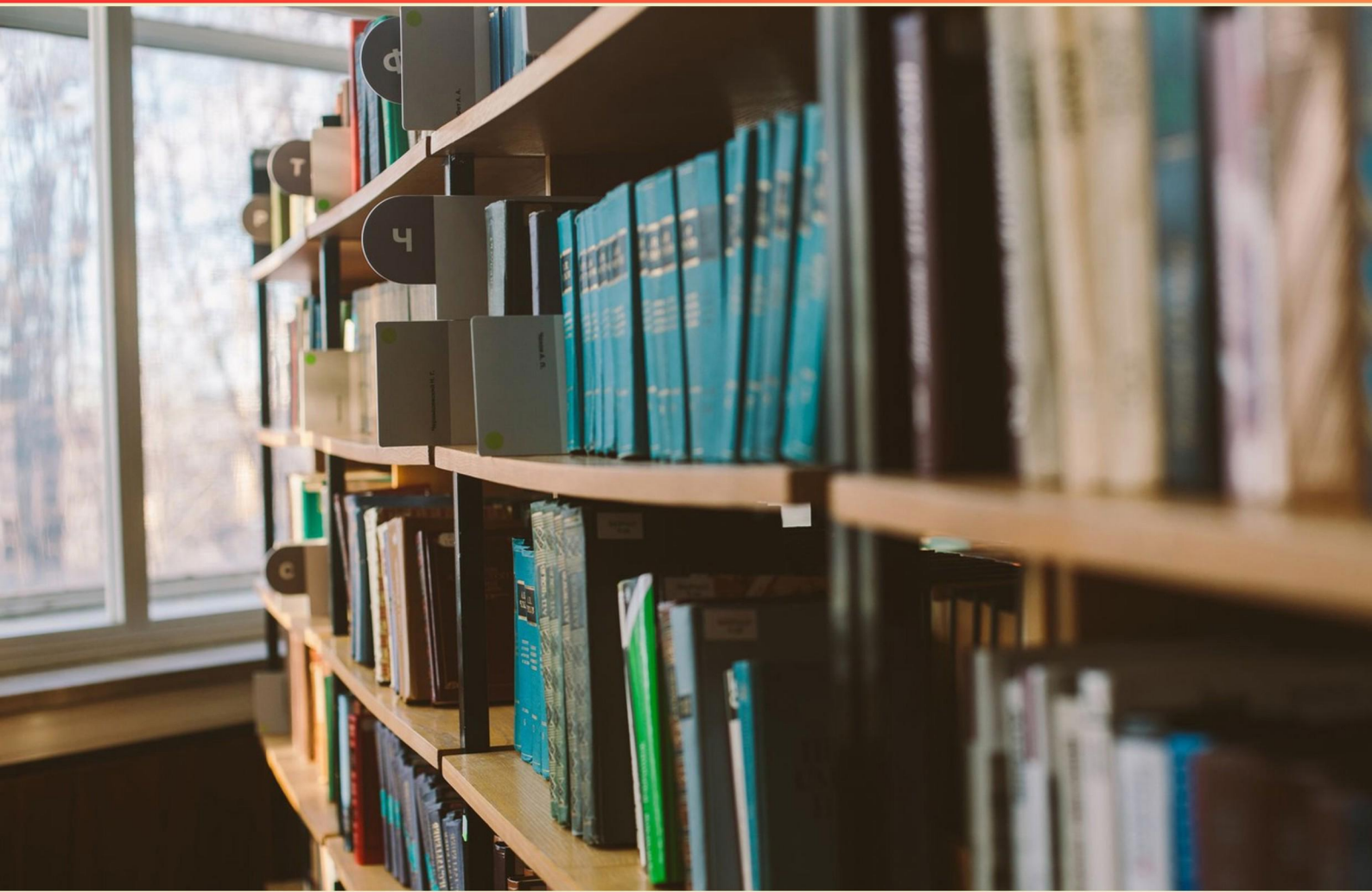


MASSACHUSETTS MULTISTATE PHARMACY JURISPRUDENCE EXAMINATION (MPJE) PRACTICE EXAM (SAMPLE)

