



Preparing for Certified Diabetes Care and Education Specialist Exam (CDCES) 2022

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President, Diabetes Education Services



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| Glucagon Emergency Kit Injection requires mixing glucagon powder + diluent filled syringe | 1mg / 1mL vial + syringe | 1 mg | 0.03mg/kg or • <6yr or < 25 kg (0.5mg) • ≥6yr or >25kg 1mg | All ages approved SubQ or IM admin Expires in 2 years at room temp. |
| Gvoke Injectable liquid stable glucagon solution | 0.5mg/1.0mg prefilled syringe or 0.5mg/1.0mg HypoPen auto-injector | 1 mg | <2yr: not recommended 2-12 yrs • <45kg 0.5mg • ≥45kg 1mg 12 years or older 1mg | Approved Age 2+ SubQ admin in arm, thigh, abdomen Expires in 2 years at room temp (keep in foil pouch). |
| Baqsimi Nasal glucagon powder | 3 mg intranasal device | 3 mg | < 4 yrs: not recommended 3 mg dose for 4 years or older | Approved Age 4+ Nasal admin Expires ~ 2 yrs at room temp (keep in shrink-wrapped tube) |

*All raise 80-200+ points. Can cause nausea, vomiting. After admin, roll person on side. Seek medical help. If no response after 1st dose, give 2nd dose in 15 min. When awake, give oral carbs ASAP when safe to swallow. Please consult package insert for detailed info.
All PocketCard content is for educational purposes only. Please consult prescribing information for detailed guidelines.

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Welcome to the first step toward achieving diabetes certification. We are so glad you are joining us and look forward to helping you on your journey.

Ready to take your Diabetes knowledge to the next level?

We believe in your success! Learn the steps involved in preparing for the certification exams, earning CEs and gaining confidence as a Diabetes Specialist and more!



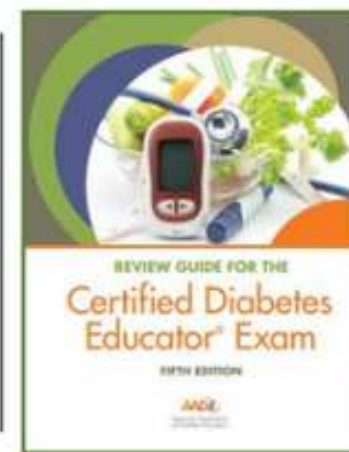
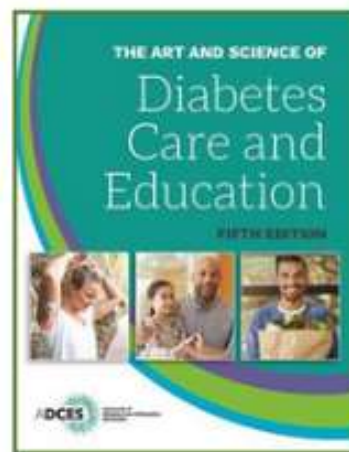
Preparing for CDCES Exam?

[Future CDCES – Click Here!](#)

**Prep for CDCES – March 31,
July 12, Aug 10, Oct 12, Nov 8**

[Future BC-ADM – Click Here!](#)

**Prep for BC-ADM – April
7, July 14, Nov 10th**





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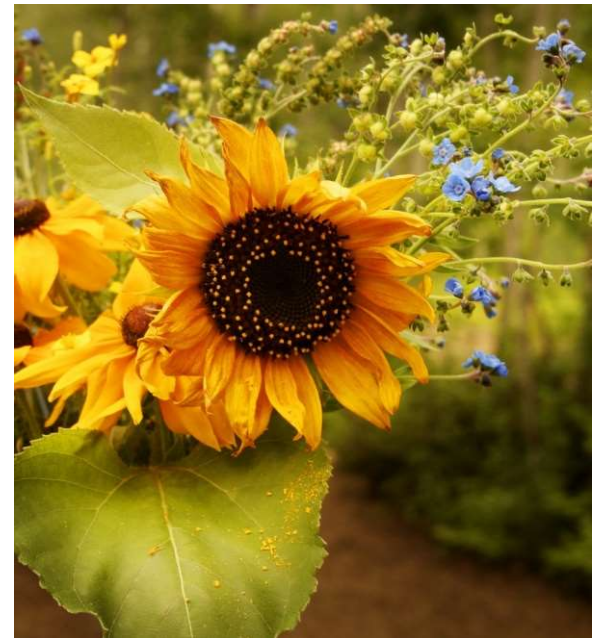
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Standards of Care
Meds PocketCards
Question of the Week
Online Course Viewing



Topics – Prep for CDCES

- ▶ Updated Definitions
- ▶ Certified Diabetes Care and Education Specialist
 - ▶ Eligibility requirements
 - ▶ Exam content
 - ▶ Study strategies
 - ▶ Test taking tips
 - ▶ [Resources](#)

