

# KENTUCKY MULTISTATE PHARMACY JURISPRUDENCE EXAMINATION (MPJE) PRACTICE EXAM (SAMPLE)

## STUDY GUIDE



## SAMPLE STUDY GUIDE WITH LIMITED 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. 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. What is the maximum allowable time for reporting to the board, DEA, and CHFS in case of pharmacy closure?**
  - A. 10 days
  - B. 15 days
  - C. 30 days
  - D. 60 days
- 2. Who is responsible for appointing members of the Kentucky Board of Pharmacy?**
  - A. State Legislature
  - B. The Governor
  - C. The Board Of Pharmacy
  - D. Public Vote
- 3. What is the term for the minimum number of members required for a board meeting to be valid?**
  - A. Majority
  - B. Quorum
  - C. Participation
  - D. Collective
- 4. How long should a pharmacy maintain the daily log records?**
  - A. 2 years
  - B. 5 years
  - C. 7 years
  - D. 10 years
- 5. What action must be taken 7 days after a faxed C-II prescription is sent from an LTC facility?**
  - A. The original prescription must be returned to the prescriber
  - B. The original must be delivered to the pharmacy
  - C. Nothing is required after faxing
  - D. The original prescription must be stored securely



- 6. What must counseling include, according to pharmacy standards?**
- A. General advice and marketing information
  - B. Common and clinically significant adverse drug reactions (ADRs)
  - C. Only serious potential drug interactions
  - D. Patient satisfaction surveys
- 7. What is the requirement for a physical inventory in certain facilities?**
- A. At least quarterly
  - B. At least annually
  - C. At least monthly
  - D. At least bi-weekly
- 8. What licenses are required for drug manufacturers and wholesalers handling controlled substances?**
- A. A state pharmacy license and local business permit
  - B. A CHFS-drug control license and a DEA license
  - C. Only a federal business license
  - D. A state business license and a retail pharmacy license
- 9. Who is NOT allowed to prescribe medications in Kentucky?**
- A. Dietitian (RD)
  - B. Physician's Assistant
  - C. Podiatrist
  - D. Optometrist
- 10. Is identification required for the dispensing of codeine?**
- A. Yes, always required
  - B. No, if the pharmacist is familiar with the patient
  - C. Only for first-time patients
  - D. Only for out-of-state patients



## **Answers**

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

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## **Explanations**

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**1. What is the maximum allowable time for reporting to the board, DEA, and CHFS in case of pharmacy closure?**

- A. 10 days
- B. 15 days**
- C. 30 days
- D. 60 days

*The correct time frame for reporting a pharmacy closure to the Board of Pharmacy, the Drug Enforcement Administration (DEA), and the Cabinet for Health and Family Services (CHFS) is indeed 15 days. This requirement is in place to ensure that there is continuity in patient care and to minimize any potential risks associated with the abrupt closure of a pharmacy. Reporting within this timeframe allows the relevant authorities to properly oversee the disposition of prescription medications and to ensure that there are no disruptions in service for patients who may rely on the pharmacy for their medications. A timeframe shorter than 15 days, such as 10 days, would not provide sufficient opportunity for pharmacies to organize their closure in a manner that allows for proper communication and documentation with regulatory bodies. On the other hand, longer reporting periods like 30 or 60 days could lead to unnecessary delays in addressing issues that may arise from the closure, potentially impacting patient safety and regulatory compliance. Therefore, the 15-day requirement strikes an appropriate balance between urgency and manageability.*

**2. Who is responsible for appointing members of the Kentucky Board of Pharmacy?**

- A. State Legislature
- B. The Governor**
- C. The Board Of Pharmacy
- D. Public Vote

*The Governor is responsible for appointing members of the Kentucky Board of Pharmacy. This is indicative of the executive role of the Governor in overseeing various state boards and commissions, which include regulatory bodies such as the Board of Pharmacy. This Board plays a crucial role in administering and enforcing pharmacy laws, ensuring public health and safety in the practice of pharmacy within the state. The selection process involves the Governor appointing individuals who typically have experience in pharmacy or related fields and are committed to upholding the professional standards expected in the discipline. This mechanism is designed to ensure that those making decisions that impact pharmacy practice are knowledgeable and skilled in the area. Understanding the appointment process emphasizes the importance of the Governor's role in ensuring that regulatory bodies function effectively and are staffed by qualified individuals who can navigate the complexities of pharmacy law and public health.*

