

Saskatchewan Pharmacy Law JE 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

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- 1. Pharmacists cannot make changes to prescriptions regarding narcotics unless what?**
 - A. They receive informed consent**
 - B. They document the original prescription**
 - C. They notify the original prescriber within 24 hours**
 - D. They have adequate information on the patient's medical history**

- 2. Benzodiazepine and Other Targeted Substances Regulations require which symbol on their labels?**
 - A. N**
 - B. C**
 - C. T/C**
 - D. R**

- 3. In the context of the PSA, what type of control must the pharmacist have over the shelves and displays?**
 - A. Complete and discretionary control**
 - B. Visual and auditory control**
 - C. General and operational control**
 - D. Audio and visual control**

- 4. NAPRA Schedule 1 Drugs require what for purchase?**
 - A. No prescription and public access**
 - B. A pharmacist's intervention only**
 - C. A prescription and have no public access**
 - D. Only a consultation with a pharmacist**

- 5. What type of prescriptions for controlled substances are allowed as a last resort if permitted by Health Canada?**
 - A. Electronic prescriptions**
 - B. Verbal prescriptions**
 - C. Written prescriptions**
 - D. Faxed prescriptions**

- 6. What must all new and renovated community pharmacies include?**
- A. Patient consultation room**
 - B. Storage area**
 - C. Medication compounding area**
 - D. Pharmacy waiting room**
- 7. What is the schedule classification for Diphenhydramine when sold in concentrations of 2% or less in containers of 300 mg or less?**
- A. Schedule 3**
 - B. Schedule 2**
 - C. Unscheduled**
 - D. Schedule 4**
- 8. What is the scheduling for Loratadine in products labelled for children aged 2 to 11 years in package sizes containing no more than 140 mg?**
- A. Schedule 1**
 - B. Schedule 2**
 - C. Schedule 3**
 - D. Unscheduled**
- 9. Diphenhydramine and its salts for topical use in concentrations greater than 2% fall under which schedule?**
- A. Unscheduled**
 - B. Schedule 4**
 - C. Schedule 2**
 - D. Schedule 3**
- 10. For Naproxen preparations that exceed 6,000 mg of naproxen base, what is the classification?**
- A. Schedule 1**
 - B. Schedule 2**
 - C. Schedule 3**
 - D. Unscheduled**

Answers

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

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Explanations

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1. Pharmacists cannot make changes to prescriptions regarding narcotics unless what?
 - A. They receive informed consent
 - B. They document the original prescription
 - C. They notify the original prescriber within 24 hours**
 - D. They have adequate information on the patient's medical history

Pharmacists must notify the original prescriber within 24 hours when making changes to prescriptions regarding narcotics to ensure patient safety and continuity of care. This requirement supports effective communication between healthcare professionals and helps maintain the integrity of the treatment plan initiated by the prescriber. By notifying the prescriber, the pharmacist informs them of the changes made, allowing for a collaborative approach to patient management and minimizing potential risks associated with changes to narcotic prescriptions. This requirement also aligns with regulatory standards that emphasize the importance of maintaining an accurate and comprehensive medication profile for patients. While informed consent, documentation of the original prescription, and having adequate information on the patient's medical history are important factors in pharmacy practice, they do not specifically address the regulatory requirement to notify the prescriber within a defined timeframe when changes are made to narcotic prescriptions.

2. Benzodiazepine and Other Targeted Substances Regulations require which symbol on their labels?
 - A. N
 - B. C
 - C. T/C**
 - D. R

The Benzodiazepine and Other Targeted Substances Regulations require the use of the "T/C" symbol on labels for medications classified under this category. This symbol indicates that the drug is a targeted substance, which is subject to special regulatory control due to potential for misuse, addiction, or other health risks associated with those medications. The T/C designation is crucial for both pharmacists and patients as it serves as a warning and a reminder that the medication has been identified as requiring careful handling and monitoring. Additionally, the T/C symbol helps ensure compliance with the regulations governing the prescription, dispensing, and storage of these substances, aimed at preventing abuse and ensuring they are used safely when necessary for treatment. This system of labeling is part of a broader effort to maintain safe pharmacy practices and protect public health.