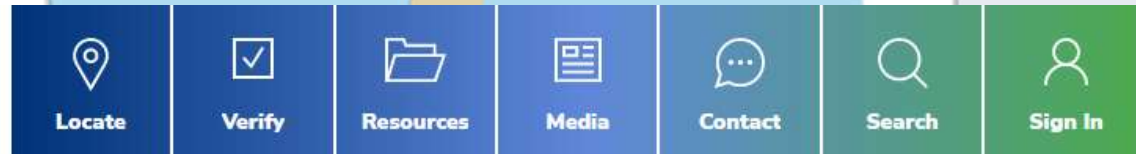


Diabetes Cert Names

- ▶ **Organization:** Certification Board for Diabetes Care and Education (CBDCE) (Formerly NCBDE)
- ▶ **Designation:** Certified Diabetes Care and Education Specialist (CDCES)
- ▶ **Examination:** Certification Examination for Diabetes Care and Education Specialists
- ▶ Association of Diabetes Care and Education Specialist (ADCES)



www.cbdce.org



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01 — 03

Thinking about Earning the CDCES?

Join over 19,500 health care professionals who have validated their expertise and professionalism by earning the Certified Diabetes Care and Education Specialist (CDCES) credential.



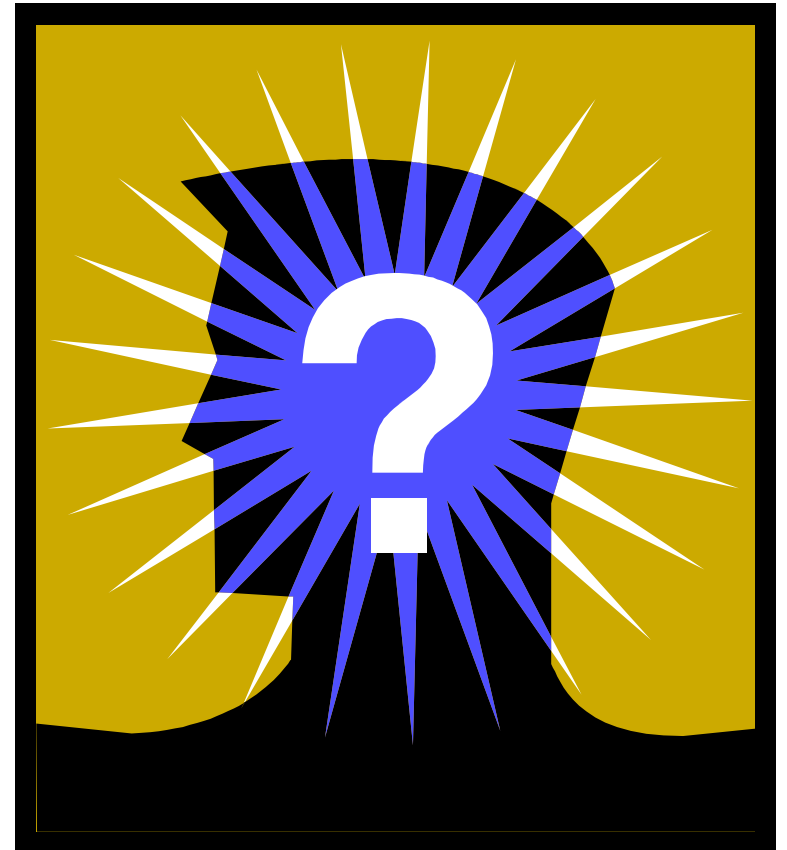
Become Certified

CDCESs educate and support people affected by diabetes. Earn the most recognized credential in diabetes care and education.

Get started. →

Why Take the CDCES Exam?

- ▶ Demonstrates to people with diabetes, employers, and third party payers that the CDCES possesses distinct and specialized knowledge, thereby promoting quality of care for persons with prediabetes and diabetes.
- ▶ CDCES is the recognized standard for competence in diabetes self-management education.
- ▶ Mastery of knowledge
- ▶ Given the diabetes epidemic, access to CDCES' is critical



What is a CDCES?

A Certified Diabetes Care and Education Specialist is a health professional who possesses comprehensive knowledge of and experience in diabetes prevention, prediabetes, and diabetes management.

The CDCES educates, supports, and advocates for people affected by diabetes, addressing the stages of diabetes throughout the lifespan.

The CDCES promotes self-management to achieve individualized behavioral and treatment goals that reduce risks and optimize health outcomes



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Professional Practice Experience

Must meet all

- ▶ A minimum of two years (to the day) of professional practice experience in the discipline under which one is applying for certification

AND

- ▶ Minimum of 1,000 hours of professional practice experience within the past 4 years in diabetes self-management education with a minimum of **40% (400 hours = about 8 hrs a week)** accrued in the most recent year preceding application.

AND

- ▶ Minimum of **15 clock hours of continuing diabetes education** within **2 years prior** to applying for certification.