**3. What is the term for the minimum number of members required for a board meeting to be valid?**

- A. Majority
- B. Quorum**
- C. Participation
- D. Collective

*The minimum number of members required for a board meeting to be valid is referred to as a quorum. A quorum is essential because it ensures that any decisions made during the meeting reflect the agreement of a sufficient portion of the board, lending legitimacy and authority to the proceedings. The concept of a quorum is fundamental to the functioning of boards and committees, as it prevents a small group of members from making decisions on behalf of the entire board without adequate representation. The other terms in the options do not convey this specific requirement. For instance, while "majority" refers to more than half of the members, it does not define the minimum attendance needed for a meeting. "Participation" and "collective" do not relate directly to the number of members required to hold a valid meeting. In governing documents or state laws, a quorum is explicitly defined, often as a simple majority or a specific fraction of the total number of members.*

**4. How long should a pharmacy maintain the daily log records?**

- A. 2 years
- B. 5 years**
- C. 7 years
- D. 10 years

*The requirement for maintaining daily log records in a pharmacy is typically set to ensure regulatory compliance and the ability to trace and review important operational information over a reasonable period. In Kentucky, as per the state's pharmacy practice regulations, pharmacies are required to retain daily log records for a duration of five years. This timeframe strikes a balance between having sufficient historical data for audits or reviews while not imposing an undue burden on pharmacies to keep records indefinitely. Maintaining records for five years ensures that the information is available for regulatory inspections, verifies compliance with prescription and dispensing laws, and supports the pharmacy in case of any inquiries regarding medication dispensing and related pharmacy operations during that period. This facilitates effective monitoring of pharmacy practices and enhances patient safety through maintained accountability. The correctness of this time frame is grounded in regulations that are designed to provide pharmacies with enough record-keeping guidelines to meet legal and operational obligations.*

**5. What action must be taken 7 days after a faxed C-II prescription is sent from an LTC facility?**

- A. The original prescription must be returned to the prescriber**
- B. The original must be delivered to the pharmacy
- C. Nothing is required after faxing
- D. The original prescription must be stored securely

*In the context of the regulations governing controlled substances, specifically C-II prescriptions, when a prescription is faxed from a long-term care (LTC) facility, there is a requirement that the original prescription must be provided to the pharmacy within a specified timeframe, which is typically within 7 days after the fax is sent. This regulation ensures that the pharmacy has the official paper prescription as a part of the patient's medication record, maintaining compliance with both state and federal laws governing controlled substances. The purpose of this requirement is to guard against potential misuse and ensure that all prescriptions for controlled substances are properly documented and verified. It helps prevent any discrepancies in the medication supply chain that could occur if only the faxed copy were utilized. The original prescription serves as an essential audit trail for both the prescriber and the pharmacy. While there may be variations in specific regulations across states regarding the handling of faxed prescriptions, in Kentucky the expectation is that the original must be provided to the pharmacy. Therefore, fulfilling this requirement within the specified 7-day period is critical for compliance and patient safety.*

**6. What must counseling include, according to pharmacy standards?**

- A. General advice and marketing information
- B. Common and clinically significant adverse drug reactions (ADRs)**
- C. Only serious potential drug interactions
- D. Patient satisfaction surveys

*Counseling, as outlined by pharmacy standards, must include information on common and clinically significant adverse drug reactions (ADRs). This requirement is critical because it ensures that patients understand the potential risks associated with their medications. By discussing ADRs, pharmacists help patients recognize signs of adverse reactions and instruct them on what to do if they experience these effects, ultimately enhancing patient safety and medication adherence. The focus on clinically significant ADRs is particularly important because not all side effects warrant discussion. By concentrating on those that are most relevant and impactful to patient health, pharmacists can make the counseling process more effective and beneficial for patients. This aspect of counseling reflects the pharmacy's role in promoting the safe and effective use of medications. In contrast, other aspects such as general advice and marketing information, while potentially helpful, do not directly address the critical need for patients to be informed about their medication's safety profile. Similarly, limiting counseling solely to serious potential drug interactions does not provide a comprehensive view of the overall safety and expected effects of the medication. Patient satisfaction surveys, while useful for quality assessment, are not a component of medication counseling itself and therefore do not fit within the standards for required counseling content.*