3. In the context of the PSA, what type of control must the pharmacist have over the shelves and displays?

- A. Complete and discretionary control**
- B. Visual and auditory control**
- C. General and operational control**
- D. Audio and visual control**

In the context of the Pharmacy Standards Assessment (PSA), the pharmacist must maintain audio and visual control over the shelves and displays. This requirement emphasizes the importance of ensuring that the pharmacy environment is secure and that the pharmacist can monitor activities effectively to prevent medications from being misused or stolen. Audio and visual control means that the pharmacist is responsible for overseeing the area where medications and other pharmacy items are displayed, making sure that they can observe interactions and listen to conversations where necessary. This dual control is vital for ensuring patient safety and the integrity of the pharmacy operations, as it allows the pharmacist to intervene promptly if any suspicious or inappropriate activities occur. While the other options suggest varying degrees of control, they do not fully capture the specific requirements outlined in the PSA for monitoring the pharmacy environment effectively. The emphasis on both auditory and visual aspects underscores the holistic approach to maintaining security and safety in pharmaceutical practices.

4. NAPRA Schedule 1 Drugs require what for purchase?

- A. No prescription and public access**
- B. A pharmacist's intervention only**
- C. A prescription and have no public access**
- D. Only a consultation with a pharmacist**

For NAPRA Schedule 1 Drugs, a prescription is mandatory for purchase, reflecting the regulatory requirement that these medications, which can pose higher risks or be used for serious conditions, must be dispensed under the supervision of a qualified healthcare professional. This ensures that patients receive necessary medical guidance and monitoring while using these drugs. Additionally, this level of control means that these drugs do not have public access in the same way that over-the-counter medications do. The requirement for a prescription helps protect patients by ensuring that any potential risks associated with the drug's use are managed appropriately by a pharmacist or physician.

5. What type of prescriptions for controlled substances are allowed as a last resort if permitted by Health Canada?

- A. Electronic prescriptions**
- B. Verbal prescriptions**
- C. Written prescriptions**
- D. Faxed prescriptions**

Verbal prescriptions for controlled substances can be accepted as a last resort under specific circumstances, as permitted by Health Canada. These situations may arise when a patient requires immediate access to medication and other methods of prescription transmission are unavailable. The allowance for verbal prescriptions, particularly for controlled substances, is typically accompanied by strict regulatory guidelines to ensure patient safety and medication efficacy. It's important to note that while other forms of prescriptions, such as electronic, written, or faxed, are standard methods for prescription transmission, their acceptance may be limited or accompanied by specific security measures depending on the regulations governing controlled substances. For example, electronic prescriptions are increasingly being recognized for their efficiency and security but may not always be accessible in every situation. Written prescriptions are the traditional method and are valid, yet can be less practical in emergency scenarios compared to verbal prescriptions. Faxed prescriptions are also valid but might have restrictions related to controlled substances. In essence, the acceptance of verbal prescriptions for controlled substances as a last resort reflects a flexibility within the regulations to address urgent medical needs when other options are not feasible. This highlights the importance of context in the prescription process, especially concerning controlled substances, ensuring that patient care is prioritized while still maintaining compliance with legal and safety standards.

6. What must all new and renovated community pharmacies include?

- A. Patient consultation room**
- B. Storage area**
- C. Medication compounding area**
- D. Pharmacy waiting room**

All new and renovated community pharmacies are required to include a patient consultation room to ensure privacy and confidentiality for patients when discussing their health concerns or medication regimens. This requirement is aligned with best practices in patient care, emphasizing the importance of providing a dedicated space where pharmacists can engage in meaningful consultations without distractions or breaches of privacy. Having a consultation room not only enhances the patient experience by fostering open communication but also allows pharmacists to provide essential services such as medication reviews, counseling, and health assessments in a private setting. This is crucial in maintaining patient trust and complying with legal standards regarding patient confidentiality and the delivery of professional services in the pharmacy setting. While storage areas, medication compounding areas, and pharmacy waiting rooms may also be important aspects of a pharmacy's layout, the specific requirement for a patient consultation room highlights the profession's focus on patient care and service quality.