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 must be included along with a prescription for a hydrocodone-only extended release medication that is not in an abuse deterrent form?**
 - A. A new letter of medical necessity
 - B. A recent lab test result
 - C. A family history
 - D. An old prescription
- 2. Under the Collaborative Practice Agreement, which conditions can a pharmacist manage medication dosages for?**
 - A. Only HIV or AIDS.
 - B. Only congestive heart failure.
 - C. Only chronic obstructive pulmonary disease.
 - D. All of the above.
- 3. What must a nuclear pharmacy do if the patient's name is unknown at the time of dispensing a radiopharmaceutical drug?**
 - A. Fill the prescription anyway
 - B. Obtain the patient's name within 72 hours
 - C. Request the doctor's confirmation
 - D. Notify the regulatory authority
- 4. In case of a stolen controlled substance, which police department must also receive a copy of the DEA Form 106?**
 - A. Only the city police department
 - B. Only the state police department
 - C. Both the city and state police departments
 - D. No police department is required to be notified
- 5. Under Massachusetts State Pharmacy Law, can a physician from another state prescribe morphine sulfate in Massachusetts?**
 - A. Yes, if properly registered
 - B. No, it is not allowed
 - C. Only if the physician visits Massachusetts
 - D. Only for patients visiting from other states

- 6. What type of training must pharmacists complete to dispense EC?**
- A. Internship training
 - B. Continuing education coursework
 - C. Training accredited by ACPE
 - D. New hire orientation
- 7. When disposing of controlled substances during pharmacy closure, what must the Pharmacist Manager indicate?**
- A. That they will be disposed of at a later date
 - B. That they have been disposed in accordance with federal regulations
 - C. That they will be donated
 - D. That they will be incinerated
- 8. What is the requirement for a patient diagnosis prescribed schedule VI controlled substances via a collaborative agreement?**
- A. It must be documented in the medical record
 - B. It must be verbally communicated with the pharmacist
 - C. It must be noted in the prescription
 - D. It does not require documentation
- 9. What is the expected outcome if a pharmacist dispenses a controlled substance against a voluntary non-opiate directive?**
- A. The pharmacist could be penalized.
 - B. The pharmacist is not liable.
 - C. The prescription remains valid regardless.
 - D. The directive has no legal standing.
- 10. Which of the following is NOT a requirement for a pharmacy moving to a new location?**
- A. Submitting a new application to the Board
 - B. Returning all previously issued permits
 - C. Notifying patients of the new location
 - D. Using the current permit after address amendment

Answers

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

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Explanations

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1. What must be included along with a prescription for a hydrocodone-only extended release medication that is not in an abuse deterrent form?

- A. A new letter of medical necessity**
- B. A recent lab test result
- C. A family history
- D. An old prescription

When prescribing a hydrocodone-only extended release medication that is not in an abuse deterrent form, it is essential to include a new letter of medical necessity. This requirement is in place to ensure that the prescribing physician can justify the need for such a powerful opioid medication, particularly given the potential for misuse and abuse associated with opioids. A letter of medical necessity provides the pharmacy with the necessary clinical rationale, documenting the patient's condition and explaining why this specific medication is appropriate and essential for their treatment. This requirement helps promote responsible prescribing practices and safeguards patient health by ensuring that potent medications are only prescribed when absolutely necessary and justified. In the case of hydrocodone, which has a high risk for dependency and abuse, additional documentation serves as a protective measure for both the patient and the healthcare system. The other options do not meet the specific regulatory requirements associated with prescribing this category of medication. A recent lab test result, family history, or an old prescription do not provide the necessary justification that a letter of medical necessity does, making this option critical in the context of prescribing hydrocodone without abuse deterrent features.

2. Under the Collaborative Practice Agreement, which conditions can a pharmacist manage medication dosages for?

- A. Only HIV or AIDS.
- B. Only congestive heart failure.
- C. Only chronic obstructive pulmonary disease.
- D. All of the above.**

The correct choice indicates that pharmacists can manage medication dosages for a variety of conditions under a Collaborative Practice Agreement. This framework allows for pharmacists to take on expanded roles in patient care, enhancing their ability to optimize medication therapy for various chronic diseases, such as HIV/AIDS, congestive heart failure, and chronic obstructive pulmonary disease (COPD). Under such agreements, pharmacists utilize their training and knowledge to adjust medication regimens, monitor patient outcomes, and make necessary changes to treatment plans in collaboration with prescribers. This approach not only increases access to care but also helps to ensure that patients receive tailored medication management for various chronic health issues. The comprehensive nature of the correct answer reflects the growing recognition of pharmacists as vital contributors to the healthcare team, emphasizing their capability to have a positive impact on patient health across multiple therapeutic areas. As a result, it's important for pharmacists to be knowledgeable about the management protocols associated with a wide range of conditions in order to provide the best possible care for their patients.

3. What must a nuclear pharmacy do if the patient's name is unknown at the time of dispensing a radiopharmaceutical drug?

