

PHARMACY PEBC PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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. BG, a 45 year old male with type 1 diabetes mellitus, is currently using a premixed 30/70 combination of regular and intermediate-acting insulin subcut bid (before breakfast and supper). The following blood glucose values are observed: 5.8 mmol/L at 2200 h, 3.6 mmol/L at 0300 h, 10.2 mmol/L at 0800 h (2 hours after breakfast). Which of the following is the most appropriate initial adjustment for BG's insulin regimen?
- A. Decrease the supertime insulin dose.
 - B. Increase the supertime insulin dose.
 - C. Decrease the breakfast time insulin dose.
 - D. Increase the breakfast time insulin dose.
2. PB is a 70 year old female who is on the final day of a 10-day course of cotrimoxazole DS, i po bid for mild pyelonephritis. PB's medical conditions include hypertension and osteoarthritis, for which she takes enalapril 5 mg po bid and acetaminophen 650 mg po qid. PB has been feeling unwell for the past two days, complaining of abdominal pain, diarrhea, and muscle weakness. She presents to the emergency department, where it is discovered that her serum potassium level is 5.9 mmol/L (normal: 3.5-5.0 mmol/L) and her estimated creatinine clearance is 70 mL/min. What drug therapy problem is PB currently experiencing?
- A. Her dosage of cotrimoxazole is too low.
 - B. Her dosage of cotrimoxazole is too high.
 - C. She is experiencing a drug interaction between enalapril and cotrimoxazole
 - D. She is experiencing a drug interaction between acetaminophen and cotrimoxazole.
3. What does contraindication mean in pharmacology?
- A. A recommendation for drug use
 - B. A specific situation where a drug shouldn't be used
 - C. A dosage adjustment for a medication
 - D. A type of adverse drug reaction

4. A 27 year old patient presents to a community pharmacy for the first time and tells the pharmacist that he experienced an allergy to a penicillin product as a child. His symptoms included hives, wheezing and facial swelling, which resulted in hospitalized care. Which of the following is the most important reason for a community pharmacist to document this type of information in a patient's medication profile record?
- A. To provide drug allergy information to the patient's insurance provider
 - B. To encourage the patient to fill future prescriptions at this pharmacy
 - C. To enhance continuity of patient care regardless of the prescriber
 - D. To provide a record of cognitive services for insurance reimbursement
5. What should a pharmacist provide when a patient is prescribed a new medication?
- A. Only the cheapest generic option
 - B. Medication counseling and information about side effects
 - C. A list of all medications available on the market
 - D. A referral to a physician for further information
6. What does bioavailability refer to?
- A. The total amount of drug prescribed
 - B. The proportion of a drug that enters systemic circulation unchanged
 - C. The rate of drug absorption in the stomach
 - D. The duration for which a drug remains effective
7. BV is a 62 year old, obese female who visits a walk-in-clinic while her physician is away on vacation. She presents to the pharmacist with the following prescription: Losec® (omeprazole) 30 mg M: 30 Sig. i po daily. The pharmacist knows that this product is only available in 10 mg or 20 mg strengths and that BV's profile shows that she was previously on the 20 mg strength of this medication. The most appropriate initial pharmacist response is to:
- A. Tell BV that the physician has made a prescribing error.
 - B. Ask BV why she visited the clinic today and what the physician told her about the prescription.
 - C. Dispense using omeprazole 10 mg and adjust the quantity and dose accordingly.
 - D. Assume the prescriber was thinking of Prevacid® (lansoprazole) 30 mg and change the prescription accordingly.