7. What is the schedule classification for Diphenhydramine when sold in concentrations of 2% or less in containers of 300 mg or less?

- A. Schedule 3
- B. Schedule 2
- C. Unscheduled**
- D. Schedule 4

Diphenhydramine is classified as an unscheduled substance when sold in concentrations of 2% or less and in containers of 300 mg or less. This means that it can be sold over-the-counter without requiring a prescription or special handling. Unscheduled classifications are typically for medications that have a lower potential for misuse and are considered safe for general retail sale under normal circumstances. This accessibility allows consumers to self-medicate for conditions like allergies or insomnia without needing direct supervision from a healthcare provider. In contrast, higher concentrations or larger container sizes would likely fall under different schedules due to increased risks associated with the use of the drug. For example, higher concentrations of diphenhydramine might be designated as a controlled substance requiring more stringent regulations and possibly a prescription to manage such risks. Understanding these classifications is essential in ensuring appropriate access to medications while balancing safety concerns in pharmacotherapy.

8. What is the scheduling for Loratadine in products labelled for children aged 2 to 11 years in package sizes containing no more than 140 mg?

- A. Schedule 1
- B. Schedule 2
- C. Schedule 3
- D. Unscheduled**

Loratadine, an antihistamine commonly used to relieve allergy symptoms, is classified as unscheduled when it is formulated in products specifically for children ages 2 to 11 years and packaged in sizes containing no more than 140 mg. This classification allows parents or caregivers to purchase these products over-the-counter without a prescription. The unscheduled status is significant because it reflects the safety profile of loratadine when used as directed in pediatric formulations, indicating that it can be safely provided to children in this age group without the need for a healthcare professional's intervention. This accessibility is essential in helping manage common allergy symptoms effectively, promoting easy and safe access to appropriate medications for children. In contrast, other scheduling options such as Schedule 1 or Schedule 2 would typically indicate that a prescription is required, while Schedule 3 might apply to drugs that are available for sale in pharmacies but without a prescription. However, loratadine's profile for children within the specified parameters has led to its classification as unscheduled, reflecting confidence in the product's safety for self-administration in the given demographics.

9. Diphenhydramine and its salts for topical use in concentrations greater than 2% fall under which schedule?

- A. Unscheduled**
- B. Schedule 4**
- C. Schedule 2**
- D. Schedule 3**

Diphenhydramine, commonly known as an antihistamine, is subject to specific regulations based on its concentration and intended use. When it comes to topical preparations, if a formulation contains diphenhydramine in concentrations greater than 2%, it is classified under Schedule 2. This classification is important because Schedule 2 drugs are available without a prescription but are stored in a pharmacy and typically require consultation with a pharmacist before purchase. The rationale behind this regulation is that products with higher concentrations of diphenhydramine can pose a greater risk of adverse effects or misuse, necessitating professional guidance for safe use. In contrast, unscheduled products, Schedule 3, and Schedule 4 classifications have different implications regarding availability and regulation. Unscheduled products can be sold without restrictions from pharmacies or stores, while Schedule 3 products can be sold in non-pharmacy outlets but still require some screening for safety. Schedule 4 drugs, on the other hand, are prescription-only medications. Understanding these classifications helps in ensuring proper patient safety and maintaining appropriate access to medications based on their potential risks.

10. For Naproxen preparations that exceed 6,000 mg of naproxen base, what is the classification?

- A. Schedule 1**
- B. Schedule 2**
- C. Schedule 3**
- D. Unscheduled**

Naproxen preparations that exceed 6,000 mg of naproxen base are classified as Schedule 2 drugs in Saskatchewan. This classification indicates that these higher doses of naproxen are available only through a pharmacist, requiring the medication to be stored behind the counter or in a pharmacy section that is not accessible to the public. This restriction is in place due to the potential for misuse or adverse effects associated with high dosages of naproxen, which is a non-steroidal anti-inflammatory drug (NSAID). Patients must consult with a pharmacist to obtain these preparations, which helps ensure safe usage and monitoring of the drug therapy.

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://saskatchewanpharmlawje.examzify.com>

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

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