- A. Fill the prescription anyway
- B. Obtain the patient's name within 72 hours**
- C. Request the doctor's confirmation
- D. Notify the regulatory authority

In the case where a nuclear pharmacy is dispensing a radiopharmaceutical and the patient's name is not known at the time of dispensing, it is essential to follow regulatory guidelines to maintain patient safety and compliance. Obtaining the patient's name within 72 hours is crucial to ensure proper documentation and traceability. This requirement helps to establish accountability for the use of controlled substances and radioactive materials, adhering to best practices in pharmaceutical care. Recording the patient's identity is important for both legal and safety reasons, as it ensures that there is a clear record of who received the medication, which is particularly vital for radiopharmaceuticals that may have specific handling and safety protocols. By requiring the pharmacy to obtain this information within a specified timeframe, it allows for adequate monitoring and management of the medication's use, while also fulfilling regulatory obligations. In contrast, the other options do not meet the necessary legal and ethical considerations for handling pharmaceuticals, particularly those with significant implications like radiopharmaceuticals. Simply filling the prescription without knowing the patient's identity compromises the safety protocols, while requesting the doctor's confirmation or notifying regulatory authorities does not address the immediate need to identify the patient, which is a critical part of the dispensing process.

4. In case of a stolen controlled substance, which police department must also receive a copy of the DEA Form 106?

- A. Only the city police department
- B. Only the state police department
- C. Both the city and state police departments**
- D. No police department is required to be notified

When a controlled substance is stolen, it is crucial for appropriate measures to be taken to report the theft to law enforcement authorities. The DEA Form 106 is specifically designed for reporting the theft or loss of controlled substances to the Drug Enforcement Administration (DEA). However, in addition to notifying the DEA, the protocol requires that local and state authorities also be informed to ensure a thorough investigation. In Massachusetts, notifying both the city police department and the state police department serves multiple purposes. It ensures that law enforcement at different levels can collaborate effectively, share relevant information, and take appropriate action in response to the reported crime. This dual notification also helps substantiate the pharmacy's commitment to regulatory compliance and public safety. Having both departments involved can lead to quicker responses and more comprehensive strategies to address any incidents surrounding missing controlled substances, which could impact community safety and drug diversion efforts. Therefore, filing the DEA Form 106 with both the city and state police departments aligns with the legal and procedural requirements in the event of such incidents.

5. Under Massachusetts State Pharmacy Law, can a physician from another state prescribe morphine sulfate in Massachusetts?

- A. Yes, if properly registered**
- B. No, it is not allowed
- C. Only if the physician visits Massachusetts
- D. Only for patients visiting from other states

In Massachusetts, a physician from another state can legally prescribe morphine sulfate if they are properly registered. This means that the physician must have a valid Massachusetts Controlled Substances Registration (MCSR) or be exempt from this requirement under certain conditions. Proper registration ensures that the prescriber is authorized to prescribe controlled substances in the state, which includes Schedule II drugs like morphine sulfate. The requirement for registration emphasizes the importance of maintaining regulatory oversight in prescribing practices, especially for controlled substances that have a higher potential for abuse. By ensuring out-of-state physicians are properly registered, Massachusetts upholds its public safety standards while allowing for access to necessary medications for patients in the state. Other options either impose unnecessary restrictions or misunderstand the requirements for out-of-state practitioners. For instance, stating that a physician must visit the state to prescribe does not reflect the legal framework that allows them to treat patients in Massachusetts through remote means, provided they comply with state regulations. Similarly, limiting prescriptions only to visiting patients does not align with the established laws that govern medical practice across state lines.

6. What type of training must pharmacists complete to dispense EC?

- A. Internship training
- B. Continuing education coursework
- C. Training accredited by ACPE**
- D. New hire orientation

Pharmacists must complete training that is accredited by the Accreditation Council for Pharmacy Education (ACPE) in order to dispense emergency contraception (EC). This requirement ensures that the training meets established educational standards and provides pharmacists with the necessary knowledge and skills to dispense EC safely and effectively. ACPE accreditation signifies that the training program has undergone a rigorous evaluation process and adheres to quality criteria relevant to pharmacy practice. In the context of dispensing emergency contraception, this specialized training equips pharmacists with information about the medications, their mechanisms of action, counseling points for patients, and the legal and ethical considerations involved. As a result, completing ACPE-accredited training helps ensure that pharmacists can provide accurate and reliable information to patients seeking emergency contraception. The other options, while they may involve valuable training experiences, do not specifically provide the regulatory and educational framework necessary for pharmacists dispensing emergency contraception.