2021 -2023 Practice Experience Update from CBCDE

| STANDARD PATHWAY | | | |
|--|--|--|--|
| DCE PROFESSIONAL PRACTICE EXPERIENCE REQUIREMENT | WITHOUT ADJUSTMENTS | WITH ADJUSTMENTS APPLICATION SUBMITTED IN 2021 OR 2022 | WITH ADJUSTMENTS APPLICATION SUBMITTED IN 2023 |
| Current DCE experience (12 months prior to applying) | At least 400 hours of DCE in last 12 months | At least 200 hours of DCE in last 12 months | At least 400 hours of DCE in last 12 months |
| Total DCE experience needed prior to applying | Total 1000 hours in no more than 4 years prior to applying | Total 1000 hours of DCE within 5 years | Total 1000 hours of DCE within 5 years |

| UNIQUE QUALIFICATIONS (UQ) PATHWAY | | | |
|--|--|--|--|
| DCE PROFESSIONAL PRACTICE EXPERIENCE REQUIREMENT | WITHOUT ADJUSTMENTS | WITH ADJUSTMENTS APPLICATION SUBMITTED IN 2021 OR 2022 | WITH ADJUSTMENTS APPLICATION SUBMITTED IN 2023 |
| Current DCE experience (12 months prior to applying) | At least 400 hours of DCE in last 12 months | At least 200 hours of DCE in last 12 months | At least 400 hours of DCE in last 12 months |
| Total DCE experience needed prior to applying | Total 2000 hours in no more than 4 years prior to applying | Total 2000 hours of DCE within 5 years | Total 2000 hours of DCE within 5 years |

CDCES = Mastery Level

- ▶ Practice-based certification
- ▶ Requires individuals to accrue professional practice experience prior to applying.
- ▶ This practice experience is necessary to master the knowledge
- ▶ CDCES provides formal recognition of specialty practice and mastery of knowledge
- ▶ Provides validation of demonstrated dedication to Diabetes Care and Education (DCE).

Professional Degree, DSME Practice Hours, plus CE

- ▶ Only experience occurring AFTER completing your professional degree can be counted toward the Professional Practice Experience requirement.
- ▶ Need 1000 hours of DSME Practice Hours
- ▶ If on Unique Qualifications Pathway, need 2000 hours of DSME
- ▶ For more: info@CBDCE.org or call 877 -239- 3233



Quick Question A

- ▶ Diabetes Care and Education Exam includes which of the following philosophies?
- ▶ A. Encouraging compliance improves outcomes
- ▶ B. Empower people to improve diabetes self-management
- ▶ C. Consider individual needs, goals and life experiences
- ▶ D. Help all people achieve an A1c less than 7
- ▶ E. Collaborate and provide ongoing care

