

KROGER PHARMACY TECHNICIAN LEVEL 3 PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
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. What is the primary purpose of HIPAA in the pharmacy setting?**
 - A. Protect patient health information and maintain confidentiality.
 - B. Improve drug pricing transparency.
 - C. Promote faster dispensing.
 - D. Mandate patient consent for all refills.

- 2. What document is commonly used to report medication errors for safety improvement?**
 - A. Incident/Medication Error Report
 - B. Pharmacy Error Log
 - C. Medication Safety Note
 - D. Audit Trail Form

- 3. Which elements does the National Drug Code (NDC) identify?**
 - A. Manufacturer, product, and package size
 - B. Drug interactions, side effects, and contraindications
 - C. Patient name, dosage, and administration route
 - D. Dispense date, lot number, and storage conditions

- 4. In the ipledge process, what must be recorded on the prescription after receiving the RMA # and dispense by date?**
 - A. Record only the RMA number
 - B. Record both on the prescription and re-scan
 - C. Record only the dispense-by date
 - D. Record the patient's phone number

- 5. A patient is taking Warfarin and begins NSAIDs. What safety concern should you communicate?**
 - A. NSAIDs decrease Warfarin bleeding risk; monitor for changes.
 - B. NSAIDs can increase bleeding risk with Warfarin; alert the pharmacist and advise the patient to report signs of bleeding.
 - C. Warfarin and NSAIDs have no interaction.
 - D. Stop Warfarin when taking NSAIDs.

- 6. Which report shows each prescription filled by Central Fill for the specific date?**
- A. Overstock Report
 - B. Manifest Report by Date
 - C. Contact Manager Report
 - D. Waiting in Bin Report
- 7. Nonaqueous formulations prepared in a community pharmacy should be labeled with a Beyond-Use Date of no more than how long?**
- A. 1 month
 - B. 3 months
 - C. 6 months
 - D. 9 months
- 8. How should you handle a refill request when there are no refills left?**
- A. Dispense the prescription anyway.
 - B. Tell the patient there will be a delay with no guidance.
 - C. Check policy for prior authorization or contact prescriber for authorization; do not dispense without approval.
 - D. Return the prescription to the patient with no action.
- 9. What is the meaning of the abbreviation 'PO' in prescriptions?**
- A. By mouth.
 - B. Intravenous.
 - C. Per rectum.
 - D. Inhalation.
- 10. Which statement best describes ISO Class 5 in sterile compounding?**
- A. An environment with regulated airflow and very low particle counts suitable for aseptic preparation
 - B. An environment with moderate particle counts for general handling
 - C. An environment with high particle counts acceptable for aseptic tasks
 - D. An environment with no filtration

Answers

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

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Explanations

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1. What is the primary purpose of HIPAA in the pharmacy setting?

A. Protect patient health information and maintain confidentiality.

B. Improve drug pricing transparency.

C. Promote faster dispensing.

D. Mandate patient consent for all refills.

HIPAA in the pharmacy focuses on protecting patient health information and keeping it confidential. This means PHI—things like names, addresses, prescription details, and medical histories—must be safeguarded, stored securely, and shared only with people who need it for legitimate purposes. The privacy rule limits disclosures to treatment, payment, and health care operations, and encourages sharing the minimum necessary information. Patients also have rights to access and correct their records and to request restrictions on certain disclosures. These protections help maintain trust and reduce the chance of sensitive information being exposed. It isn't about drug pricing transparency, speeding up dispensing, or requiring consent for all refills, which are governed by other policies and operational considerations.

2. What document is commonly used to report medication errors for safety improvement?

A. Incident/Medication Error Report

B. Pharmacy Error Log

C. Medication Safety Note

D. Audit Trail Form

Documenting medication errors with an incident/medication error report is the standard method to promote safety and drive improvements after an event. This form captures key details such as what happened, when and where it occurred, the medications involved, dosages, and patient information, along with who was involved. It also records suspected contributing factors, immediate actions taken, and recommended corrective actions. Building this structured record enables root-cause analysis, trend monitoring, and changes to procedures or policies to prevent recurrence, often within a system that supports reporting and learning while protecting confidentiality. Other terms don't fit as well because they either lack the formal structure for comprehensive data collection or focus on tracking system activity rather than guiding safety improvements.

3. Which elements does the National Drug Code (NDC) identify?

A. Manufacturer, product, and package size

B. Drug interactions, side effects, and contraindications

C. Patient name, dosage, and administration route

D. Dispense date, lot number, and storage conditions

The NDC identifies the drug product by three parts: the manufacturer (labeler), the specific product (drug, strength, dosage form), and the package size or type. This standardized code uniquely labels each product and its packaging, aiding pharmacists, insurers, and suppliers in dispensing the exact item and processing accurate billing and recalls. It does not convey information about the patient, drug interactions, side effects, or contraindications. It also isn't about dispensing date, lot numbers, or storage conditions. So the option listing manufacturer, product, and package size matches what the NDC identifies.

