

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

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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. Are prescribers in Virginia required to check the Prescription Monitoring Program (PMP) for specific prescriptions?**
 - A. Only for narcotics
 - B. Yes, for all prescriptions
 - C. Yes, for new prescriptions of BZDs and opiates lasting more than 90 days
 - D. No, it is optional
- 2. What must be sent with a faxed prescription if it originates from a nursing facility?**
 - A. Full details of the patient's medical history
 - B. Your pharmacy's fax number
 - C. A written Rx must be delivered within 7 days
 - D. A verbal confirmation from the prescriber
- 3. Does Virginia treat refills on Schedule V medications differently than refills on non-controlled medications?**
 - A. Yes
 - B. No
 - C. Only for certain medications
 - D. Dependent on the prescriber
- 4. How must a pharmacist document an emergency oral prescription for a CII medication?**
 - A. Write it down immediately and file it
 - B. Record necessary details including prescriber name
 - C. Ask the prescriber to send an email confirmation
 - D. Only record the medication name
- 5. Which of the following is NOT required information for a receiving pharmacy when processing a transferred prescription?**
 - A. Original prescription number
 - B. Date of last dispensing
 - C. Name of transferring pharmacy
 - D. Patient's medication history

- 6. How many medications can typically be included on a single prescription form?**
- A. One medication for every prescriber
 - B. Two medications
 - C. Three medications
 - D. General rule is one med, with specific exceptions
- 7. What legal requirement is there for prescriptions written by medical interns or residents?**
- A. They must have a supervising physician's DEA number on all prescriptions
 - B. Interns/residents must write all prescriptions in ink
 - C. Prescriptions must include the intern/resident's printed name, address, and phone number
 - D. Interns/residents are not allowed to write prescriptions
- 8. Does the controlled substance cabinet need to be locked while a pharmacist is present?**
- A. Yes, it must always be locked
 - B. No, it does not need to be locked
 - C. Only during non-working hours
 - D. If the pharmacist is away from the area
- 9. What is required by pharmacies for SLCP sales reporting unless an exemption is granted?**
- A. Manual recordkeeping and reporting
 - B. Use of an electronic recordkeeping and monitoring system
 - C. Weekly handwritten reports to the DEA
 - D. No reporting is necessary for over-the-counter sales
- 10. What is stipulation regarding postdating prescriptions?**
- A. Postdating is legal under certain conditions
 - B. Postdating is not allowed and is illegal
 - C. Only for non-controlled substances
 - D. Only if approved by a supervisor

Answers

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

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Explanations

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1. Are prescribers in Virginia required to check the Prescription Monitoring Program (PMP) for specific prescriptions?

- A. Only for narcotics
- B. Yes, for all prescriptions
- C. Yes, for new prescriptions of BZDs and opiates lasting more than 90 days**
- D. No, it is optional

In Virginia, prescribers are mandated to consult the Prescription Monitoring Program (PMP) specifically for new prescriptions of benzodiazepines and opioids that are intended to last longer than a 90-day supply. This requirement is part of measures developed to combat opioid misuse and to ensure that patients are not being prescribed excessive or overlapping amounts of these substances from multiple providers. By reviewing the PMP, prescribers can access vital information regarding a patient's prescription history, thereby promoting safer prescribing practices and helping to identify potential cases of abuse or dependence. This approach reflects a targeted effort to monitor the prescribing of high-risk medications rather than an obligation to check the PMP for all prescriptions or solely for narcotics. It balances the need for provider discretion in other scenarios while focusing scrutiny on categories of medications that have been associated with higher risks of misuse. Additionally, stating that checking the PMP is optional would contradict Virginia's established regulations aimed at safeguarding public health.

2. What must be sent with a faxed prescription if it originates from a nursing facility?

- A. Full details of the patient's medical history
- B. Your pharmacy's fax number
- C. A written Rx must be delivered within 7 days**
- D. A verbal confirmation from the prescriber

When a prescription is faxed from a nursing facility, there are specific requirements that must be met to ensure compliance with regulations regarding prescription validity. One key requirement is that a hard copy of the prescription must be delivered to the pharmacy within a specified timeframe, which is typically within 7 days. This requirement serves as a safeguard to ensure that the prescription is legitimate and that the prescriber's intent is documented properly. The reason this is essential is tied to the regulatory framework that governs prescriptions, especially in nursing facilities where there may be a higher risk of miscommunication or misrepresentation. Requiring a written prescription to follow up a fax helps maintain accurate records and supports accountability among healthcare providers. In contrast, the other options do not fulfill the crucial regulatory requirements associated with faxed prescriptions. For instance, full details of the patient's medical history or a verbal confirmation from the prescriber are not necessary for validation of the prescription itself, and while having the pharmacy's fax number is useful, it does not serve as a regulatory requirement tying back to the legality of the prescription. Therefore, the necessity of a written Rx to be delivered within 7 days ensures a higher standard of prescription integrity and patient safety in nursing facilities.

