

Tennessee Multistate Pharmacy Jurisprudence Examination (MPJE) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	16

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. What is the limit for controlled substances allowed in LTCF floorstock?**
 - A. No more than 20 units of any controlled substance**
 - B. II-IV NMT 40 units; Max 20 units of schedule II; Up to 5 of the 40 units may be liquid**
 - C. Up to 50 units total regardless of scheduling**
 - D. No limitations apply to controlled substances in LTCF**
- 2. How many glove fingertip tests are required before any compounding activity?**
 - A. 1**
 - B. 2**
 - C. 3**
 - D. 4**
- 3. Bioequivalence problems primarily concern which aspect of pharmaceuticals?**
 - A. Stability of the formulation**
 - B. Delivery method**
 - C. Active ingredients**
 - D. Comparative effectiveness**
- 4. What is the timeframe for reporting a conviction of a crime to the Board of Pharmacy?**
 - A. Within 5 days**
 - B. Within 30 days**
 - C. Within 10 days**
 - D. Within 15 days**
- 5. What is required for drug donation forms in charitable pharmacies?**
 - A. Just the recipient's information**
 - B. Drug name only**
 - C. No requirements needed**
 - D. A complete record with drug information**

- 6. Which agencies regulate the advertising of legend drugs and non-prescription medications?**
- A. DEA and DHEC**
 - B. FDA and FTC**
 - C. EPA and OSHA**
 - D. HHS and CDC**
- 7. What is the chart review percentage required for a collaborative practice agreement?**
- A. 2% monthly**
 - B. 5% monthly**
 - C. 10% monthly**
 - D. 15% monthly**
- 8. What is the duration for long-term detoxification?**
- A. Less than 30 days**
 - B. 31 to 180 days**
 - C. Over 180 days**
 - D. 6 months to a year**
- 9. According to automated dispensing rules, what is a requirement regarding lot mixing?**
- A. Mix lots freely**
 - B. No mixing lots**
 - C. Mix once per day**
 - D. Mix lots every hour**
- 10. In Tennessee, how many pharmacists should be represented on the Board of Pharmacy?**
- A. 4 pharmacists**
 - B. 5 pharmacists**
 - C. 6 pharmacists**
 - D. 7 pharmacists**

Answers

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

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Explanations

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1. What is the limit for controlled substances allowed in LTCF floorstock?

A. No more than 20 units of any controlled substance

B. II-IV NMT 40 units; Max 20 units of schedule II; Up to 5 of the 40 units may be liquid

C. Up to 50 units total regardless of scheduling

D. No limitations apply to controlled substances in LTCF

The correct answer is based on the specific regulations regarding controlled substances in Long-Term Care Facilities (LTCFs). In Tennessee, the limits for floor stock of controlled substances are designed to ensure that facilities have sufficient medication while preventing overstocking that could lead to misuse or diversion. This answer specifies that for schedules II to IV, no more than 40 units may be present in total, with a maximum of 20 units specifically for schedule II drugs, and it allows for flexibility with liquid forms, stating that up to 5 of the 40 units can be liquid. This structured approach not only ensures an adequate supply for patient care but also maintains compliance with regulations intended to safeguard controlled substances in a vulnerable setting like LTCFs. The other options do not align with these regulations. For example, the first option limits the quantity too strictly without considering the various schedules and the need for flexibility in medication forms. The option stating "up to 50 units total regardless of scheduling" fails to recognize the specific limits set for different schedules. Lastly, the idea that "no limitations apply" contradicts the fundamental principles of controlled substances management, which include strict oversight and regulatory requirements to prevent abuse.

2. How many glove fingertip tests are required before any compounding activity?

A. 1

B. 2

C. 3

D. 4

Before any compounding activity, the requirement for glove fingertip tests is to perform three tests. This is critical for ensuring that the individual compounding sterile medications demonstrates the ability to maintain a sterile environment. The glove fingertip test evaluates the competency of the compounder in maintaining appropriate aseptic technique, which is an essential aspect of ensuring patient safety. The reasoning behind requiring three tests instead of just one or two is to provide a more reliable assessment of the compounder's consistency in maintaining sterility over multiple trials. By conducting three separate tests, it is possible to more accurately determine if the individual can consistently achieve an acceptable level of sterility, thus minimizing the risk of contamination when preparing compounded sterile products. Establishing a standard for multiple tests reinforces the importance of proper aseptic techniques in a sterile compounding practice, ensuring that all personnel involved are adequately trained and capable of producing safe, sterile medications.