## 7. What is the requirement for a physical inventory in certain facilities?

- A. At least quarterly
- B. At least annually
- C. At least monthly**
- D. At least bi-weekly

*In certain facilities, especially those handling controlled substances, the requirement for a physical inventory is at least monthly. This frequency is crucial to ensure accurate tracking of medication stock and compliance with regulations governing the handling of controlled substances. Regular physical inventories help to identify discrepancies, prevent drug diversion, and maintain accountability in the management of dangerous medications. By conducting these inventories monthly, facilities can quickly address any issues that may arise, ensure that records are accurate, and reinforce the integrity of inventory control systems. Such diligence is especially important given the potential consequences of mismanaged or improperly accounted for controlled substances. Options indicating inventory frequencies less frequent than monthly do not align with the heightened scrutiny and regulatory standards that govern facilities that manage controlled substances. Therefore, a monthly inventory aligns with best practices in maintaining compliance and ensuring patient safety.*

## 8. What licenses are required for drug manufacturers and wholesalers handling controlled substances?

- A. A state pharmacy license and local business permit
- B. A CHFS-drug control license and a DEA license**
- C. Only a federal business license
- D. A state business license and a retail pharmacy license

*In Kentucky, drug manufacturers and wholesalers that handle controlled substances must obtain specific licenses to ensure compliance with both state and federal regulations. The CHFS drug control license, issued by the Cabinet for Health and Family Services, is essential for managing the distribution of controlled substances within the state. This license ensures that businesses follow proper protocols for storage, handling, and distribution of these substances. Additionally, a DEA license is required for any entity that deals with controlled substances at the federal level. The Drug Enforcement Administration mandates this license to regulate the manufacture, distribution, and prescription of controlled substances, ensuring that organizations adhere to the stringent laws designed to prevent misuse and promote safety. Obtaining both the CHFS drug control license and DEA license allows manufacturers and wholesalers to legally operate while maintaining accountability and adherence to the laws governing controlled substances, thus protecting public health and safety. Other options do not encompass the necessary combination of state and federal requirements specific to handling controlled substances.*

## 9. Who is NOT allowed to prescribe medications in Kentucky?

- A. Dietitian (RD)**
- B. Physician's Assistant
- C. Podiatrist
- D. Optometrist

*In Kentucky, a Registered Dietitian (RD) does not have the authority to prescribe medications. The ability to prescribe medications is typically limited to healthcare professionals who have undergone specific training and are authorized to do so under state law. This includes physicians, physician's assistants, podiatrists, and optometrists, who can prescribe within the scope of their practice. While registered dietitians play a crucial role in nutritional counseling and dietary management, their practice does not extend to prescribing medications. In contrast, the other listed professionals, such as physician's assistants, podiatrists, and optometrists, have established guidelines that allow them to prescribe medications relevant to their fields.*



**10. Is identification required for the dispensing of codeine?**

- A. Yes, always required
- B. No, if the pharmacist is familiar with the patient**
- C. Only for first-time patients
- D. Only for out-of-state patients

*The requirement for identification during the dispensing of codeine relates to the regulations surrounding controlled substances. In Kentucky and other jurisdictions, the regulations allow pharmacists some discretion in determining when identification is necessary based on their familiarity with the patient. If a pharmacist has established a relationship with a patient and is familiar with their history and needs, they may not require identification for subsequent refills or prescriptions. This practice facilitates patient care while still adhering to safety and legal regulations. It's essential for pharmacists to maintain a balance between regulatory compliance and their professional judgment. However, it's also important to recognize that new patients or those not previously known to the pharmacist can be required to show identification due to higher risks of misuse or diversion of controlled substances like codeine. Therefore, identification is not universally mandated but can be exempted based on the pharmacist's familiarity with the patient.*

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## 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://kentuckympje.examzify.com>

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

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