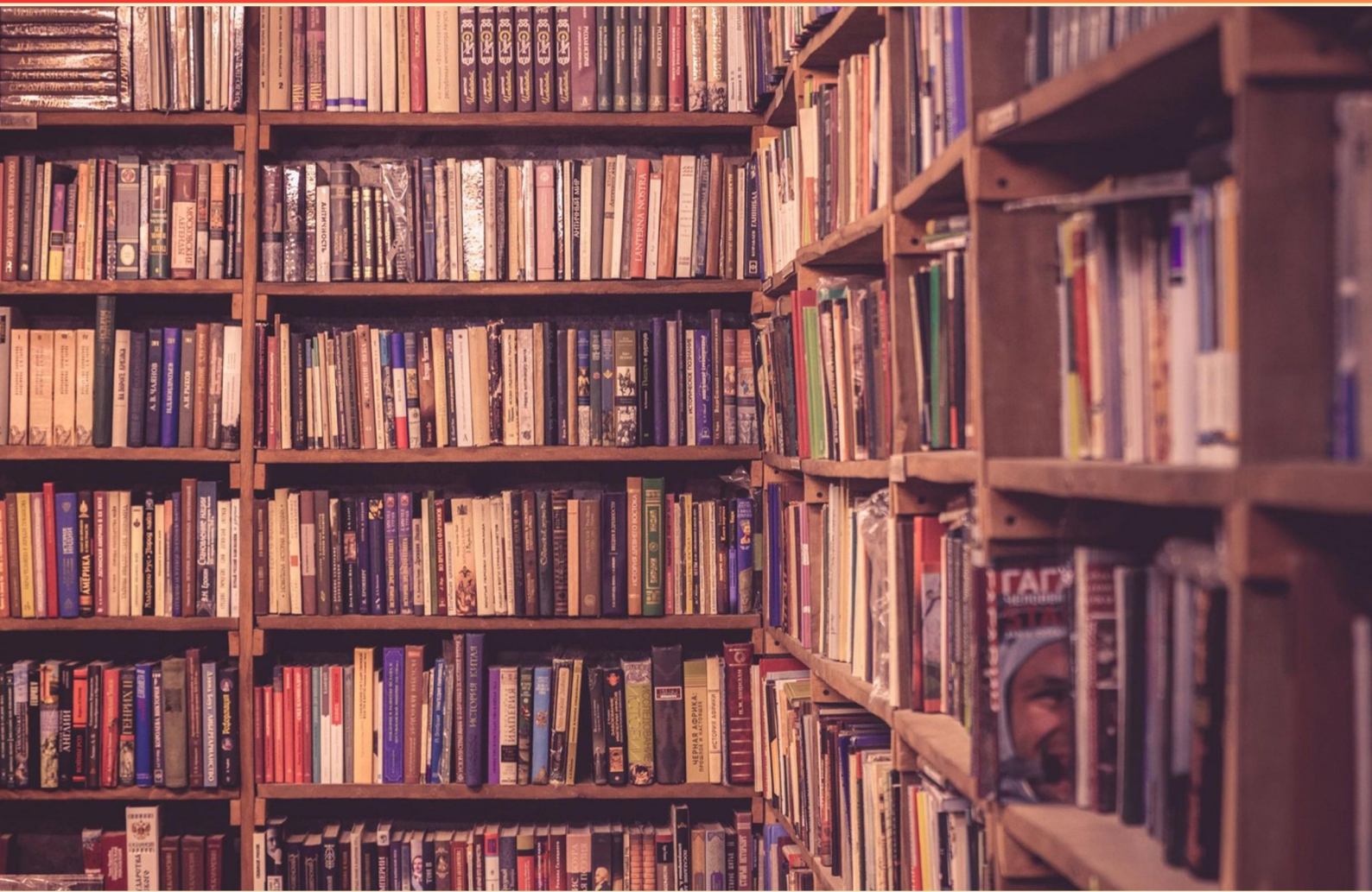


NEVADA MULTISTATE PHARMACY JURISPRUDENCE EXAMINATION (MPJE) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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. In what situation can a pharmacist or technician be exempt from passing a media fill test prior to compounding?**
 - A. If they have passed a media fill test within the last 6 months
 - B. If they have evidence of passing a test in the last 9 months for low/medium risk
 - C. If they work under supervision
 - D. If they have not compounded in the last year
- 2. True or False: An individual practitioner may dispense a controlled substance for their own personal use.**
 - A. True
 - B. False
 - C. Only in a medical emergency
 - D. It is allowed with limitations
- 3. What is the relationship defined between managing pharmacists and staff pharmacists?**
 - A. They operate independently
 - B. Staff pharmacists report to managing pharmacists
 - C. They are partners
 - D. Managing pharmacists do not need to oversee staff pharmacists
- 4. How many technicians can one pharmacist supervise at maximum in a hospital setting?**
 - A. 1 technician
 - B. 2 technicians
 - C. 3 technicians
 - D. 4 technicians
- 5. What is a required study for an ANDA submission?**
 - A. Clinical trials
 - B. Bioequivalency studies
 - C. Long-term safety studies
 - D. Manufacturing audits

- 6. Which is a responsibility of the seller during a drug recall?**
- A. The seller must only notify the manufacturer
 - B. The seller is responsible for contacting the consumer
 - C. The seller can ignore the recall if the manufacturer is contacted
 - D. The seller must conduct a market analysis
- 7. What is the appropriate action for a pharmacist after declining to fill a prescription and speaking with the prescriber?**
- A. Return the prescription to the patient
 - B. Contact the insurance company for clarification
 - C. Retain the prescription
 - D. Ask the patient to get another opinion
- 8. When should an inventory be conducted for newly scheduled drugs?**
- A. On January 1 of the scheduling year
 - B. The day the schedule takes effect
 - C. At the end of the month of scheduling
 - D. When requested by the DEA
- 9. When is generic substitution for brand medications prohibited?**
- A. When a pharmacist decides it is not appropriate
 - B. When the prescriber communicates it verbally or in writing
 - C. When the patient requests a brand name
 - D. When the insurance mandates a specific brand
- 10. Which of the following statements is true regarding the use of DEA form 41?**
- A. Can only be used in emergencies
 - B. Used for destruction of controlled medications
 - C. Required for returning medications
 - D. Only needed by manufacturers

Answers

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

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Explanations

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1. In what situation can a pharmacist or technician be exempt from passing a media fill test prior to compounding?

