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Diabetes Education SERVICES

Diabetes Education SERVICES 15 years

Preparing for BC-ADM
Board Certification in Advanced Diabetes Management - 2018

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President, Diabetes Education Services
www.DiabetesEd.net

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Topics

- ▶ Qualifications to take the exam
- ▶ Applying for exam
- ▶ Exam content
- ▶ Study strategies
- ▶ Test taking tips
- ▶ Resources



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Professional Qualifications to take BC-ADM- excerpted from AADE

Eligibility Criteria	Registered Nurse	Registered Dietitian	Pharmacist	Physician Assistant	Physician
Licenses/Registration	Current, active RN license	Current, active dietitian registration	Current, active pharmacist registration/licensure	Current active physician assistant license	Current active MD/DO license
Advanced Degree	Master's or higher degree in a relevant clinical, educational, or management	Master's or higher degree in a relevant clinical, educational, or management	Master's or higher degree in a relevant clinical, educational, or management PharmD	Master's or higher degree in a relevant clinical, educational, or management	MD/DO
Experience	500 clinical practice hours within 48 months prior to taking certification examination. (Clinical hours must be after relevant licensure and advanced degree has been obtained.)				

Why Take the BC-ADM Exam?



- ▶ Validates a healthcare professional's specialized knowledge and expertise in the management of people with diabetes.
- ▶ May provide future opportunities to work more independently and be reimbursed for advanced level care?



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Role of BC-ADM

Skillfully manages complex patient needs and assists patients with therapeutic problem-solving.

Within their scope of practice, the BC-ADM:

- ▶ Adjust medications,
- ▶ Treat & monitor acute & chronic complications
- ▶ Counsel patients on lifestyle modifications
- ▶ Address psychosocial issues,
- ▶ Participate in research and mentoring.



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CDE Vs BC - ADM

CDE

- ▶ Supports and educates people affected by prediabetes and diabetes to understand and self-manage
- ▶ Individualize behavior and treatment goals to optimize health outcomes.

BC-ADM

- ▶ Must have Master's
- ▶ Management of diabetes and comorbidities
- ▶ Increased complexity of decision making



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Bev's Perspective

- ▶ First took exam in 2001 (before kids)
- ▶ Strong background in inpt management
- ▶ Passed test – but opened another professional door – expanded my perspective, encouraged learning
- ▶ Created Critical Assessment Course as result
- ▶ Member of ANCC team, provided “Review Course”
- ▶ Retook exam in 2006
- ▶ Renewed by completing a bunch of stuff - 2011
- ▶ Declined to participate in committee to update exam in 2011 (although I really wanted to)
- ▶ Renewed again in 2016



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Board Certification –Advanced Diabetes Management (BC-ADM) Description

- ▶ “The depth of knowledge and competence in advanced clinical practice and diabetes skills affords an increased complexity of decision making which contributes to better patient care.”



• Excerpted from AADE website



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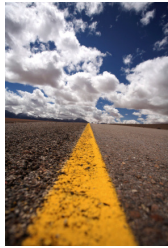
Current Role

- ▶ Diabetes Program Manager
 - Inpatient diabetes management
 - ADA Recognized Outpt Program
 - Outcome Measurement
 - Training of Staff
 - Policies and Procedures
 - Medication Adjustment Suggestion
 - Teach Classes
 - Write articles



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Becoming a BC-ADM



..provides opportunities for health care professionals to expand their roles beyond traditional boundaries and to demonstrate their effectiveness in performing at an advanced level of practice

Anne Daly, MS, RD, BC-ADM, CDE
ADVANCED Practice in Diabetes Care *Diabetes Spectrum* January 2003 vol. 16 no. 1 24-26



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2018 – Qualifications

- ▶ Clinical licensure plus advanced degree as outlined
- AND
- ▶ 500 clinical practice hours in *advanced diabetes management* within 48 months prior to taking the exam



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Your questions



- ▶ For the 500 hours, what is considered advanced diabetes management?
- ▶ How do you document your hours?
- ▶ As a CDE, how will this expand my role?
- ▶ Is the AADE version of the BC-ADM Exam is very much like the CDE Exam?



