

# PTCB Pharmacy Law Practice Exam (Sample)

## Study Guide



**Everything you need from our exam experts!**

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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

- 1. Which law requires the pharmacist to consult about new prescriptions with patients?**
  - A. Fair Labor Standards Act**
  - B. HIPAA**
  - C. OBRA '90**
  - D. FDA Modernization Act**
- 2. What does "dispensing" refer to in pharmacy practice?**
  - A. The act of preparing and giving medication to a patient**
  - B. The process of prescribing medication by a physician**
  - C. The delivery of drugs to wholesalers**
  - D. The administration of vaccines**
- 3. Which schedule of Controlled Substance is Ambien classified under?**
  - A. Schedule I**
  - B. Schedule II**
  - C. Schedule III**
  - D. Schedule IV**
- 4. What controlled substance schedule does Testosterone fall under?**
  - A. Schedule II**
  - B. Schedule III**
  - C. Schedule IV**
  - D. Schedule V**
- 5. Which term describes medications that require specific patient documentation before dispensing?**
  - A. Black Box Warnings**
  - B. Medication Guides**
  - C. Informed Consent**
  - D. Patient Safety Alerts**

- 6. What information must be included on a prescription label?**
- A. Manufacturer's name and expiration date**
  - B. Patient's name, medication name, dosage, instructions, and pharmacy contact information**
  - C. Pharmacist's signature and price of medication**
  - D. Insurance provider details and refill history**
- 7. What is the maximum allowed days supply for a Schedule III-V controlled substance prescription?**
- A. 30 days**
  - B. 60 days**
  - C. 90 days**
  - D. 120 days**
- 8. According to federal law, in most cases, how must a Percocet prescription be issued?**
- A. It can be oral**
  - B. It must be hand-written or electronically prescribed by the prescriber**
  - C. It can be faxed by the prescriber**
  - D. It must be a verbal order**
- 9. In what situation is a drug categorized as "non-formulary"?**
- A. When it is a newly approved medication**
  - B. When it is not included in the insurance plan's approved list**
  - C. When a prescription is missing proper authorization**
  - D. When it is a controlled substance requiring special handling**
- 10. The TIRF program is specifically for what purpose?**
- A. Inpatient pain management**
  - B. Outpatients taking immediate-release fentanyl**
  - C. Chronic pain rehabilitation**
  - D. Substance abuse treatment**



## **Answers**

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

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## **Explanations**

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**1. Which law requires the pharmacist to consult about new prescriptions with patients?**

- A. Fair Labor Standards Act**
- B. HIPAA**
- C. OBRA '90**
- D. FDA Modernization Act**

The law that requires pharmacists to consult with patients about new prescriptions is OBRA '90. This legislation mandates that pharmacists engage in prospective drug utilization review and provide counseling to patients when they receive new prescriptions. The intent of this requirement is to ensure patients are informed about their medications, understand how to take them, and are aware of any potential side effects or interactions with other drugs. OBRA '90 emphasizes the role of pharmacists not just as dispensers of medication, but as integral parts of the healthcare team responsible for ensuring patient safety and adherence to therapy. By consulting with patients, pharmacists can help resolve any issues regarding medication use and provide valuable information that can improve health outcomes. The other laws mentioned do not specifically focus on the pharmacist's obligation to consult patients about new prescriptions. While they address important areas such as healthcare privacy (HIPAA), employee compensation (Fair Labor Standards Act), and drug regulation (FDA Modernization Act), they do not entail the specific requirement for pharmacists to counsel patients about newly prescribed medications.

**2. What does "dispensing" refer to in pharmacy practice?**

- A. The act of preparing and giving medication to a patient**
- B. The process of prescribing medication by a physician**
- C. The delivery of drugs to wholesalers**
- D. The administration of vaccines**

Dispensing in pharmacy practice specifically refers to the act of preparing and giving medication to a patient. This process involves several critical steps, including verifying the prescription, ensuring that the correct medication is provided in the right dosage form, and offering counseling and information to the patient to ensure safe and effective use of the medication. The role of the pharmacist in dispensing is vital, as they must ensure not only the accuracy of the medication but also check for potential drug interactions, patient allergies, and provide guidance on medication adherence. This clinician-patient interaction is crucial in promoting positive health outcomes and ensuring patients understand their treatment. The other options refer to different processes within the healthcare and pharmacy sectors but do not encapsulate the specific definition of dispensing. Prescribing is a separate function carried out by physicians, while the delivery of drugs to wholesalers and vaccine administration involve distinct operational areas within the pharmaceutical industry and health care, respectively.

