PTCB

PTCE

Pharmacy Technician Certification Exam (PTCE)

Latest Version: 8.2

Question: 1

The ingredients of 1 kg of a bulk laxative are:
Psyllium:500 g
Dextrose:497.5 g
Citric acid:1 g
Sodium bicarbonate:1 g
Flavoring:0.5 g
What is the percentage ofpsylliumin the final preparation?

A. 2.5%
B. 5%
C. 25%
D. 50%

Answer: D

Explanation:
Comprehensive and Detailed Step-by-Step Explanation:
To calculate the percentage ofpsylliumin the final preparation:
Formula:

$$\text{Percentage} = \left(\frac{\text{Amount of Psyllium}}{\text{Total weight}}\right) \times 100$$

$$= \left(\frac{500g}{1000g}\right) \times 100 = 50\%$$

A math equations with numbers and symbols Description automatically generated with medium confidence
Sincepsylliummakes up500 gout of1000 g (1 kg)of the bulk laxative, it accounts for50%of the total formulation.
Reference:
USP <795>Compounding Standards
PTCE ExamPharmaceutical Calculations

Question: 2

Levetiracetam is a(n):

A. Antibiotic
B. Antihyperglycemic
C. Anticonvulsant
D. Antihypertensive

Answer: C

Explanation:
Comprehensive and Detailed Step-by-Step Explanation:
Levetiracetam (Keppra)is classified as ananticonvulsantused to treatseizures (epilepsy).It works by stabilizing electrical activity in the brain.
Explanation of Answer Choices:C. Anticonvulsant→Correct. Levetiracetam is indicated forpartialonset, myoclonic, and tonic-clonic seizures.A. Antibiotic→ Incorrect. Levetiracetam does not treat bacterial infections.B. Antihyperglycemic→ Incorrect. Antihyperglycemics lowerblood sugar(e.g., metformin, glipizide).D. Antihypertensive→ Incorrect. Antihypertensives lowerblood pressure(e.g., amlodipine, lisinopril).
Reference:
PTCB Exam: Pharmacology for Technicians
FDA Approved Drug Database (Levetiracetam)

Question: 3

Behind-the-counter decongestant products containingpseudoephedrinemust be used with caution in patients with:

A. Asthma
B. Hypertension
C. Hypokalemia
D. Eczema

Answer: B

Explanation:
Comprehensive and Detailed Step-by-Step Explanation:
Pseudoephedrine(Sudafed) is asympathomimetic decongestantthat causesvasoconstrictionand canincrease blood pressure.
Explanation of Answer Choices:B. Hypertension→Correct.Pseudoephedrinecan cause arise in blood pressure, so it should be used cautiously in patients withhypertension.A. Asthma→ Incorrect.Pseudoephedrine does not directly worsen asthma, but it may cause mild bronchodilation.C. Hypokalemia→ Incorrect.Pseudoephedrine does not affect potassium levels.D. Eczema→ Incorrect. Eczema is unrelated topseudoephedrine use.
Reference:
Combat Methamphetamine Epidemic Act (CMEA) Regulations
American Heart Association (AHA) Guidelines on Hypertension

Question: 4

Due to an increased risk of hepatotoxicity, patients on acetaminophen should use caution when consuming:

A. Citrus fruits
B. Leafy greens
C. Dairy products
D. Alcoholic beverages

Answer: D

Explanation:
Comprehensive and Detailed Step-by-Step Explanation:
Acetaminophen (Tylenol)is metabolized by theliver.Excessive doses or concurrentalcohol useincreases the risk ofliver damage (hepatotoxicity).
Explanation of Answer Choices:D. Alcoholic beverages→Correct. Alcohol and acetaminophen together can causesevere liver damage.A. Citrus fruits→ Incorrect. Citrus does not interfere withacetaminophen metabolism.B. Leafy greens→ Incorrect. Leafy greens affectwarfarin, notacetaminophen.C. Dairy products→ Incorrect. Dairy does not interact withacetaminophen.
Reference:
FDA Acetaminophen Warnings
PTCB Medication Safety Guidelines

Question: 5

A prescription reads:
Famotidine 40 mg/5 mL
Quantity: 50 mL
Sig: 0.4 mL PO t.i.d.
What amount of medication, in mg, is given each day?

A. 1.2 mg
B. 3.2 mg
C. 6.4 mg
D. 9.6 mg

Answer: C

Explanation:
Comprehensive and Detailed Step-by-Step Explanation:

Step 1: Determine **mg per mL**

$$40\ \text{mg}/5\ \text{mL} = 8\ \text{mg/mL}$$

Step 2: Calculate **mg per dose**

$$0.4\ \text{mL} \times 8\ \text{mg/mL} = 3.2\ \text{mg}$$

Step 3: Multiply by **3 doses per day**

$$3.2\ \text{mg} \times 3 = 9.6\ \text{mg/day}$$

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Reference:
PTCB Exam: Pharmaceutical Calculations
USP <795> Dosing Conversions

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