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Advanced Level Activities of BC-ADM

- ▶ Patient management skills such as
 - ▶ medication adjustment,
 - ▶ medical nutrition therapy,
 - ▶ exercise planning,
 - ▶ counseling for behavior management and psychosocial issues.
- ▶ Attaining optimal metabolic control in the diabetic client may include treatment and monitoring of acute and chronic complications.
- ▶ Research and mentoring



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Application Process

- Complete app 60 days prior to desired testing month
- ▶ Window to apply for Summer
 - ▶ May 1- Take test in June
- ▶ Window to apply for Winter
 - ▶ November 1- Take test in December
- ▶ Once you receive confirmation of eligibility
 - ▶ schedule an appointment to take the examination on a first-come, first-served basis through Castle's online scheduling system

Application Received By:	Application (Including \$50 Late Fee) Received By:	Testing Window:
May 1	May 15	June
November 1	November 15	December



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Applying to take the BC-ADM Exam



You need to register with Castle Approved Testing Centers

- ▶ at www.castleworldwide.com/aade
- ▶ Apply online
- ▶ Applications accepted on a continual basis
- ▶ A percentage of candidates will be audited to ensure compliance with eligibility criteria.



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What application materials do I need to submit?



- ▶ Completed application including
 - ▶ Proof of Licensure
 - ▶ Documentation of 500 Advanced Practice Clinical Hours
 - ▶ Diploma of Master's level (or higher)
 - ▶ Payment
 - ▶ AADE Members = \$600
 - ▶ Non AADE Members = \$900
 - ▶ Recertification \$500 / \$800



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Renewal

Recertification Requirements

Professional Development *plus* Practice Hours:

- Hold a current, active RN, RD, RPh, PA, or MD/DO license in a state or territory of the U.S. or the professional, legally-recognized equivalent in another country;
- Hold a current BC-ADM certification;
- Complete the professional development requirements for your certification specialty (must be completed within the five (5) years preceding your renewal application submission);
- Complete a minimum of 1,000 practice hours in your certification role and population/specialty (must be completed within the five (5) years preceding your renewal application submission); and
- Pay the renewal fee.

Recertification Fees

- \$500.00 - AADE members
- \$800.00 - Non AADE members



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Overview of BC-ADM Exam

- ▶ Composed of 175 multiple-choice, objective questions.
- ▶ Total testing time of four (3.5) hours.
- ▶ Results will be mailed within 6-8 weeks after the close of the testing window
- ▶ Can retake test for fee 2xs in yr
- ▶ Questions? –
 - ▶ AADE (919) 572-6880 or website



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Exam Details

- ▶ 25 of the 175 questions are pretest questions and are **not** counted in the determination of individual examination scores.
- ▶ Candidates score is based solely on the 150 scored questions



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201 Questions – Test Taking Toolkit

- ▶ **201 Question CDE® Practice Exams**
- ▶ Includes **newly** constructed multiple choice test questions written by Coach Beverly are inspired by the American Diabetes Standards of Care.
- ▶ Designed to test your knowledge of the 14 Critical Content areas and help prepare you for the Exam.



\$49.00 – Includes 201 Questions plus Test Taking Tips Online Course



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BC-ADM Exam Content - 2018

Exam Blue Print

(Complete exam outline can be found in the [Candidate Handbook](#))

Category	Domains of Practice	No. of Questions	Percent
I	Assessment and Diagnosis	47	31%
II	Planning and Intervention	48	32%
III	Evaluation and Follow-up	37	25%
IV	Leadership and Advanced Professional Practice	18	12%
	Total	150	100%



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I - Assessment & Diagnosis – 47 questions

Subdomains listed below

- ▶ Therapeutic interviews – 4
- ▶ History, physical exam across lifespan – 6
- ▶ Physiology and pathophysiology relating to prediabetes, diabetes and comorbidities – 5
- ▶ Self-care behavior, mental health assessment – 5
- ▶ Health care resource assessment - 3
- ▶ Standards of diabetes care – AADE /AACE – 5
- ▶ Analysis of complex data sets – 5
- ▶ Screening and diagnostic criteria – 4
- ▶ Synthesis of information from test/assess – 6
- ▶ Differential diagnosis/ problem list – 4



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II. Planning and Intervention - 48

- ▶ Standards of Care re: intervention – 8
- ▶ MNT and Exercise prescription – 7
- ▶ Pharmacologic therapy – 10
- ▶ Surgical Options for DM Management – 4
- ▶ Technology Options (Pump, CGM, etc) – 7
- ▶ Individualization/ Priority of Care – 7
- ▶ Collaboration, Referral and Coordination - 5



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Medication PocketCards




AADE has 53 question practice test with answers and rationale
DiabetesEducator.org

AADE White Paper on Continuous Subcutaneous Insulin Therapy – This paper outlines the topics that should be covered by diabetes educators when teaching patients and families or significant others about insulin pump therapy.