**3. Which schedule of Controlled Substance is Ambien classified under?**

- A. Schedule I**
- B. Schedule II**
- C. Schedule III**
- D. Schedule IV**

Ambien, which is the brand name for zolpidem, is classified under Schedule IV of the Controlled Substances Act. This classification indicates that zolpidem has a lower potential for abuse compared to substances listed in Schedules I through III. Schedule IV drugs are considered to have a valid medical use and represent a low risk of dependence and addiction relative to the higher schedules. The scheduling of controlled substances is crucial because it dictates how drugs are prescribed, dispensed, and regulated. Schedule IV includes medications that are prescribed for treatment but require careful monitoring due to their potential for misuse. In the case of Ambien, it is widely used for the short-term treatment of insomnia, which affirms its therapeutic value as well as its inclusion in a controlled schedule to prevent misuse while ensuring patients have access to necessary medications.

**4. What controlled substance schedule does Testosterone fall under?**

- A. Schedule II**
- B. Schedule III**
- C. Schedule IV**
- D. Schedule V**

Testosterone is classified as a Schedule III controlled substance under the Controlled Substances Act. This classification indicates that testosterone has a recognized medical use but also has a potential for abuse and dependence, albeit less than the substances classified as Schedule I or II. The Schedule III designation means that while it may be prescribed by a healthcare provider, there are still strict regulations regarding its distribution and prescription. Medications in this category can result in moderate to low physical dependence or high psychological dependence. Understanding the classification of testosterone is important for pharmacy practice as it influences how prescriptions are written, how medications are dispensed, and the legal responsibilities of healthcare professionals in managing these substances. Awareness of testosterone's schedule informs pharmacists and pharmacy technicians about the necessary precautions when handling prescriptions and the importance of patient education regarding the responsible use of this medication.

**5. Which term describes medications that require specific patient documentation before dispensing?**

- A. Black Box Warnings**
- B. Medication Guides**
- C. Informed Consent**
- D. Patient Safety Alerts**

The term that describes medications requiring specific patient documentation before dispensing is "Medication Guides." These guides are intended to help patients understand how to use the medication safely and effectively. They contain information specific to the drug's risks, benefits, and proper use, and they are mandated by the FDA for certain high-risk medications to ensure that patients are well-informed before beginning treatment. Medication Guides serve as a communication tool between healthcare providers and patients, allowing patients to make informed decisions about their treatment. They typically address the critical safety information that must be understood to minimize risks associated with the medication. While Black Box Warnings indicate significant risks associated with a medication and Informed Consent refers to a patient's agreement to a medical procedure or treatment after being informed of the risks, they do not specifically require documentation directly tied to the dispensing of a medication like Medication Guides do. Patient Safety Alerts might serve to notify healthcare professionals about new safety information, but they do not pertain specifically to the documentation needed before dispensing a medication to a patient.

**6. What information must be included on a prescription label?**

- A. Manufacturer's name and expiration date**
- B. Patient's name, medication name, dosage, instructions, and pharmacy contact information**
- C. Pharmacist's signature and price of medication**
- D. Insurance provider details and refill history**

The required information on a prescription label is crucial for ensuring the safe and effective use of medications. The inclusion of the patient's name, medication name, dosage, instructions for use, and pharmacy contact information on the label serves several important purposes. Firstly, the patient's name ensures that the medication is correctly dispensed to the right individual, preventing potential medication errors. The medication name clearly identifies what the patient is taking, which is especially important if the patient is on multiple medications. The dosage information is critical as it instructs the patient on the correct amount of the medication to take, which is vital for achieving the desired therapeutic effect while minimizing the risk of adverse effects. Providing clear instructions, such as how often to take the medication and any specific guidelines (like with food or at specific times), further supports proper medication adherence. Additionally, including pharmacy contact information allows patients to reach out with any questions or concerns regarding their prescriptions, enhancing communication and safety. In summary, this combination of information on a prescription label is essential for patient safety, medication adherence, and effective communication between the pharmacy and the patient.