7. When disposing of controlled substances during pharmacy closure, what must the Pharmacist Manager indicate?

- A. That they will be disposed of at a later date
- B. That they have been disposed in accordance with federal regulations**
- C. That they will be donated
- D. That they will be incinerated

When a pharmacy is closing, it is essential for the Pharmacist Manager to indicate that the controlled substances have been disposed of in accordance with federal regulations. This is crucial because controlled substances are heavily regulated to prevent diversion and ensure public safety. Not adhering to these regulations can have serious legal implications for both the pharmacy and the individuals involved. Indicating compliance with federal regulations signifies that the disposal method used meets the requirements set forth by the Drug Enforcement Administration (DEA) and other regulatory bodies. This includes following proper procedures for destroying controlled substances, which often involves specific methods such as incineration or other approved destruction processes that minimize the risk of these substances entering illicit channels. The other options would not demonstrate compliance with federal laws or ensure safety. For example, stating that they will be disposed of at a later date does not confirm that any action has been taken to securely manage these substances in the interim. Similarly, suggesting they will be donated is typically not an acceptable practice for controlled substances, as this could lead to misuse. Lastly, while incineration is a proper disposal method, simply indicating that the substances will be incinerated does not confirm that the disposal process adhered to all federal regulations. Therefore, the focus on confirming compliance with federal regulations is paramount in

8. What is the requirement for a patient diagnosis prescribed schedule VI controlled substances via a collaborative agreement?

- A. It must be documented in the medical record**
- B. It must be verbally communicated with the pharmacist
- C. It must be noted in the prescription
- D. It does not require documentation

The requirement for a patient diagnosis when prescribing Schedule VI controlled substances via a collaborative agreement emphasizes the importance of documentation in the patient's medical record. This is crucial as it serves as a permanent and legal record that supports the clinical decisions made by the pharmacist in managing the patient's therapy. Proper documentation helps ensure continuity of care, enhances communication among healthcare professionals, and provides a clear justification for the treatment provided. Furthermore, having the diagnosis documented in the medical record allows for appropriate oversight and evaluation of the patient's treatment plan, contributing to better health outcomes and adherence to legal and professional standards. In a collaborative practice setting, this becomes even more essential because it establishes a basis for the pharmacist's authority to prescribe and monitors the guidelines set forth in the collaborative agreement. While other options may reflect aspects of communication or documentation processes, they do not fulfill the same rigorous standard or provide the formal accountability that is required with documented medical records. Therefore, ensuring that the diagnosis is documented in the medical record aligns with best practices and regulatory requirements within pharmaceutical care.

9. What is the expected outcome if a pharmacist dispenses a controlled substance against a voluntary non-opiate directive?

- A. The pharmacist could be penalized.**
- B. The pharmacist is not liable.
- C. The prescription remains valid regardless.
- D. The directive has no legal standing.

If a pharmacist dispenses a controlled substance contrary to a voluntary non-opiate directive, it is crucial to recognize that the pharmacist may face penalties. This stems from the legal obligation to adhere to patient directives, particularly when they are clearly expressed through a valid, documented directive. Such directives indicate the patient's wish to avoid opiates due to concerns such as personal health, past addiction, or other reasons. Dispensing contrary to a patient's non-opiate directive can lead to both professional consequences for the pharmacist, such as disciplinary actions by a licensing board, and potential liability if harm results from not adhering to the patient's expressed preferences. The pharmacist is required to ensure that the treatment aligns with the wishes of the patient, and failing to follow a directive could also contravene state or federal pharmacy regulations, leading to further ramifications. The other options do not recognize the legal and ethical responsibilities a pharmacist has towards the patient's autonomy and choices regarding their medication, which is vital to understanding this scenario.

10. Which of the following is NOT a requirement for a pharmacy moving to a new location?

- A. Submitting a new application to the Board
- B. Returning all previously issued permits
- C. Notifying patients of the new location**
- D. Using the current permit after address amendment

Notifying patients of the new location is not a formal requirement for a pharmacy that is moving to a new location according to the regulations governing pharmacy operations. While it is highly recommended for pharmacies to inform their patients to ensure continuity of care and maintain trust, it is not mandated as part of the technical requirements set forth by the pharmacy board. On the other hand, submitting a new application to the Board is indeed required because a new location may necessitate a reassessment of compliance with local regulations, safety standards, and operational considerations at the new site. This ensures that the new premises meet all the necessary standards for pharmacy practice. Returning all previously issued permits is also a requirement to avoid confusion over which licenses are valid, pledging that all operational activities are conducted under the authority of the newly issued permits. Finally, even after a move, it's crucial for a pharmacy to use the current permit only after its address has been amended in official records, ensuring that all aspects of the pharmacy's operation are legally binding and up-to-date.

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://massachusettsmpje.examzify.com>

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

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