Cholesterol Medications 2016


Antihypertensive Meds 2016

Neuropathy Medications and Treatment Algorithm




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Evaluation and Follow-Up - 37



- ▶ AADE 7 Self-Care and Goal Setting – 6
- ▶ Standards of Care AADE, ADA – 8
- ▶ Outcome and treatment results – 8
- ▶ Goal Achievement (SMART) – 7
- ▶ Plan Modification – 8



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Leadership and Professional Practice -18

- ▶ Regulatory, accreditation/recognition disease management, reimbursement and standards - 5
- ▶ Program development and CQI – 3
- ▶ National Health Initiatives, Prevention and Public Health
- ▶ Scholarship (research, dissemination, mentoring) – 4
- ▶ Community Programs / Outreach -4



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Your questions

- ▶ What standards are used? ADA, AACE and from which year?
- ▶ What are the most important study tools?
 - ▶ ADA and AACE Stds / Clinical Guidelines
 - ▶ Nurses Complete Guide to Diabetes Care
 - ▶ Level 4 Online Courses – Special Pops
- ▶ What is best source of info on newer diabetes medications?
- ▶ Passing score?
- ▶ Passing rate? ~ 75%

The AADE BC-ADM uses the following scale:

	Minimum Score	Maximum Score	Passing Score
BC-ADM	200	500	350



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Level 4 Online Courses – DiabetesEd.net

Level 4 – Online course for the Advanced Diabetes Professional

Learn from the comfort of your own computer, earn CE's and expand your diabetes knowledge base.

These courses are specifically geared toward Advanced Practice and experienced health care professionals who provide high-level diabetes management and care. This fast paced content is designed to build on previous significant diabetes management experience and for those considering becoming Board Certified in Advanced Diabetes Management (BC-ADM). Our online programs are accredited by the National Commission on Dietetic Registration (CDR), which mean all hours earned can be applied to your CDE. If you need hours to apply for or renew your topics included in Level 4 Bundle:



CDER Exam Prep Toolkit

\$49.00

Quantity: 1

ADD TO CART

DIABETES EDUCATION SERVICES

Site: CDER Prep Exam Toolkit



Heart Horizons – Getting to the Gut, Meet Your Microbiome, 1.0 CE – Individual price \$29.00
Expand your view of how billions of bacterial inhabitants profoundly influence our health. We will discuss how the environment and our medical practices have impacted our gut bacteria over time and strategies we can take to protect these old friends.

Critical Assessment of the Diabetes Patient, 1.7 CE – Individual price \$29.00
Through case studies and real-life situations, we discover often hidden causes of hyperglycemia and other complications, such as liver disease. We delve into insulin therapy for complicated patient situations and discuss management strategies for other conditions associated with hyperglycemia such as Cystic Fibrosis, Cancer and Transplants.

Basal Bolus Therapy in Hospital, 2.0 CE – Individual price \$29.00
Provides participants with a step-by-step approach to safely and effectively implement Basal Bolus Insulin Therapy in the inpatient setting. We discuss appropriate insulin dosing based on the patient's clinical presentation and apply dosing strategies to a variety of case studies.

Cancer and Diabetes, 1.8 CE – Individual price \$29.00
Patients with cancer often experience hyperglycemia secondary to treatment, which can increase risk of infection and compromise their nutritional status. In addition, recent research has identified the link between diabetes and cancer. Join us to learn more about this unexpected link and treatment strategies for distant-induced hyperglycemia using a case study approach.

