price**
- B. Transferring pharmacy's information**
- C. Insurance provider**
- D. Amount of medication dispensed**

**10. What is the significance of patient education concerning adverse drug reactions?**

- A. To promote drug sales**
- B. To ensure patients are aware of potential side effects**
- C. To limit the number of medications prescribed**
- D. None, patients do not need to know**

## **Answers**

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

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## **Explanations**

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## 1. In what circumstance may a CII be partially dispensed apart from running out of stock?

- A. When there is no refill remaining
- B. When the patient is terminally ill or in a long-term care facility**
- C. When the prescriber is unavailable
- D. When the patient requests it

A partially dispensed Schedule II (CII) controlled substance can indeed occur when the patient is terminally ill or resides in a long-term care facility. This provision is based on federal regulations that acknowledge the special circumstances surrounding patients in these situations. For patients who are terminally ill, the ability to partially fill a CII prescription means that they can receive only the amount they need for immediate relief, which can be more manageable and appropriate given the unpredictability of their condition. Similar reasoning applies to individuals in long-term care facilities, where managing medication can be more complex, and they may not require the full CII supply at once. In both cases, the pharmacist must document the partial filling by indicating the quantity dispensed and the remaining amount authorized to be dispensed on the prescription. This ensures compliance with regulations while addressing the needs of vulnerable patient populations, thereby allowing flexibility in obtaining necessary medications without the burden of unnecessary quantities. The other options do not pertain to scenarios that justify partial dispensing of a CII. Refill limitations, unavailability of the prescriber, or patient requests do not create a necessity for partial filling under federal law, unlike the specific allowances made for terminally ill patients and those in long-term care.

## 2. Are pharmacists permitted to compound controlled substances?

- A. Only without regulations
- B. Yes, at their discretion
- C. Only under specific regulations and guidelines**
- D. No, it is completely prohibited

Pharmacists are allowed to compound controlled substances, but this practice is subject to specific regulations and guidelines established by the Drug Enforcement Administration (DEA) and other regulatory agencies. Compounding controlled substances involves combining, mixing, or altering ingredients to create a medication tailored to individual patient needs, and it is regulated to ensure safety, efficacy, and compliance with legal standards. These regulations dictate when and how a pharmacist can compound controlled substances, including requirements such as maintaining appropriate records, adhering to specific ingredient limits, and ensuring that the compounding occurs in a suitable environment. Additionally, pharmacists must comply with state laws that may impose further restrictions or guidelines. Without these established regulations, there could be significant risks associated with the safety and legality of the compounded medications, making option C the most accurate and responsible answer. The other choices suggest incorrect levels of restriction or permissibility that do not reflect the actual regulatory framework governing the compounding of controlled substances.

### 3. What must be done if a pharmacy receives damaged controlled substances upon delivery?

- A. Accept and log the damages**
- B. Reject the delivery and report to DEA**
- C. Document and inform the supplier**
- D. Dispose of them immediately**

When a pharmacy receives damaged controlled substances upon delivery, it is essential to document the damages and inform the supplier. This process is critical because it ensures proper tracking and accountability for these controlled substances, which are regulated by federal law due to their potential for abuse and dependence. Documenting the damage provides a record that can be important for both legal compliance and inventory management. This step helps maintain accurate inventory records, which is crucial for compliance with DEA regulations. Informing the supplier allows them to take appropriate action, such as issuing credits or sending replacements, and ensures that the responsibility for the damaged items is clearly defined. In contrast, accepting and logging the damages could lead to discrepancies in inventory and potential legal repercussions, as it does not adequately address the proper handling of controlled substances. Rejecting the delivery and reporting to the DEA might be excessive unless the damaged substances pose a specific legal concern. Disposing of the goods immediately without proper documentation could violate both DEA regulations and pharmacy policies regarding the handling of controlled substances. Thus, documenting and notifying the supplier aligns with best practices for managing controlled substances, ensuring compliance and proper accountability within the pharmacy's operations.

### 4. What is considered a "duplicate prescription"?

- A. A prescription for a drug with a different dosage**
- B. A prescription for the same medication intended to be dispensed multiple times**
- C. A prescription that is lost and needs to be replaced**
- D. A prescription with incorrect patient information**

A "duplicate prescription" refers to a situation where a prescription for the same medication is issued with the intent for it to be dispensed multiple times. This often occurs when a prescriber issues multiple prescriptions at once for the same medication, possibly with different dispensation dates or for multiple refills. The key aspect here is that it involves the same drug and is meant to be filled multiple times, creating potential risk for overmedication or abuse if not carefully managed. The nature of a duplicate prescription necessitates careful monitoring to ensure adherence to safety protocols and regulatory compliance, particularly in controlled substances. Understanding this concept is crucial for pharmacists as it helps them identify potential issues related to patient safety and medication management. The other options describe scenarios that do not align with the definition of a duplicate prescription. A prescription for a different dosage would indicate a variation rather than duplication. A lost prescription that needs replacement involves a different issue concerning the loss of documentation rather than duplication. Incorrect patient information suggests a clerical error, not duplication of a prescription's intent or content.