4. In the ipledge process, what must be recorded on the prescription after receiving the RMA # and dispense by date?

- A. Record only the RMA number
- B. Record both on the prescription and re-scan**
- C. Record only the dispense-by date
- D. Record the patient's phone number

In iPLEDGE, every isotretinoin prescription must be documented with both the authorization details and the timing information, and then updated in the system. The RMA number is the unique authorization tied to the patient's prescription, while the dispense-by date indicates the last day the medication can be dispensed for that cycle. Recording both on the prescription and re-scanning ensures the dispensing record is complete and accurately reflected in the iPLEDGE database, supporting compliance checks and patient safety. The patient's phone number isn't part of this required documentation.

5. A patient is taking Warfarin and begins NSAIDs. What safety concern should you communicate?

- A. NSAIDs decrease Warfarin bleeding risk; monitor for changes.
- B. NSAIDs can increase bleeding risk with Warfarin; alert the pharmacist and advise the patient to report signs of bleeding.**
- C. Warfarin and NSAIDs have no interaction.
- D. Stop Warfarin when taking NSAIDs.

When Warfarin is in use, the blood doesn't clot as easily, and NSAIDs can worsen that bleeding risk. NSAIDs interfere with platelet function and can irritate the stomach lining, so combining them with Warfarin can lead to more bleeding events than either drug alone. Because of this, it's important to warn the patient that taking NSAIDs can raise the chance of bleeding and to notify the pharmacist about the NSAID use. The patient should report any signs of bleeding right away, such as unusual bruising, prolonged bleeding from cuts, bleeding gums or nosebleeds, heavier menstrual bleeding, black or tarry stools, red or dark urine, or vomiting blood. If pain relief is needed, consider alternatives and avoid NSAIDs unless advised by a clinician, and never adjust Warfarin dose without medical guidance.

6. Which report shows each prescription filled by Central Fill for the specific date?

- A. Overstock Report
- B. Manifest Report by Date**
- C. Contact Manager Report
- D. Waiting in Bin Report

Tracking daily central-fill activity relies on a report that records every prescription the Central Fill processes on a given date. The Manifest Report by Date is designed to pull up all prescriptions that were filled by Central Fill for the specified date, creating a complete, date-stamped record you can reconcile with the pharmacy's workflow and billing. This report typically covers each prescription's details for that day, making it ideal for auditing daily throughput and ensuring nothing is missed. The other options serve different purposes: an Overstock Report focuses on inventory levels, a Waiting in Bin Report shows items still waiting to be filled rather than completed ones, and a Contact Manager Report is about communications with management. So, for showing each prescription filled by Central Fill on a specific date, the Manifest Report by Date is the appropriate choice.

7. Nonaqueous formulations prepared in a community pharmacy should be labeled with a Beyond-Use Date of no more than how long?

- A. 1 month
- B. 3 months
- C. 6 months**
- D. 9 months

Beyond-use dates tell you how long a compounded preparation remains stable and safe to use. For nonaqueous formulations prepared in a community pharmacy, the maximum BUD is six months. This limit comes from stability data for water-free bases: microbial growth isn't a big concern without water, but chemical stability and ingredient interactions still cap how long the product can be reliably used. When setting the date, you choose the earlier of six months from compounding or the earliest expiration date of any ingredient used. That's why six months is the standard maximum.

8. How should you handle a refill request when there are no refills left?

- A. Dispense the prescription anyway.
- B. Tell the patient there will be a delay with no guidance.
- C. Check policy for prior authorization or contact prescriber for authorization; do not dispense without approval.**
- D. Return the prescription to the patient with no action.

No refills left means you must obtain authorization before dispensing. Follow the pharmacy policy by pursuing a prior authorization through the patient's insurer or by contacting the prescriber to get a renewed prescription or explicit approval for additional refills. Dispensing without approval isn't allowed because it can violate laws and insurance rules and may risk patient safety if the prescriber intended a change in therapy or monitoring. If the policy allows, initiate the authorization process, document the contact, and wait for the decision before releasing the medication. If approval is granted, dispense as directed and update records. If not, inform the patient of the outcome and discuss permitted alternatives per policy.

9. What is the meaning of the abbreviation 'PO' in prescriptions?

- A. By mouth.
- B. Intravenous.
- C. Per rectum.
- D. Inhalation.**

PO means by mouth. It comes from the Latin per os, exactly indicating that the medication should be taken orally and swallowed. This route is used for tablets, capsules, or liquids that are designed to be absorbed through the digestive system. It's different from the other routes: intravenous means into a vein, per rectum means via the rectum, and inhalation means through the lungs. Use PO when the drug is formulated for oral use and the patient can swallow; some meds can't be given PO if swallowing is not possible or if the drug isn't stable or adequately absorbed in the GI tract.

10. Which statement best describes ISO Class 5 in sterile compounding?

- A. An environment with regulated airflow and very low particle counts suitable for aseptic preparation**
- B. An environment with moderate particle counts for general handling
- C. An environment with high particle counts acceptable for aseptic tasks
- D. An environment with no filtration

ISO Class 5 is about keeping the air extremely clean in the area where sterile products are prepared. It requires regulated, controlled airflow and filtration to minimize particulates, creating an environment where aseptic preparation can be done with a very low risk of contamination. This is typically achieved with HEPA-filtered, laminar airflow and strict cleanroom practices, along with proper gowning and environmental controls. The goal is to maintain a level of air cleanliness that is far more stringent than general handling areas, so possibilities like moderate or high particle counts, or no filtration, do not meet ISO 5 requirements.

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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.

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

<https://krogerpharmtechlvl3.examzify.com>

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

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