Other Clinical Books that will Help
www.DiabetesEd.net



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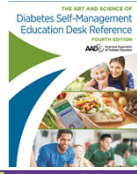
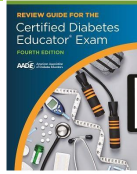
AADE – The Art and Science and Review Guide

New 4 Ed Review Guide 2017 - \$89
 Includes 450 questions

- ▶ 2 practice exams w/ rationale
- ▶ Test taking tips
- ▶ Self-Assessment

Art and Science – 2017 - \$229

Both Books Only \$289



DiabetesEd.net>Books and Study

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Diabetes Ed Course – Earn 32 CES



- ▶ 21 CEs for the Live Seminar plus
- ▶ 10 Bonus Online Courses, Earn 11.0 CEs – we include the content that *best* helps you succeed at the CDE® Exam and clinical practice.
- ▶ Plus 100+ page syllabus, healthy breakfast all days, gourmet lunches, CE certificates and a fun and engaging learning environment.
- ▶ Course fee of \$599



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CDE
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Preparing for
CDE Exam
WEBCAST
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- ▶ Designed to help you pass the CDE® Exam.
- ▶ On Demand and ready for you!
- ▶ Series of 8 Courses – Join live or listen later
- ▶ New Series starts July 12, 2018

DiabetesEdUniversity.com *Diabetes Education SERVICES*

Recommended Articles and Books (as excerpted from BC-ADM Exam handbook)

ADA Standards of Care PDF 2018 - This yearly publication by the American Diabetes Association outlines the goals of care for diabetes management. Since it is evidence based, it includes a useful summary of the trials and research that the goals are based on. A must read if you are entering the diabetes field or preparing to take the CDE® or BC-ADM Exam.

ADA Primary Care Abridged Standards Of Care 2018 - A summary of key points and updates in the yearly publication by the American Diabetes Association.

Summary of Revisions for ADA Standards of Care 2018 - A very brief (2 page) summary of changes.

Screening and Diagnosis of Diabetes Mellitus 2018 - One page cheat sheet that summarizes screening, risk status and diagnostic criteria for diabetes.

Pharmacologic Approaches to Glucose Control - A comprehensive review of the latest evidence to achieve glucose control for both Type 1 and Type 2 Diabetes Mellitus.

Cardiovascular Disease Management - A comprehensive review of the latest evidence to manage cardiovascular disease in individuals with diabetes.

AACE Comprehensive Diabetes Management by an American Association of Certified Diabetes Educators (AACE) publication. Encourages a comprehensive approach to diabetes management.

AACE – CLINICAL PRACTICE GUIDELINE 2017 - A comprehensive care plan for people with diabetes. Developed by Endocrinologists and American Association of Certified Diabetes Educators (AACE).

2017 National Standards for Diabetes Self-Management Education and Support - The American Diabetes Association and Diabetes Education Services International (DESI) have developed these standards, considering the certification process for Diabetes Educators.

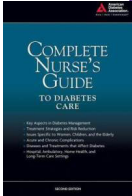
Diabetes Educators Working with Patients - Diabetes Educators play a pivotal role in providing education to individuals with type 1 diabetes. The need for education and support continues throughout the course of life with diabetes. Educators can help individuals with diabetes achieve better health outcomes.



DiabetesEd.net

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Resources – DiabetesEd.net



[Nurses Guide to Diabetes Care, 2nd edition - Book](#) (2009). Childs, B. (editor). An excellent reference for all health care professionals providing advanced level diabetes care and treatment. Great Study tool

[BC-ADM Summary Report – 4/24/12 – more](#)

[Links to Summary Pages](#)

- ▶ Medications for Lipid Management
- ▶ Medications for Hypertension
- ▶ Management of Neuropathy
- ▶ Diabetes Medication PocketCards
- ▶ Level 4 Online Courses

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Test Taking Tips – From AADE App

- Pay close attention to key words such as “best,” “most,” “primary,” or “usually.” These words indicate that other options may at times be correct, but given the wording or situation in the test question, you must judge which option is the best.
- Skip difficult questions and come back to them later. Questions on the test are not ordered by difficulty (i.e., they do not go from easiest to hardest). Also, content areas (the domains) and topics are addressed randomly in questions throughout the test.
- When guessing, use the process of elimination. Treat each option as a true or false statement, and eliminate those that you would not select. Narrow your choices and then make an educated guess.
- Answer every question, because there is no penalty for guessing. Go through the entire test, answering the questions you believe you know and skipping the ones you do not. Leave time at the end of the testing period to go back to the questions you skipped or want to review. If you are running out of time, leave a minute or so at the end to complete all of the blank questions randomly. Remember, you have a 25% probability of answering a question correctly by chance alone, so don't miss any!
- If reading English is difficult for you because English is not your primary language, maximize your time by reading and answering all the shorter questions first. After completing all of the short questions, go back and attempt to answer the longer questions.