3. Bioequivalence problems primarily concern which aspect of pharmaceuticals?

- A. Stability of the formulation**
- B. Delivery method**
- C. Active ingredients**
- D. Comparative effectiveness**

Bioequivalence primarily concerns the comparative effectiveness of two pharmaceutical products, specifically between a brand-name drug and its generic counterpart. To be considered bioequivalent, the two formulations must show similar pharmacokinetic properties in terms of their absorption, distribution, metabolism, and excretion (ADME) characteristics. This means that they should release the active ingredient at the same rate and to the same extent in the body, which is critical for ensuring that patients receive the same therapeutic effect. Factors like stability of the formulation, delivery method, and the presence of active ingredients can certainly influence the performance of a drug product, but bioequivalence specifically focuses on how similarly the body responds to the drugs being compared. This is essential in determining whether a generic product can be safely substituted for a brand-name product without loss of efficacy or safety, ensuring that patients receive appropriate care.

4. What is the timeframe for reporting a conviction of a crime to the Board of Pharmacy?

- A. Within 5 days**
- B. Within 30 days**
- C. Within 10 days**
- D. Within 15 days**

The correct timeframe for reporting a conviction of a crime to the Board of Pharmacy is within 10 days. This requirement is in place to ensure that the Board stays informed of any legal issues that may affect an individual's ability to practice safely and legally in the pharmacy profession. Timely reporting is crucial as it allows the Board to take appropriate actions as necessary to maintain public safety and uphold the standards of the profession. While other timeframes may seem reasonable, they do not align with the specific regulations set forth by the Board. For example, a 5-day limit would likely not be sufficient for individuals to gather all necessary information and report accurately, whereas 30 days or longer could delay the Board's response and oversight, potentially allowing risks to persist in the practice environment. Adhering to the 10-day requirement demonstrates a commitment to transparency and accountability in the pharmacy field.

5. What is required for drug donation forms in charitable pharmacies?

- A. Just the recipient's information**
- B. Drug name only**
- C. No requirements needed**
- D. A complete record with drug information**

For drug donation forms in charitable pharmacies, a complete record with drug information is required to ensure proper tracking, accountability, and compliance with regulations. This documentation typically includes essential details such as the name of the drug, dosage form, strength, quantity, expiration date, and any specific storage or handling instructions. The comprehensive record is crucial for maintaining the safety and efficacy of the medications provided to patients in need. It helps the pharmacy manage inventory effectively and ensures that only eligible and safe medications are dispensed. Furthermore, having a complete record assists in monitoring any potential recalls or adverse events associated with the donated drugs, thereby protecting the health of the recipients. Other options, such as requiring just the recipient's information or only the drug name, would not provide sufficient detail for the safe operation of a charitable pharmacy. The absence of requirements would compromise the pharmacy's ability to function effectively and safely. Therefore, maintaining detailed records as established by regulations is essential for the integrity of charitable pharmacy operations.

6. Which agencies regulate the advertising of legend drugs and non-prescription medications?

- A. DEA and DHEC**
- B. FDA and FTC**
- C. EPA and OSHA**
- D. HHS and CDC**

The Federal Food and Drug Administration (FDA) and the Federal Trade Commission (FTC) are the primary agencies responsible for regulating the advertising of legend drugs and non-prescription medications. The FDA's authority comes from its mandate to ensure that drugs are safe and effective before they can be marketed, and as part of this role, it oversees the advertising and promotional materials for prescription medications. This includes requiring that promotional claims be truthful, not misleading, and substantiated by evidence. On the other hand, the FTC regulates advertising for non-prescription medications (over-the-counter drugs) by enforcing federal laws against deceptive advertising. This includes monitoring claims made in advertising to ensure they are truthful and supported by scientific evidence. The other options listed involve regulatory bodies that do not focus on drug advertising. The Drug Enforcement Administration (DEA) and the Department of Health and Environmental Control (DHEC) primarily address drug enforcement and public health, respectively, but they do not oversee advertising. The Environmental Protection Agency (EPA) and Occupational Safety and Health Administration (OSHA) are concerned with environmental protection and occupational health and safety, which do not directly pertain to pharmaceutical advertising. Similarly, the Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention

7. What is the chart review percentage required for a collaborative practice agreement?

- A. 2% monthly
- B. 5% monthly**
- C. 10% monthly
- D. 15% monthly

The requirement for a 5% monthly chart review in a collaborative practice agreement is significant because it establishes a benchmark for quality assurance and accountability within the practice. This percentage is designed to ensure that pharmacists are regularly evaluating patient outcomes and the effectiveness of their therapeutic interventions. By reviewing a sample of charts monthly, pharmacists can identify trends, address any issues in patient management, and ensure adherence to established protocols. Regular monitoring at this level allows for timely adjustments to therapy if necessary, ultimately leading to improved patient safety and health outcomes. It fosters a structured approach to collaborative practice, thereby enhancing the role of pharmacists in healthcare teams and ensuring compliance with regulatory standards. Understanding the importance of this requirement underscores the value of systematic evaluation in enhancing patient care and supports the effectiveness of collaborative practices in various healthcare settings.

8. What is the duration for long-term detoxification?

- A. Less than 30 days
- B. 31 to 180 days**
- C. Over 180 days
- D. 6 months to a year

Long-term detoxification typically refers to a specific duration that allows for a structured approach to treatment for individuals dealing with substance use disorders. The standard definition aligns with the time frame of 31 to 180 days, which is often used in the context of treating opioid dependence and other substance use disorders. This period is designed to provide adequate time for individuals to undergo the detoxification process while incorporating therapeutic interventions that support recovery and transition into longer-term treatment methods. It establishes a balance between not being so short that it fails to address withdrawal symptoms and recovery, and not extending indefinitely, which could be impractical and lead to different complications. The other options either present durations that do not align with the defined medical standards for long-term detoxification or exceed what is typically necessary for this phase of treatment. Thus, the choice of 31 to 180 days accurately reflects the established guidelines for long-term detoxification within substance abuse treatment protocols.

9. According to automated dispensing rules, what is a requirement regarding lot mixing?

- A. Mix lots freely**
- B. No mixing lots**
- C. Mix once per day**
- D. Mix lots every hour**

The requirement regarding lot mixing in automated dispensing systems is that no mixing of lots is allowed. This rule is in place to ensure that the integrity and traceability of medications are maintained. Mixing lots can lead to confusion regarding the origin of a product, which is critical for maintaining accurate records and ensuring patient safety. Each lot has its own unique identifiers and quality assurance data that must be preserved to comply with regulatory expectations and maintain a clear audit trail. By prohibiting lot mixing, regulations aim to reduce the risk of medication errors, such as administering medications from different lots that may have variations in potency, efficacy, or safety profiles. This strict guideline emphasizes the importance of discipline and precision in the handling and dispensing of medications, particularly where automated systems are involved, as they rely on specific lot numbers for tracking and accountability.

10. In Tennessee, how many pharmacists should be represented on the Board of Pharmacy?

- A. 4 pharmacists**
- B. 5 pharmacists**
- C. 6 pharmacists**
- D. 7 pharmacists**

In Tennessee, the Board of Pharmacy is constituted to include six pharmacists. This composition reflects the need for diverse professional representation to effectively govern pharmacy practice within the state. By having six pharmacists on the board, the state's pharmacy regulations can benefit from a wide array of experiences and perspectives, ensuring that the interests of both the profession and public health are adequately addressed. The members of the Board are appointed with the aim of maintaining professional integrity and compliance with pharmacy laws, contributing to legislative oversight and professional standards. By understanding this structure, one can appreciate how crucial it is for boards to be composed of members who are actively engaged in and knowledgeable about current pharmacy practices. The options indicating numbers of pharmacists other than six do not align with Tennessee's specific regulatory framework governing the Board of Pharmacy. It's important to recognize these structures as they guide effective governance and compliance with state pharmacy laws.

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://tennesseempje.examzify.com>

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