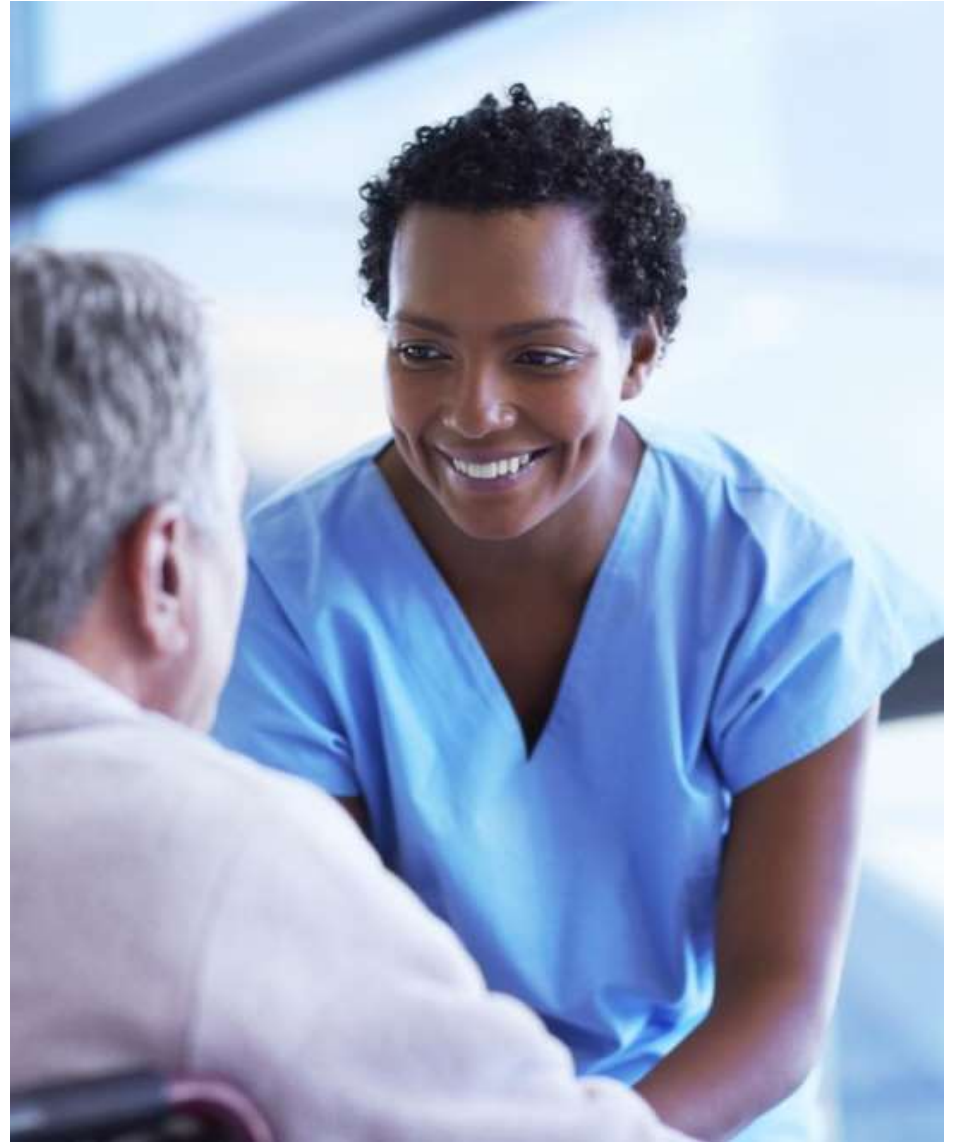
Definition of Diabetes Education

- ▶ It is a component of a comprehensive plan of diabetes care.
- ▶ Involves the person with prediabetes and or diabetes, caregivers and specialists
- ▶ Ongoing process of facilitating the knowledge, skill, and ability necessary for self-care, as well as activities that assist a person in implementing and sustaining the health practices to manage on an ongoing basis, beyond or outside of formal self-management training.



Definition of Diabetes Education

- ▶ Process incorporates the needs, goals and life experiences of the person and is guided by evidence-based standards.
- ▶ Includes practical problem-solving approaches and collaborative care.
- ▶ Address psychosocial issues, lifestyle change, and strategies to sustain self-management



Diabetes Self-Management Education and Support (DSMES)

- ▶ All people with prediabetes and diabetes should participate in DSMES to facilitate the knowledge, skills and ability necessary to self-manage their diabetes.
- ▶ DSMES provides support to implement and sustain skills and behaviors needed for ongoing self-management.



Diabetes Care & Education Includes:

Assessment: Participant's needs are identified. Process is led by the participant with assessment of support of specialist.

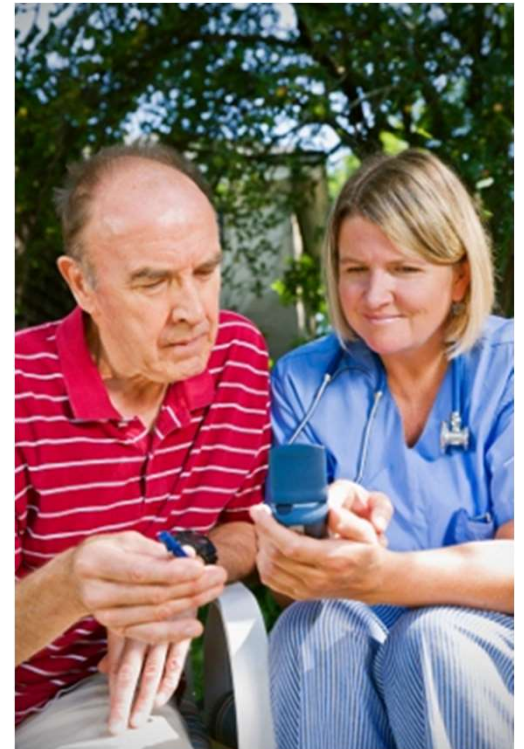
Care & Education Plan: Individualized plan that reflects participant's self-management goals, current evidence and practice guidelines. Includes criteria for evaluating outcomes.



Interventions: The specialist delivers options to assist participants in meeting self-management goals.



Ongoing Support: The specialist provides options for ongoing support and resources. The support option is selected by participant to best meet self-management goals



Definition of Diabetes Education

Participant Progress: **Specialist** monitors and communicates whether participant is achieving self-management goals and other outcome(s) to evaluate effectiveness of interventions. Additional assessments are based on participant's needs across lifespan.



Documentation: Assessment, education plan, intervention, and outcomes are documented in participant's health record.



Services Development/Administration:
Development and administrative activities performed as part of DSMES services



Diabetes Self Management Ed Benefits

- ▶ Improves knowledge
- ▶ Lowers A1c
- ▶ Lose weight
- ▶ Improved quality of life
- ▶ Reduced all cause mortality
- ▶ Reduced health care costs



Diabetes Self Management Ed Benefits

- ▶ Increased primary care and preventive services
- ▶ Less frequent use of acute care and hospital admissions
- ▶ More likely to follow best practice recommendations (esp those with Medicare)
 - ▶ Only 5-7% of Medicare recipients receive DSME)



DSME Overall Objective

- ▶ **Participant Centered**
- ▶ Support informed decision making
- ▶ Problem solving
- ▶ Active collaboration to improve clinical outcomes and quality of life
- ▶ Avoid judgmental words that increase feelings of shame and/or guilt
- ▶ Choose words and phrases that put people first
- ▶ Avoid shame and blame

Language of Diabetes Education

Old Way

- ▶ Control diabetes
- ▶ Test BG
- ▶ Patient
- ▶ Normal BG
- ▶ Non-adherent, compliant

 American Diabetes Association. Diabetes Care.