3. Does Virginia treat refills on Schedule V medications differently than refills on non-controlled medications?

- A. Yes
- B. No**
- C. Only for certain medications
- D. Dependent on the prescriber

In Virginia, Schedule V medications are indeed treated the same way as non-controlled medications concerning refills. This means that there are no specific limitations placed on refills of Schedule V medications beyond the general rules that apply to all prescription medications, such as ensuring that the prescription is valid and authorized by a licensed prescriber. Non-controlled medications also follow standard refill regulations, which typically allow them to be refilled as prescribed by the doctor and according to the pharmacy's policies. Both types of medications can have refills as long as they adhere to the guidelines set forth in the Virginia Pharmacy laws and regulations, providing a streamlined approach to pharmacy practice. By clarifying this standard practice, it is evident that any specific conditions or restrictions on refills for Schedule V medications do not apply, making them comparable to non-controlled substances regarding refill protocols. Thus, the answer indicates that there is no distinction in treatment between these two categories when it comes to refills in the state of Virginia.

4. How must a pharmacist document an emergency oral prescription for a CII medication?

- A. Write it down immediately and file it
- B. Record necessary details including prescriber name**
- C. Ask the prescriber to send an email confirmation
- D. Only record the medication name

To properly document an emergency oral prescription for a CII medication, it is essential for the pharmacist to record the necessary details, which includes the prescriber's name, the patient's information, the medication prescribed, the dosage, and the quantity. This thorough documentation is critical not only for confirming that the prescription meets legal requirements but also for ensuring patient safety and tracking medication use. In emergency situations, regulations allow for oral prescriptions for CII medications, but the pharmacist must subsequently document all pertinent details to create a complete and accurate record. This serves multiple purposes: it complies with state and federal laws, facilitates proper medication management, and aids in preventing any potential abuse or errors in medication dispensing. While other options might seem plausible, they do not fulfill the legal and safety requirements outlined for handling emergency oral prescriptions for controlled substances. Recording only the medication name or relying on an unverified email confirmation would not provide the necessary accountability and traceability that documentation demands in these situations.

5. Which of the following is NOT required information for a receiving pharmacy when processing a transferred prescription?

- A. Original prescription number
- B. Date of last dispensing
- C. Name of transferring pharmacy

D. Patient's medication history

The correct answer is that the patient's medication history is not required information for a receiving pharmacy when processing a transferred prescription. In the context of transferring prescriptions between pharmacies, specific information must be communicated to ensure the continuity and safety of patient care. The original prescription number is necessary for traceability and to identify the specific prescription being transferred. The date of last dispensing is also crucial as it provides insight into when the medication was last provided to the patient, which can affect adherence and medication management. Additionally, knowing the name of the transferring pharmacy is essential to verify the source of the prescription and ensures proper record-keeping and accountability. While a patient's medication history is important for overall patient safety and care, it is not a mandatory piece of information required during the prescription transfer process. The focus during a transfer primarily revolves around the prescription details rather than a comprehensive medication profile, which is usually managed through a separate part of the patient's healthcare record. This distinction emphasizes the transactional nature of transferring a specific prescription rather than a full clinical review.

6. How many medications can typically be included on a single prescription form?

- A. One medication for every prescriber
- B. Two medications
- C. Three medications

D. General rule is one med, with specific exceptions

The general rule that typically applies is that a single prescription form should contain only one medication, although there are specific exceptions where multiple prescriptions may be allowed. This practice helps to avoid confusion and ensures clarity for both the pharmacist and the patient. Keeping to one medication per prescription minimizes the risk of errors in dispensing and enhances safety in medication management. In certain circumstances, providers may write prescriptions for more than one medication – such as when they utilize a combined form for controlled substances in a particular context or for specific clinical situations. However, this is not the norm and specific guidelines should always be followed. Recognizing the importance of proper prescribing practices, regulations generally emphasize single medication prescriptions to yield a clear record for both treatment and legal purposes. Focusing on one medication also aligns with best practice standards in pharmacy, which aim to optimize patient safety and medication adherence.