- A. If they have passed a media fill test within the last 6 months
- B. If they have evidence of passing a test in the last 9 months for low/medium risk**
- C. If they work under supervision
- D. If they have not compounded in the last year

A pharmacist or technician can be exempt from passing a media fill test prior to compounding if they have evidence of passing a test in the last 9 months for low/medium risk compounding. This requirement is established to ensure that individuals engaged in compounding are competent and have demonstrated their ability to maintain aseptic conditions to minimize contamination. The rationale for a 9-month timeframe specifically allows for a reasonable period of time for skills to remain relevant and applicable, especially in low/medium risk compounding, where the expected level of sterility assurance is less stringent compared to higher risk categories. This recognizes the importance of practical experience and maintains a standard that balances safety with practicality in compounding practice. In contrast, while passing a media fill test within the last 6 months may typically suffice, it does not encompass the broader acceptance of a slightly longer timeframe—up to 9 months—that is allowed for those in lower risk compounding scenarios. The requirement for supervision is unnecessary for the exemption from testing since competency has already been established through past testing. Lastly, the inability to have compounded in the last year does not provide an exemption but rather indicates a gap that would require retesting to re-establish competencies.

2. True or False: An individual practitioner may dispense a controlled substance for their own personal use.

- A. True
- B. False**
- C. Only in a medical emergency
- D. It is allowed with limitations

The assertion that an individual practitioner may dispense a controlled substance for their own personal use is false. In the context of federal and state regulations, practitioners, such as physicians or dentists, are generally prohibited from self-prescribing or dispensing controlled substances for their own use. This is rooted in the ethical and legal standards aimed at preventing potential abuse and conflicts of interest. The rationale for this prohibition stems from the importance of maintaining a clear separation between a practitioner's professional responsibilities and personal medical needs. By discouraging self-dispensing, regulations help ensure that medical professionals engage with the healthcare system in a manner consistent with the principles of patient safety, adequate record-keeping, and clinical oversight. If practitioners need a controlled substance, they should go through the standard patient-provider relationship, obtaining prescriptions through another licensed provider. This process helps maintain the integrity of medical practice and prevents misuse of authority or resources.