The Use of Language in Diabetes Care and Education

Jane K. Dickinson, Susan J. Guzman, Melinda D. Maryniuk, Catherine A. O'Brien, Jane K. Kadohiro, Richard A. Jackson, Nancy D'Hondt, Brenda Montgomery, Kelly L. Close and Martha M. Funnell
Diabetes Care 2017 Oct; dci170041. <https://doi.org/10.2337/dci17-0041>

New Way

- ▶ Manage
- ▶ Check
- ▶ Participant
- ▶ BG in target range
- ▶ Focus on what they are accomplishing

What we say matters

Free Language Webinar

What We Say Matters: Language that Respects the Individual and Imparts Hope | FREE Webinar & Resources



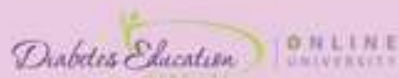
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Language that Respects the Individual & Imparts Hope Confirmation

What We Say Matters

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More info. at www.DiabetesEd.net

2022 Initial Certification Requirements[†] Review

Yes No
☐ ☐

1. As a clinical psychologist, registered nurse, occupational therapist, optometrist, pharmacist, physical therapist, physician, podiatrist, master certified health education specialist, certified clinical exercise physiologist, registered dietitian, dietitian nutritionist, or registered PA, is your license, certification or registration current, active and unrestricted?*

OR

Do you hold a minimum of a master's degree in social work from a United States college or university accredited by a nationally recognized regional accrediting body?

OR

If you do not meet either of these, you are encouraged to investigate CBDCE's Unique Qualifications Pathway. Please visit our website for more information on that pathway.

☐ ☐

2. Has your practice experience occurred within the United States or its territories?

☐ ☐

3. Has all your practice experience occurred since you met requirement #1 above?

☐ ☐

4. Do you have a minimum of 2 calendar years (to the day) of practice experience since you received the license, registration or advanced degree as outlined above?

☐ ☐

5. Have you accrued 1000 hours of practice experience in diabetes care and education (DCE) within the last 5 years?

☐ ☐

6. Do you have a minimum of 20% (or 200 hours) of the 1000 hours of DCE practice experience accrued within the past year?

☐ ☐

7. Does your practice experience include at least some or all in the DCE process: assessment, education plan, interventions, ongoing support, monitoring and communication of participant progress, documentation, and development of DSMES services/administration?

☐ ☐

8. The Examination Content Outline (ECO) identifies what is covered on the Examination. Reminder that regardless of discipline, knowledge (and the ability to apply that knowledge) is necessary across all areas of the ECO. Have you reviewed the ECO and assessed your knowledge across the ECO?

☐ ☐

9. Have you completed (within the past 2 years) a minimum of 15 hours of continuing education activities** applicable to diabetes and provided by or approved by a provider on our list of Recognized Continuing Education Providers?

If the answer to any of the above questions is "no", you are not ready to apply for the Certification Examination for Diabetes Care and Education Specialists.

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Beverly Thomassian, RN, MPH, CDCES, BC-ADM

Ashley LaBrier, RD, MS, CDCES



Ashley LaBrier

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- ▶ Content that *best* helps you succeed
- ▶ Join Coach Beverly, Dr. Diana Isaacs and Ashley LaBrier
- ▶ Deluxe version includes Swag, Syllabus and Standards

Applying to take the CDCES Exam

At the time of your online application, you will receive:

- ▶ On-line notification of either approval
- ▶ Or that you have been selected for audit
- ▶ If you are submitting a paper application, call PSI if it has been more than 4 weeks since application was mailed and you have not received notice of receipt or audit.

Phone: PSI 833-333-4754

Online Scheduling: schedule an examination appointment online at <http://schedule.psiexams.com>.



What is included in audit if requested?

- ▶ Licensure
- ▶ Documentation of Professional Practice
Experience –
 - ▶ A journal of weekly hours of providing DSME
 - ▶ Supervisor to verify
- ▶ CE course verification
- ▶ Employment verification signed by supervisor



Test Taking Window


- ▶ The exam is administered on an ongoing basis
- ▶ Once application approved, candidates must schedule their testing appointment within a 90-day window on a date of their choosing
- ▶ schedule an appointment to take the examination on a first-come, first-served basis through PSIs online scheduling system
- ▶ See application booklet for more details



Online Scheduling: schedule an examination appointment online at *<http://schedule.psiexams.com>*.