7. What legal requirement is there for prescriptions written by medical interns or residents?

- A. They must have a supervising physician's DEA number on all prescriptions
- B. Interns/residents must write all prescriptions in ink
- C. Prescriptions must include the intern/resident's printed name, address, and phone number**
- D. Interns/residents are not allowed to write prescriptions

The legal requirement for prescriptions written by medical interns or residents is that the prescriptions must include the intern or resident's printed name, address, and phone number. This requirement is in place to ensure proper identification and accountability in the prescribing process. Including this information helps pharmacists verify the identity of the prescriber and allows for easier communication regarding the prescription, if needed. This practice is crucial for maintaining the integrity of the prescribing system, enabling clear identification of who is writing the prescription and providing essential contact details should further clarification or follow-up be necessary. This transparency aids in ensuring patient safety and fostering effective collaboration between healthcare providers. The other potential requirements noted in the options do not hold up in the context of pharmacy regulations. For instance, while it may be a good practice for any prescriber to document their supervising physician's DEA number for drug enforcement compliance, this is not explicitly required in all jurisdictions. Also, writing prescriptions in ink may not be mandated, as many facilities permit electronic prescriptions. Lastly, the idea that interns and residents are not allowed to write prescriptions is inaccurate; they are authorized to prescribe under the supervision of licensed physicians. Thus, having the intern's or resident's printed name, address, and phone number on the prescription is necessary for fulfilling legal

8. Does the controlled substance cabinet need to be locked while a pharmacist is present?

- A. Yes, it must always be locked
- B. No, it does not need to be locked**
- C. Only during non-working hours
- D. If the pharmacist is away from the area

The requirement for a controlled substance cabinet to be locked when a pharmacist is present is often guided by regulatory standards aimed at ensuring security and preventing unauthorized access to controlled substances. In many jurisdictions, including Virginia, the law allows for the cabinet to be left unlocked if a pharmacist is present and has direct supervision over its contents. This flexibility recognizes that having the cabinet locked while a pharmacist is on duty may hinder efficiency in providing patient care and dispensing medications. However, it is generally required that controlled substances should be secured when there is no pharmacy staff present or when a pharmacist leaves the area. This ensures that there are safeguards in place to prevent misuse or diversion of these substances. Thus, under normal operational conditions where a pharmacist is actively supervising, there is no necessity for the cabinet to be locked at all times, making the statement that it does not need to be locked the accurate understanding of the regulation. Understanding this aspect of pharmacy law is critical for ensuring compliance with state regulations while maintaining operational efficiency in the pharmacy setting.

9. What is required by pharmacies for SLCP sales reporting unless an exemption is granted?

- A. Manual recordkeeping and reporting
- B. Use of an electronic recordkeeping and monitoring system**
- C. Weekly handwritten reports to the DEA
- D. No reporting is necessary for over-the-counter sales

Pharmacies are required to use an electronic recordkeeping and monitoring system for the reporting of sales of Scheduled Listed Chemical Products (SLCPs), unless an exemption is granted. This requirement is part of the legislative efforts to prevent the misuse of substances that can be converted into illicit drugs, particularly certain over-the-counter medications containing pseudoephedrine and other similar products. Utilizing an electronic system allows for more accurate and efficient tracking of sales, enhancing the ability to monitor and prevent potential abuse. The integration of electronic recordkeeping also facilitates timely reporting to relevant authorities, including the Drug Enforcement Administration (DEA), ensuring compliance with federal regulations. In contrast, manual recordkeeping and reporting would not meet the efficiency and accuracy standards required for such monitoring, while weekly handwritten reports, though they could provide some level of tracking, would not be as effective as an electronic system in real time. Lastly, the assertion that no reporting is necessary for over-the-counter sales does not hold true under current regulations, as SLCPs have specific reporting requirements aimed at curbing their potential for illegal use. Therefore, the emphasis on an electronic recordkeeping and monitoring system signifies a critical component of the regulatory framework designed to mitigate the risks associated with SLCPs while maintaining accurate data

10. What is stipulation regarding postdating prescriptions?

- A. Postdating is legal under certain conditions
- B. Postdating is not allowed and is illegal**
- C. Only for non-controlled substances
- D. Only if approved by a supervisor

Postdating prescriptions pertains to the legal and regulatory framework surrounding the practice of pharmacy. In the context of Virginia and generally across many jurisdictions, postdating prescriptions is not permissible. This is due to the potential for misuse and the concern that it could facilitate the diversion of medications or compromise the integrity of the prescription process. A prescription is intended to be filled as a reflection of the patient's immediate medical needs, and allowing prescriptions to be dated in the future could disrupt the proper management of medications and create safety issues. The prohibition on postdating applies universally to both controlled substances and non-controlled substances. Regulations are designed to ensure that pharmacists are dispensing medications based on current therapeutic needs, which aligns with patient safety and the ethical practice of pharmacy. This is a key aspect of maintaining public trust in the pharmaceutical system, ensuring that medications are handled with the utmost responsibility. Understanding this stipulation is crucial for anyone preparing for the MPJE, as it reflects a fundamental aspect of pharmacy law that governs prescription practices.

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:

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

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