3. What is the relationship defined between managing pharmacists and staff pharmacists?

- A. They operate independently
- B. Staff pharmacists report to managing pharmacists**
- C. They are partners
- D. Managing pharmacists do not need to oversee staff pharmacists

The relationship defined between managing pharmacists and staff pharmacists indicates a hierarchical structure in which staff pharmacists report to managing pharmacists. This arrangement is typical within pharmacy settings, where the managing pharmacist takes on a leadership role that involves overseeing daily operations, ensuring compliance with regulations, and providing guidance to staff pharmacists. The managing pharmacist is responsible for the overall management of the pharmacy, including the training and supervision of staff. This reporting relationship is essential for maintaining accountability and providing clear lines of communication within the pharmacy. The managing pharmacist ensures that staff pharmacists have the resources and support they need to perform their roles effectively, while also holding them accountable for their duties and the quality of care provided to patients. The other options do not accurately reflect this structured approach. Operating independently may imply a lack of supervision or oversight, which contradicts the collaborative nature of pharmacy operations. Being partners suggests an equal relationship without a defined authority structure, and stating that managing pharmacists do not need to oversee staff pharmacists would negate the responsibilities that come with the managing role, which typically includes oversight and guidance.

4. How many technicians can one pharmacist supervise at maximum in a hospital setting?

- A. 1 technician
- B. 2 technicians
- C. 3 technicians**
- D. 4 technicians

In a hospital setting, regulations often specify the maximum number of pharmacy technicians that one pharmacist can supervise to ensure effective management and maintain patient safety. In Nevada, the law permits a single pharmacist to supervise up to three pharmacy technicians at any given time. This ratio reflects the necessity for adequate oversight in a busy hospital environment where pharmacists must ensure the accuracy of medication dispensing, monitor drug interactions, and provide patient care. Supervising three technicians allows pharmacists to manage workload efficiently while ensuring compliance with safety and quality standards in medication management. Other numbers of technicians, such as one, two, or four, do not align with the regulations established for this context, as they either underestimate or exceed the practical and safe limits for supervision by a pharmacist in a hospital setting. Understanding this regulation is crucial for effective pharmacy practice and ensuring safe patient care.

5. What is a required study for an ANDA submission?

- A. Clinical trials
- B. Bioequivalency studies**
- C. Long-term safety studies
- D. Manufacturing audits

For an Abbreviated New Drug Application (ANDA) submission, bioequivalency studies are essential. An ANDA is typically used to seek approval for a generic drug product, and demonstrating bioequivalence is crucial to show that the generic version performs similarly to the brand-name product in terms of safety and efficacy. Bioequivalence studies usually involve comparing the pharmacokinetic (PK) profiles of the proposed generic drug with those of the reference listed drug (RLD) under controlled conditions. The requirement for bioequivalence studies is grounded in the need to establish that the generic formulation will provide the same therapeutic effect as the branded counterpart when used in the same way. This provides confidence to regulatory authorities that the generic drug will be interchangeable with the brand-name product, ultimately ensuring patient safety and treatment effectiveness. In contrast, clinical trials are generally required for New Drug Applications (NDAs) but not for ANDAs, since the safety and efficacy of the active ingredient are already established with the brand-name drug. Long-term safety studies may be relevant in various contexts but are not a requisite component for ANDA submissions, which focus primarily on bioequivalence. Manufacturing audits provide important insights into quality control processes but do not address the primary need of demonstrating equivalence in

6. Which is a responsibility of the seller during a drug recall?

- A. The seller must only notify the manufacturer
- B. The seller is responsible for contacting the consumer**
- C. The seller can ignore the recall if the manufacturer is contacted
- D. The seller must conduct a market analysis

During a drug recall, the seller has the obligation to ensure that consumers are informed of the potential risks associated with the recalled product. This responsibility is critical as it helps protect public health by ensuring that individuals who may be affected by a faulty or dangerous drug can take appropriate action, such as ceasing use of the product and seeking medical advice. Contacting the consumer directly is essential for ensuring timely notification and minimizing harm. This duty not only enhances the seller's accountability, but it also aligns with regulatory expectations set forth by health authorities like the FDA, which emphasize communication as a key element of effective recall management. While notifying the manufacturer is a part of the recall process, it is insufficient on its own without also reaching out to consumers. Ignoring a recall or conducting a market analysis in lieu of notifying consumers does not fulfill the seller's ethical and legal responsibilities to protect patient safety. Thus, the seller's role extends beyond mere notification of the manufacturer to include proactive measures to communicate directly with the affected parties.