- 8. A pharmacy manager is conducting yearly performance reviews for her pharmacy assistants. Which of the following statements is true regarding this process?**
- A. A group review is an effective means to motivate underperforming staff.
 - B. Only performance issues of which the employee has been made aware should be included in the review.
 - C. Staff who work in the same role should be ranked in comparison to one another.
 - D. The results of the performance review should not be considered for employee wage increases.
- 9. What does off-label use of a medication mean?**
- A. Using the medication for an FDA-approved purpose only
 - B. Using the medication for a purpose not officially approved
 - C. Using the medication strictly for external applications
 - D. Using the medication in higher doses than recommended
- 10. What is one way to maintain the stability of a medication?**
- A. Keep it in a warm environment
 - B. Store it in its original container
 - C. Mix it with other medications
 - D. Expose it to direct sunlight

Answers

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

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Explanations

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1. BG, a 45 year old male with type 1 diabetes mellitus, is currently using a premixed 30/70 combination of regular and intermediate-acting insulin subcut bid (before breakfast and supper). The following blood glucose values are observed: 5.8 mmol/L at 2200 h, 3.6 mmol/L at 0300 h, 10.2 mmol/L at 0800 h (2 hours after breakfast). Which of the following is the most appropriate initial adjustment for BG's insulin regimen?

- A. Decrease the supertime insulin dose.
- B. Increase the supertime insulin dose.
- C. Decrease the breakfast time insulin dose.
- D. Increase the breakfast time insulin dose.

Premixed 30/70 insulin is a combination of regular and intermediate-acting insulin, which is typically taken before breakfast and dinner. The morning blood glucose level of 10.2 mmol/L is higher than the target range (4.0-7.0 mmol/L) and indicates that the breakfast time insulin dose may need to be adjusted. However, the evening blood glucose level of 5.8 mmol/L and the low level of 3.6 mmol/L at 0300 h suggest that BG may be experiencing hypoglycemia during the night. Therefore, the most appropriate initial adjustment would be to decrease the supertime insulin dose, as this will help prevent hypoglycemia while also potentially lowering the post-breakfast blood glucose level. Increasing the supertime dose (option B) may lead to further nocturnal hypoglycemia. Decre

2. PB is a 70 year old female who is on the final day of a 10-day course of cotrimoxazole DS, i po bid for mild pyelonephritis. PB's medical conditions include hypertension and osteoarthritis, for which she takes enalapril 5 mg po bid and acetaminophen 650 mg po qid. PB has been feeling unwell for the past two days, complaining of abdominal pain, diarrhea, and muscle weakness. She presents to the emergency department, where it is discovered that her serum potassium level is 5.9 mmol/L (normal: 3.5-5.0 mmol/L) and her estimated creatinine clearance is 70 mL/min. What drug therapy problem is PB currently experiencing?

- A. Her dosage of cotrimoxazole is too low.
- B. Her dosage of cotrimoxazole is too high.
- C. She is experiencing a drug interaction between enalapril and cotrimoxazole
- D. She is experiencing a drug interaction between acetaminophen and cotrimoxazole.

PB is currently experiencing a drug interaction between enalapril, which is used to treat hypertension, and cotrimoxazole, which is used to treat pyelonephritis. This interaction can lead to an increase in potassium levels in the blood, as seen in PB's case with her elevated serum potassium level of 5.9 mmol/L. The other options, A and B, are incorrect because they do not address the drug interaction and instead focus on the dosage of cotrimoxazole being either too low or too high. Option D is incorrect because there is no known interaction between acetaminophen and cotrimoxazole. Therefore, the correct answer is C PB is experiencing a drug interaction between enalapril and cotrimoxazole.

3. What does contraindication mean in pharmacology?

- A. A recommendation for drug use
- B. A specific situation where a drug shouldn't be used**
- C. A dosage adjustment for a medication
- D. A type of adverse drug reaction

In pharmacology, a contraindication refers to a specific situation or condition where a medication should not be used because it could be harmful to the patient. This could involve certain medical conditions, patient demographics, or concurrent medications that could lead to serious adverse effects or reduced effectiveness. Understanding contraindications is essential for safe and effective medication management, as it helps healthcare providers identify instances where the risks of administering a particular drug outweigh the potential benefits. For instance, a medication may be contraindicated in patients with certain liver conditions, as the drug may exacerbate the patient's condition or lead to toxic effects due to altered metabolism. Identifying and adhering to contraindications is a critical aspect of pharmacotherapy to ensure patient safety and optimal therapeutic outcomes.