CDCES Live Remote Proctoring (LRP)

- ▶ Candidate uses own computer from home.
- ▶ A compatibility check of the computer's audio/video, webcam and system is required prior to scheduling.
- ▶ The candidate must have a computer with a web camera that can be moved to display the entire room, a microphone, and internet connection to download the PSI secure browser.
- ▶ Browser Requirements: LRP requires the use of Google Chrome Browser.



Live Remote Proctoring

Live Remote Proctoring (LRP) is now available for the CDCES exam! Candidates have the convenience and flexibility of taking the CDCES exam by either testing at a PSI Test Center or by LRP!


[Learn More](#)



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CDCES Live Remote Proctoring

- ▶ **Breaks:** You are **NOT** allowed any breaks during your LRP exam session.
- ▶ **Identification:** You will be required to take a picture of yourself via the webcam. You will also be required to show via webcam your photo ID.
- ▶ **Room Scan:** You will be required to perform a 360° scan of your testing room. Room must be free of study materials, papers, reference materials, etc.
- ▶ **Calculator:** The LRP platform has a calculator built-in in the lower left-hand corner of screen.
- ▶ **Communicating with your proctor:** will be conducted via chat during the testing session.
- ▶ **Results will pop up on screen upon completion.**



Live Remote Proctoring

Live Remote Proctoring (LRP) is now available for the CDCES exam! Candidates have the convenience and flexibility of taking the CDCES exam by either testing at a PSI Test Center or by LRP!

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When will I get my results?

- ▶ You will receive your test results the same day at testing site or if using remote proctoring.
- ▶ You can retake the test as many times as needed
- ▶ Cost –
 - ▶ 1st time \$350
 - ▶ Renewal - \$250



Scoring the Exam

- ▶ Reported as raw and scaled scores
 - ▶ Raw score: number of right answers
 - ▶ Scaled score: statistically derived from the raw score
- ▶ Total score determines pass/fail and is reported as a scaled score ranging between 0 and 99
- ▶ To pass: 70 scaled score units



CDCES Exam First Time Pass rates

2009 – 69 % (test changed based on work study analysis and computerized)

2010 – 69%

2011 -65%

2012 – 63.5%

2013 – 67 and 69%

2014 - 66 and 67%

2015 - 62 and 64% (test updated)

2016 – 67%

2017 – 66%

2018 – 67%

2019 – 70%

2020 – 67%



Exam Details

- ▶ Questions are linked directly to a task or tasks.
- ▶ Each question is designed to test if the candidate possesses the **knowledge necessary to perform the task or has the ability to apply it to a job situation.**
- ▶ 25 of the 200 questions are new - but are **not** counted in the determination of individual examination scores.



Quick Question – Multiple answers

What are some study strategies that will help you succeed?

- a. Focus your study time on topics you are confident in.
- b. Take as many practice tests as possible
- c. Read as many books on diabetes as possible
- d. Develop a study plan and block off study time.
- e. Teach the content to someone else

220 Test Questions – Assess your Knowledge



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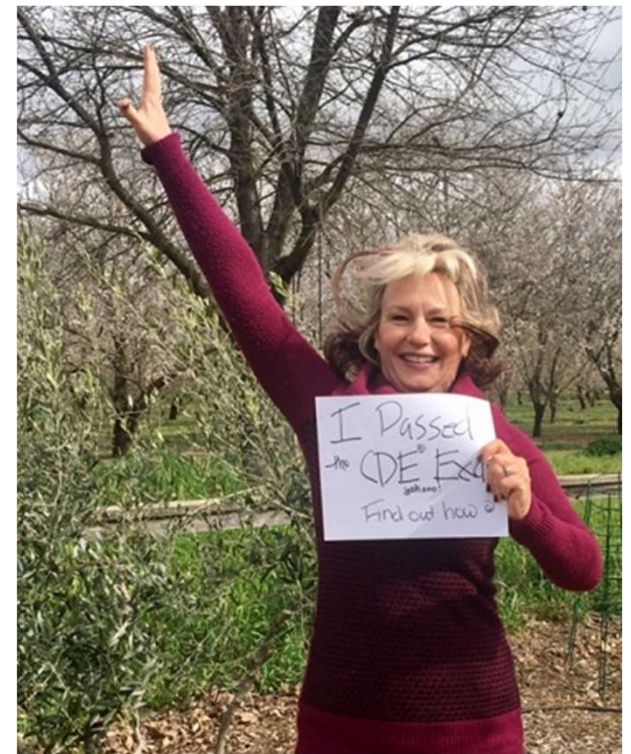
Quantity

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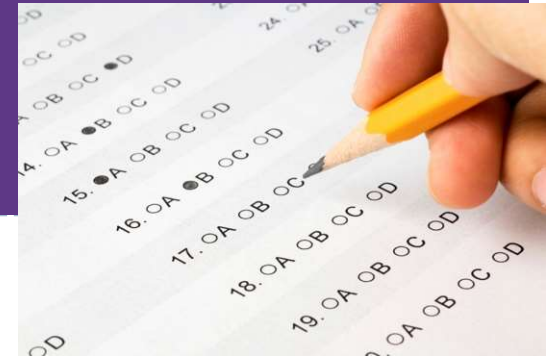
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Overview of CDCES Exam