## 5. Why is it important to distinguish between "legitimate" and "illegitimate" sources of controlled substances?

- A. To maintain adequate supply for pharmacies
- B. To ensure access to medications for all patients
- C. To prevent diversion and abuse while ensuring access to necessary medications for patients**
- D. To comply with pharmacy laws

Distinguishing between "legitimate" and "illegitimate" sources of controlled substances is crucial primarily to prevent diversion and abuse while still ensuring that patients have access to the medications they need. Legitimate sources refer to those channels that adhere to regulatory guidelines and ethical standards, which are essential in maintaining the integrity of the healthcare system. By managing and monitoring these sources, pharmacists and healthcare providers can help prevent the misuse of controlled substances that could lead to increases in addiction, overdose, and illegal distribution. At the same time, it is important to ensure that legitimate patients retain access to appropriate medications for legitimate medical needs. This dual focus helps create a balance between controlling potential abuse and providing necessary treatment options for patients. A comprehensive understanding of this distinction equips healthcare professionals with the framework to navigate the complexities of medication distribution safely and effectively. The other options touch upon important aspects of pharmacy practice, such as maintaining supply and complying with laws, but they do not encapsulate the critical need for preventing misuse alongside the necessity of patient's access to care, which is the primary focus of distinguishing between legitimate and illegitimate sources.

## 6. What form is required for a pharmacy to register with the DEA?

- A. DEA Form 222**
- B. DEA Form 224**
- C. DEA Form 223
- D. DEA Form 225

To register a pharmacy with the DEA, the required form is DEA Form 224. This form is specifically designed for registration of pharmacies that intend to handle controlled substances. The registration process ensures that the pharmacy can legally dispense controlled substances, and it sets forth the guidelines that pharmacies must follow to maintain compliance with federal regulations. The DEA Form 224 collects important information about the pharmacy, such as its location, the type of services it provides, and the name of the pharmacy owner. Upon approval of the application submitted with this form, the pharmacy is issued a DEA registration number that allows it to prescribe, administer, or dispense controlled substances within the scope of its practice. Using the correct form for registration is crucial for legal operation within the framework of the Controlled Substances Act and maintains regulatory compliance for the dispensing of medications that are classified as controlled substances.

## 7. What does DEA Form 224a relate to?

- A. Application for a new registration**
- B. Renewal of registration**
- C. Request of duplicate registration**
- D. Inventory of controlled substances**

DEA Form 224a is specifically utilized for the renewal of a registration. This form must be completed by individuals or entities that are already registered with the DEA to handle controlled substances and need to renew their registration every three years. By submitting Form 224a, the registrant ensures that they maintain legal authority to prescribe, distribute, or dispense controlled substances, thus remaining compliant with federal regulations. In contrast, other forms serve different purposes within the DEA framework. For instance, Form 224 is used for the initial application to register with the DEA, while Form 223 is needed for requesting a duplicate registration. Additionally, an inventory of controlled substances is documented using other procedures as outlined in DEA regulations, not with Form 224a. This distinction highlights the specific role of Form 224a in facilitating the continuity of legally sanctioned operations concerning controlled substances.

## 8. Which facilities are classified as Long-Term Care Facilities (LTCFs)?

- A. Pharmacies and clinics**
- B. Nursing homes and mental care facilities**
- C. Urgent care centers**
- D. Educational institutions**

Long-Term Care Facilities (LTCFs) are specifically designed to provide care for individuals who are unable to live independently due to chronic illnesses, disabilities, or the aging process. Nursing homes and mental care facilities fall into this category because they offer extended health care services, including assistance with daily living activities, medical supervision, and rehabilitation. Nursing homes typically cater to older adults needing continuous nursing care, while mental care facilities may serve individuals with mental health conditions that require long-term support and treatment. These environments are structured to meet the ongoing health care and support needs of their residents, which is a defining characteristic of LTCFs. In contrast, pharmacies and clinics primarily provide outpatient services, urgent care centers focus on short-term medical treatment for urgent conditions, and educational institutions do not provide medical care to the same extent as LTCFs. Therefore, the correct classification identifies nursing homes and mental care facilities as the appropriate type of Long-Term Care Facility.

**9. What details must a receiving pharmacy include on the prescription when accepting a transfer?**

- A. Previous prescription price**
- B. Transferring pharmacy's information**
- C. Insurance provider**
- D. Amount of medication dispensed**

When accepting a transfer of a prescription, the receiving pharmacy is required to include specific details related to the transferring pharmacy to ensure that the transfer process is compliant with regulatory standards. This includes the name and address of the transferring pharmacy, as well as the prescription number from that pharmacy. This information helps to maintain an accurate and complete record of the prescription history, facilitating proper medication management for the patient. Including this information is vital for two main reasons. First, it allows for verification of the transfer and ensures continuity of care, as pharmacists can track the patient's medication use across different pharmacies. Second, it helps prevent issues such as prescription errors or duplication, which are critical for patient safety. The other options, while they may have relevance in other contexts, are not required details for a prescription transfer. For example, the previous prescription price is not pertinent to the transfer process, nor is the insurance provider information uniformly required to safeguard the patient's medication history. The amount of medication dispensed, while useful for record-keeping, does not specifically pertain to the information that must accompany a transfer.

**10. What is the significance of patient education concerning adverse drug reactions?**

- A. To promote drug sales**
- B. To ensure patients are aware of potential side effects**
- C. To limit the number of medications prescribed**
- D. None, patients do not need to know**

Patient education concerning adverse drug reactions is crucial because it empowers patients to understand the potential side effects of the medications they are taking. When patients are informed about possible adverse reactions, they are better equipped to recognize them should they occur. This understanding can lead to timely reporting of any side effects to healthcare providers, enhancing patient safety and allowing for prompt adjustments to their treatment as necessary. Furthermore, educating patients about adverse reactions fosters adherence to medication regimens, as they feel more in control and aware of what to expect. When patients know what side effects to anticipate, they may be less likely to stop taking their medications prematurely due to unfounded fears or misunderstandings. Therefore, ensuring that patients are aware of potential side effects can significantly improve both the effectiveness of treatment and the overall management of their health.

# 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](mailto:hello@examzify.com).**

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

**<https://deapharmacistsmanual.examzify.com>**

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

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