**7. What is the maximum allowed days supply for a Schedule III-V controlled substance prescription?**

- A. 30 days
- B. 60 days
- C. 90 days**
- D. 120 days

The correct answer reflects that Schedule III-V controlled substances can typically be prescribed for a maximum supply of 90 days. This is important for several reasons related to patient safety and regulatory compliance. When prescribing these substances, regulations aim to prevent misuse and potential addiction while ensuring that patients can receive adequate medication for their conditions. Prescribers can give a single prescription for up to 90 days' worth of a Schedule III-V controlled substance, which provides flexibility for managing chronic pain or other ongoing conditions. This longer supply can aid in treatment adherence, as patients are less likely to run out of their medication, reducing the number of pharmacy visits. Furthermore, a 90-day supply aligns with certain state and federal laws, facilitating standardized practices across different jurisdictions. This reduces confusion and promotes a better understanding of regulatory guidelines among healthcare providers, pharmacists, and patients alike. Understanding these nuances is critical for anyone studying pharmacy law or practicing in the pharmacy field.

**8. According to federal law, in most cases, how must a Percocet prescription be issued?**

- A. It can be oral
- B. It must be hand-written or electronically prescribed by the prescriber**
- C. It can be faxed by the prescriber
- D. It must be a verbal order

For a prescription for Percocet, which contains oxycodone, federal law requires it to be issued in a specific manner due to its classification as a Schedule II controlled substance. This designation indicates that the drug has a high potential for abuse and therefore strict regulations govern its prescription. The correct requirement is that a Percocet prescription must be hand-written or electronically prescribed by the prescriber. Handwritten prescriptions need to meet certain criteria, including the prescriber's signature and date. Electronic prescriptions are also acceptable, provided they comply with federal standards for electronic prescriptions for controlled substances (EPCS). These measures help ensure that prescriptions are legitimate and minimize the potential for misuse or illegal activity associated with controlled substances. Other methods, such as oral or verbal orders, are generally not permitted for Schedule II medications due to the increased risk in handling and misuse. While faxing prescriptions can be allowed in specific circumstances (such as prescriptions for nursing home patients), it is not the standard method for issuing prescriptions of this nature. Therefore, only hand-written or electronic prescriptions meet the federal requirements set for Percocet prescriptions.

**9. In what situation is a drug categorized as "non-formulary"?**

- A. When it is a newly approved medication**
- B. When it is not included in the insurance plan's approved list**
- C. When a prescription is missing proper authorization**
- D. When it is a controlled substance requiring special handling**

A drug is categorized as "non-formulary" when it is not included in the insurance plan's approved list. Formulary lists are created by health insurance providers to specify which medications are eligible for coverage under their plans. If a medication is not part of this approved list, it is classified as non-formulary, meaning that patients may have to pay the full cost out-of-pocket or seek prior authorization for coverage, which could affect access to that medication. This classification is significant for both patients and healthcare providers, as it influences treatment choices and insurance reimbursements.

Non-formulary drugs might be available but can incur higher out-of-pocket costs for patients, making them less accessible in practice. Therefore, understanding the concept of formulary versus non-formulary is essential for effective pharmacy practice and patient care.

**10. The TIRF program is specifically for what purpose?**

- A. Inpatient pain management**
- B. Outpatients taking immediate-release fentanyl**
- C. Chronic pain rehabilitation**
- D. Substance abuse treatment**

The TIRF (Transmucosal Immediate-Release Fentanyl) program is designed specifically for patients who are using immediate-release fentanyl formulations for the management of breakthrough pain in cancer patients who are already tolerant to opioid therapy. This program includes strict prescribing guidelines to ensure the safety of patients and to minimize the risk of misuse and abuse. The focus on outpatients taking immediate-release fentanyl highlights the need for careful monitoring and regulation, as these medications can carry a higher risk of addiction and overdose. The TIRF program provides critical requirements for healthcare providers, ensuring that this potent medication is used appropriately and only in the right patient population to manage severe, incidental pain episodes effectively. Understanding the distinction of the TIRF program is important, as it underscores how specific medications are categorized and monitored within pharmacy law to prevent misuse and to provide safe therapeutic options for patients.



## 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://ptcbpharmacylaw.examzify.com>**

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