- ▶ Composed of 200 multiple-choice, objective questions with a total testing time of four (4) hours.
- ▶ Based on job analysis completed in 2018, which surveyed diabetes educators about the tasks they performed.
- ▶ Exam outline updated in July 2019

Exam Content - Assessment

- ▶ Assessment (59)
 - ▶ Learning (19)
 - ▶ Health and Psychosocial Status (19)
 - ▶ Knowledge and Self-Management Practices (21)



Exam Content - Intervention

- ▶ Intervention (88)
 - ▶ Collaboration with Individual, Family, Caregiver, and Healthcare Team (18)
 - ▶ Educate based on individualized care strategies (35)
 - ▶ Meds, MNT, acute and chronic complications, problem solving
 - ▶ Evaluate, Revise and Document (26)
 - ▶ Follow-up, support and referral (9)



Exam Content – Disease Management

► Education and Program Standards (28)

- Education services standards
- National Standards for Diabetes Self Management Education and Support (8)
- Clinical Practice (18)
 - Inpt and Outpt Standards for ADA, AACE
 - Promote Diabetes Advocacy (2)



- For detailed outline look in Testing Handbook

Test Timing of Diabetes Advancements – AKA What Year Standards to Study?

- ▶ **CBDCE has developed the following policies.**
- ▶ **One Year** – New medical advances, guidelines, or pharmaceuticals will be included in CDCES Exam no sooner than on year after the information is released.
- ▶ **Immediately** – New diagnostic criteria or specific guidelines impacting diabetes care and education and/or treatment of diabetes which are released nationally and identified as effective immediately may be including in the examination at any time.



Recommended Articles

[Read More: Recommended Articles](#)

[ADA Standards of Care](#) – This yearly publication by the American Diabetes Association outlines the national goals of care based on the latest research for diabetes management. This is one of the most important guidelines to read as a Certified Diabetes Care and Education Specialist

[ADA Standards of Care 2022](#)

[Screening and Diagnosis of Diabetes Mellitus 2022](#) – One-page cheat sheet that summarizes screening, risk status, and diagnostic criteria for diabetes. Great for your office and as a study tool.

[Pharmacologic Approaches to Glycemic Treatment in 2022](#). This hyperglycemia road map details strategies to achieve glucose control for both Type 1 and Type 2 Diabetes. *Section 9 of Standards of Care, 2022*

[Language & Diabetes. What we say matters | Resource page](#)

Language is powerful and can have a strong impact on perceptions as well as behavior. This mini webinar and article provide recommendations for the language used by health care professionals and others when discussing diabetes through spoken or written words whether directed to people with diabetes, colleagues, or the general public, as well as research questions related to language and diabetes.

[Med Cheat Sheets 2022 | Hypertension, Lipids, and Neuropathy](#) – These summary sheets are helpful for your clinical practice and preparing for certification exams. For exam success, be familiar with the general concepts, (side effects and precautions) of these medications.

[ADCES 7TM Self-Care Behaviors](#) – A must-read for anyone entering the field of Diabetes or as a reference for those already in the field. These 7 Self-Care BehaviorsTM provide a framework for patient-centered diabetes self-management education and training (DSME/T) and care.

[AAACE Comprehensive Type 2 Diabetes Management Algorithm 2020](#). This link provides the **complete executive** and **slide set summary** by an American Association of Clinical Endocrinologists/American College of Endocrinology Consensus Panel on Type 2 Diabetes Mellitus. If you are taking the CDCES or BC-ADM exam, we encourage students to be familiar with the slide content that reviews diabetes management.

[2017 National Standards for Diabetes Self-Management Education and Support](#) – A joint position statement

What to Study?



Get Started > Preparing for CDCES Exam Free webinar



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- **Test Taking Toolkit (Over 200 computerized questions)**
- **Technology Toolkit**

Taking the Exam

- ▶ Questions
- ▶ Answers
- ▶ Pitfalls



Empowerment Errors

- ▶ Focusing on the medical need rather than the psychosocial needs
- ▶ Failing to keep in mind the participants characteristics (age, type of diabetes, etc.)
- ▶ We are supporting efforts toward behavior change.



Thinking Pitfalls

- ▶ Imaging a right answer and getting thrown when it is not among the choices
- ▶ Over thinking question/answers
- ▶ Choosing an answer that did not fit the situation
- ▶ Using the goals in your clinical setting. Focus on national goals.