4. A 27 year old patient presents to a community pharmacy for the first time and tells the pharmacist that he experienced an allergy to a penicillin product as a child. His symptoms included hives, wheezing and facial swelling, which resulted in hospitalized care. Which of the following is the most important reason for a community pharmacist to document this type of information in a patient's medication profile record?

- A. To provide drug allergy information to the patient's insurance provider
- B. To encourage the patient to fill future prescriptions at this pharmacy
- C. To enhance continuity of patient care regardless of the prescriber**
- D. To provide a record of cognitive services for insurance reimbursement

The most important reason for a community pharmacist to document a patient's allergy to penicillin in their medication profile is to ensure continuity of care regardless of the prescriber. This information can help the pharmacist to avoid prescribing medications that may cause an adverse reaction in the patient and to suggest alternative medication options. Providing this information to the patient's insurance provider (choice A) may also be important, but it is not the most important reason as the primary concern should be the patient's health and safety. Encouraging the patient to fill future prescriptions at the same pharmacy (choice B) is not the primary concern as the patient may choose to go to a different pharmacy for convenience or other reasons. Documenting this information for cognitive services for insurance reimbursement (choice D) is also important, but it is not the most important reason as the primary concern should be the patient's well-being and continuity of care.

5. What should a pharmacist provide when a patient is prescribed a new medication?

- A. Only the cheapest generic option
- B. Medication counseling and information about side effects**
- C. A list of all medications available on the market
- D. A referral to a physician for further information

When a patient is prescribed a new medication, it is essential for the pharmacist to provide medication counseling and information about potential side effects. This practice ensures that the patient understands how to take the medication properly, the importance of adherence to the prescribed therapy, and what adverse effects they may experience. Providing this information enhances patient safety and encourages informed participation in their own healthcare. Medication counseling also includes discussing how the new medication may interact with other medications the patient is taking, dietary considerations, and any necessary lifestyle changes. This comprehensive approach equips the patient with the knowledge needed to manage their treatment effectively. While choosing the cheapest generic option may be important from a cost perspective, it does not replace the need for counseling. A list of all medications available on the market would overwhelm the patient and is not relevant to their specific treatment plan. A referral to a physician may be necessary in some situations, but it is not the primary responsibility of the pharmacist when it comes to new prescriptions, as they are trained to provide direct information and support to patients regarding their medications.

6. What does bioavailability refer to?

- A. The total amount of drug prescribed
- B. The proportion of a drug that enters systemic circulation unchanged**
- C. The rate of drug absorption in the stomach
- D. The duration for which a drug remains effective

Bioavailability is a key pharmacokinetic parameter that describes the efficiency with which a drug is absorbed into the systemic circulation and reaches the site of action in the body. When a drug is administered, not all of it will necessarily enter the bloodstream in its active form; some may be metabolized or undergo other changes before it has a chance to exert its effect. The concept specifically focuses on the fraction of the administered dose that arrives in the bloodstream unchanged, which is essential for determining how much of the drug will be effective. This means that even if a significant amount of a drug is administered, the actual amount that has a therapeutic effect depends on how much of that drug can bypass any barriers (like absorption in the gastrointestinal tract) and remain unaffected by metabolic processes. Thus, bioavailability can significantly impact the clinical effectiveness of a medication and is important in drug development and therapeutic monitoring. It helps healthcare professionals understand how to dose drugs properly to achieve the desired therapeutic effect while minimizing side effects.