7. What is the appropriate action for a pharmacist after declining to fill a prescription and speaking with the prescriber?

- A. Return the prescription to the patient
- B. Contact the insurance company for clarification
- C. Retain the prescription**
- D. Ask the patient to get another opinion

The correct action for a pharmacist after declining to fill a prescription and having communicated with the prescriber is to retain the prescription. Retaining the prescription serves several important purposes in pharmacy practice and compliance with legal requirements. First, it allows the pharmacist to document the interaction with the prescriber and the rationale behind the decision to decline filling the prescription. This is crucial for maintaining accurate records and provides a safeguard against potential disputes or audits. Second, keeping the prescription ensures that the pharmacist has a reference should the situation regarding the prescription change. For instance, if further information or clarification is received from the prescriber or if the patient returns for a different consultation, having the prescription on file allows the pharmacist to properly manage the situation. Retaining the prescription also helps to prevent any misuse or unauthorized dispensing of the medication that may arise if the prescription were to be returned directly to the patient after a decline. By keeping the prescription, the pharmacist can ensure that all necessary protocols are followed in accordance with pharmacy law and patient safety standards. In summary, retaining the prescription is the most appropriate action, as it aligns with best practices for documentation and patient care in the pharmacy profession.

8. When should an inventory be conducted for newly scheduled drugs?

- A. On January 1 of the scheduling year
- B. The day the schedule takes effect**
- C. At the end of the month of scheduling
- D. When requested by the DEA

An inventory for newly scheduled drugs must be conducted on the day the schedule takes effect. This requirement ensures that the pharmacy or facility accurately accounts for the newly classified substances, reflecting any changes in their legal status. By taking inventory on the day the scheduling becomes effective, pharmacists are able to establish a baseline for compliance and control, ensuring all doses or stocks are recorded according to legal standards. This practice is important for regulatory purposes, as it helps prevent discrepancies and potential legal issues related to the handling and distribution of controlled substances. It also reinforces responsible pharmacy management, ensuring that stock levels are closely monitored from the moment a drug is classified as controlled.

9. When is generic substitution for brand medications prohibited?

- A. When a pharmacist decides it is not appropriate
- B. When the prescriber communicates it verbally or in writing**
- C. When the patient requests a brand name
- D. When the insurance mandates a specific brand

Generic substitution for brand medications is prohibited when the prescriber communicates that preference verbally or in writing. In this context, prescribers have the authority to indicate their preference for a specific brand medication to ensure that the patient receives the treatment they deem most appropriate. This directive can take the form of a written prescription that explicitly states "dispense as written" or through a verbal communication that is noted on the patient's record. While a pharmacist may have their own professional judgment about medication choices, the prescriber's instruction has precedence in this scenario. Additionally, patient preference for a brand name medication or insurance mandates for a specific brand do not legally prevent generic substitution unless explicitly instructed by the prescriber. Thus, understanding the prescriber's directive is essential to ensure compliance with state laws and regulations surrounding prescribed medications.

10. Which of the following statements is true regarding the use of DEA form 41?

- A. Can only be used in emergencies
- B. Used for destruction of controlled medications**
- C. Required for returning medications
- D. Only needed by manufacturers

The statement regarding the use of DEA Form 41 that is true is that it is used for the destruction of controlled medications. DEA Form 41 is specifically designed for registrants to document the destruction of controlled substances to ensure compliance with federal regulations governing the disposal of these substances. This form helps to maintain a clear record that the drugs have been destroyed in accordance with legal requirements, which is vital for both public safety and regulatory compliance. Options that mention emergencies, returning medications, or being only needed by manufacturers do not accurately reflect the purpose of DEA Form 41. Emergency situations do not necessitate the use of this form, and while returning medications does involve different forms and procedures, DEA Form 41 does not apply in those cases. Furthermore, while manufacturers do have specific requirements, DEA Form 41 is not limited to use only by them; any registrant with controlled substances that require destruction can utilize this form. This clarifies that the correct application of DEA Form 41 is specifically tied to the destruction process rather than other activities.

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://nevadampje.examzify.com>

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

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