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Sample Question -1

- ▶ A healthy adolescent with 2 year history of type 1 DM returns for a quarterly appt. For the past month, he has experienced abdominal pain and diarrhea after some high carb meals. An advanced diabetes manager's first intervention is to order a:
 - A. 72-hour fecal fat collection
 - B. Colonoscopy
 - C. Stool Sample
 - D. Transglutaminase Autoantibody Test



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Poll Question 2

- ▶ Mrs. S is having trouble sleeping and complains of waking up with frequent nightmares. Her insulin dose includes 5-8 units of Novolog at breakfast and dinner and 12 units of NPH bedtime. She complains that her before bed blood sugar is often greater than 300, so she takes extra insulin before going to bed to bring it down. What is your best response?
 - a. Instruct patient to decrease the NPH insulin by 2 units to prevent nocturnal hypoglycemia.
 - b. Contact provider and request to discontinue NPH and start Lantus instead.
 - c. Assess if the patient is having a snack before checking her bedtime blood glucose level.
 - d. Instruct pt how to safely adjust her dinner time Novolog to prevent hyperglycemia at bedtime.



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Poll Question 3

- ▶ The American Diabetes Association recommends universal screening for at risk pregnancies as soon as possible after the confirmation of pregnancy. Criteria for high risk include:
 - a. glycosuria, obese, > 25 years of age, strong family history of diabetes
 - b. the same risk factors for type 2 as listed in the ADA standards of medical care.
 - c. Obese, >35 years of age, member of high-risk ethnic group, strong family history of diabetes.
 - d. Glycosuria, > 25 years of age, member of high-risk ethnic group, strong family history of diabetes



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Poll Question 4

- ▶ Hyperglycemia during hospitalization is associated with poor outcomes due to
 - a. Decreased insulin resistance, increased insulin secretion and increased counterregulatory hormones.
 - b. Increased free fatty acids, ketones, lactate, inflammatory cytokines.
 - c. Increased nitric oxide levels
 - d. Increased risk of alkalosis



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5. A 40-year-old female patient has a 10-year history of diabetes

- ▶ The pt injects 16 units of NPH and 8 units lispro (Humalog) before breakfast, and 8 units of NPH, and 4 units of lispro (Humalog) before dinner. BG pattern is:
 - ▶ fasting blood glucose is 100
 - ▶ pre-lunch is 240 mg/dL;
 - ▶ pre-dinner is 210 mg/dL
 - ▶ bedtime is 150 mg/dL.

The advanced diabetes manager recommends:

- a. Adding 2 units of Humalog before breakfast.
- b. Adding 4 units of Humalog before dinner.
- c. Adding 2 units of Humalog before lunch.
- d. Decreasing the evening NPH insulin by 2 units.



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Sample Question 6

An advanced diabetes manager best facilitates the learning process for adults by:

- A. Administering pre and post tests
- B. Creating an environment in which the learner is an active participant.
- C. Delivering content using a standardized slide presentation
- D. Insisting upon full participation



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Sample question 7

▶ A 54-yr-old obese male patient with type 2 diabetes, A1c 10.3%, smokes cigarettes and not exercising. Meds include Glipizide, Metformin and levothyroxine. Given his risk status, which 3 classes of meds should he be taking according to ADA?

- a. insulin, aspirin and ACE Inhibitor.
- b. TZD, ARB and bolus insulin.
- c. Beta blocker, insulin analog and statin.
- d. Insulin, statin, aspirin



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Sample question 8

Current recommendations for screening for Type 2 diabetes and prediabetes in asymptomatic young adults include:

- a. Individuals with a HDL of 52 mg/dl
- b. Individuals with a history of Addison's disease
- c. Offspring with a parent with type 1 diabetes
- d. Women with polycystic ovary disease

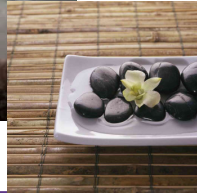


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You are Going to Do Great!



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Keep in Touch!



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Thank You



- ▶ Questions?
- ▶ Email
bev@diabetesed.net
- ▶ Web
www.diabetesed.net



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