7. BV is a 62 year old, obese female who visits a walk-in-clinic while her physician is away on vacation. She presents to the pharmacist with the following prescription: Losec® (omeprazole) 30 mg M: 30 Sig. i po daily. The pharmacist knows that this product is only available in 10 mg or 20 mg strengths and that BV's profile shows that she was previously on the 20 mg strength of this medication. The most appropriate initial pharmacist response is to:

- A. Tell BV that the physician has made a prescribing error.
- B. Ask BV why she visited the clinic today and what the physician told her about the prescription.**
- C. Dispense using omeprazole 10 mg and adjust the quantity and dose accordingly.
- D. Assume the prescriber was thinking of Prevacid® (lansoprazole) 30 mg and change the prescription accordingly.

The most appropriate initial response for the pharmacist would be to ask BV about her visit to the clinic and what the physician told her about the prescription. This is because there could be a valid reason as to why the physician prescribed the 30 mg strength instead of the 10 mg or 20 mg. Additionally, it is important to gather all relevant information before making any changes to a prescription. Options A and D are incorrect because they both involve making assumptions without obtaining more information. Option C could be considered, but it may not be appropriate to adjust the dose and quantity without further information from the physician. Therefore, option B is the best initial response.

8. A pharmacy manager is conducting yearly performance reviews for her pharmacy assistants. Which of the following statements is true regarding this process?

- A. A group review is an effective means to motivate underperforming staff.
- B. Only performance issues of which the employee has been made aware should be included in the review.**
- C. Staff who work in the same role should be ranked in comparison to one another.
- D. The results of the performance review should not be considered for employee wage increases.

context Option A is incorrect because while a group review may provide motivation, it may also result in a lack of individual accountability for underperforming staff. Option C is incorrect because ranking staff in comparison to one another can create a negative and competitive work environment, which may not be conducive to improving performance. Option D is incorrect because the results of the performance review can be used to determine fair and appropriate wage increases for employees.

9. What does off-label use of a medication mean?

- A. Using the medication for an FDA-approved purpose only
- B. Using the medication for a purpose not officially approved**
- C. Using the medication strictly for external applications
- D. Using the medication in higher doses than recommended

Off-label use of a medication refers to the practice of prescribing a drug for a purpose that has not been officially approved by regulatory bodies such as the FDA. It often occurs when a healthcare provider believes that the unapproved use may benefit a patient based on scientific evidence, clinical experience, or other compelling reasons. This practice is fairly common in medical settings, as some medications can have beneficial effects for conditions other than those specifically indicated on their labeling. Off-label prescribing can be vital for patient care, especially in situations where approved treatments are limited, yet it comes with the responsibility of the prescriber to ensure that it is appropriate and safe for the patient. By contrast, using the medication strictly for FDA-approved purposes correlates with option A. Option C, related to external applications, refers to topical usages, while option D concerns the dosage, neither of which addresses the essential concept of "off-label" use as it pertains to indication or purpose. Consequently, option B accurately defines off-label use as it explicitly describes the use of medications beyond the scope of their officially sanctioned indications.

10. What is one way to maintain the stability of a medication?

- A. Keep it in a warm environment
- B. Store it in its original container**
- C. Mix it with other medications
- D. Expose it to direct sunlight

Storing medication in its original container is an important way to maintain its stability. Original containers are specifically designed to protect the medication from environmental factors that could degrade it, such as moisture, light, and air exposure. Many original containers are made of materials that prevent the entry of moisture and are opaque to block light, both of which can negatively affect the quality and efficacy of the medication over time. In contrast, keeping medication in a warm environment, mixing it with other medications, or exposing it to direct sunlight can greatly compromise its stability. Warm temperatures can accelerate degradation processes, while mixing medications could lead to interactions that alter their effectiveness. Direct sunlight can lead to chemical reactions that degrade the active ingredients. Thus, choosing to store medication in its original container safeguards its integrity and ensures that it remains effective for the duration of its intended shelf life.

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://pharmacistpebcpracticeexam.examzify.com>

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

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