Take a Practice Test – Learn how to “work” test questions

- ▶ Weed through the details
- ▶ Make sure you REALLY understand key intent of question
- ▶ Find the stem
 - ▶ Identifies key intent of the question
- ▶ Read all the options or answers
- ▶ Eliminate obvious wrong answers
- ▶ Select **BEST** option



Look for Clues in The Answers

- ▶ Answers with the following words are usually **incorrect**:
always, never, all, none,
only, must, and completely
- ▶ Answers with the following words are usually **correct**:
seldom, most, generally,
tend to, probably, usually



Getting to the Right Answers



- ▶ Do not leave any answers blank
- ▶ Look for clues in the question
- ▶ Don't get lured in by juicy answers
- ▶ Avoid imposing your life experience into the question/answer
- ▶ Keep breathing – Get up and move
- ▶ Even simple math problem should be worked out on scratch paper

Sample Question -1

- ▶ A patient is admitted to the hospital with elevated glucose levels with a strong family history of diabetes. She is started on fluid replacement and is placed on a clear liquid diet. Her father is in the room and is very concerned. Which of the following would suggest a diagnosis of new onset type 1 diabetes vs type 2 diabetes?



- A. Hyperglycemia
- B. Polyuria
- C. Ketosis
- D. Polydipsia



Sample Question 2

- MJ has type 1 diabetes and wants to know the possible complications that can result from hyperglycemia during the first trimester of pregnancy. Which of the following complications can result from 1st trimester hyperglycemia?

- A. macrosomia
- B. vascular defects
- C. shoulder dystocia
- D. spina bifida



Vignette Style Question

- ▶ Read the following vignette to answer the next 3 questions.
- ▶ A 47 yr old man with newly diagnosed type 2 diabetes.
Additional known information.
 - ▶ Married, with 2 teenagers
 - ▶ Professor with a BMI of 32
 - ▶ Started on Metformin 500mg BID
 - ▶ Father died of kidney failure secondary to diabetes



Vignette Style Question 1

- ▶ Given what you know about this person, what emotions would you expect him to express?
 - A. Fear of hypoglycemia
 - B. Reluctance to start on insulin
 - C. Panic disorder
 - D. Fear of complications



Vignette Style Question 2

- ▶ He says finding time to exercise is challenging due to his work schedule. Using the transtheoretical model, what stage of change is he in?
 - A. Contemplation
 - B. Cost vs. Benefit
 - C. Precontemplation
 - D. Denial



Vignette Style Question 3

► He requests information about healthy eating. Which meal planning approach best suits this individual until he can see a registered dietitian?

- A. Very low-calorie diet
- B. Eliminate all concentrated sweets
- C. Eat 3 meals a day with snacks in between
- D. Mediterranean Diet



Sample Question 3 – Carb Counting

JL uses an insulin pump and is carb counting. A typical breakfast includes: $\frac{1}{2}$ banana, 1 cup of milk, 2 tablespoons almond butter and 1 piece whole grain bread. LS's insulin to carb ratio for breakfast is 1:12, for lunch and dinner it is 1:15. Based on this, how much insulin does LS need for breakfast?

- A. 3.5 units
- B. 3.8 units
- C. 3.0 units
- D. 2.8 units

Sample Question 4

Metformin is an antidiabetic agent different than that of sulfonylurea drugs. Some features of the drug are that it:

- A. Stimulates insulin secretion and increases hepatic glucose production.
- B. Causes hypoglycemia
- C. Lowers hyperglycemia in persons with diabetes, but does not lower blood glucose levels in people without diabetes.
- D. Results in weight gain and increase in plasma glucose levels.



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Sample question 5

A person with type 2 is on a twice daily dose basal/bolus insulin and complains of waking up with morning headaches. If the fasting capillary BG is 291, this person should be advised to:

- A. Increase evening dose of basal insulin
- B. Increase morning dose of bolus insulin
- C. Check 3am blood glucose
- D. Eliminate bedtime snack



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CDCES and BC-ADM Success Page



I want to thank you for the role that the 1-year subscription to your online university played in passing my CDCES exam this past October. Your webinars are both thorough and engaging. The webinars expanded on the knowledge that I had learned in my first year as a diabetes educator and filled in the gaps of my blind spots regarding exam content. Now in my third year as a diabetes educator, I am a much more well-rounded and versatile educator and care specialist because of your online university.

Tim Leech, CDCES

I wanted to let you know that after using your Diabetes Ed Specialist Deluxe Prep Bundle, I passed the exam last month on the first try! I wouldn't have known where to start without these resources and I plan to continue my growth and learning from you in the future.

Thank you so much for your help and direction! 😊

Athena Cameranesi, RD, CDCES



I passed the BC-ADM exam. It's for sure a brainstorming examination. But by Almighty's grace and a lot of hard work I was successful. I want to thank the DiabetesEd coach Beverley for her very informative in-depth study materials. I would definitely recommend it to anyone who is contemplating taking this exam. The BC-ADM kit online course, CDCES Coach app, Pocket cards, Certified Diabetes Educator exam book, and other resources helped me to build a strong foundation before appearing for the exam. I and my friends were able to have virtual study sessions to share ideas and information. It's definitely worth to take this exam to render holistic well-rounded care for our patients with diabetes.

Susan George, APRN, DNP, FNP-C, BC-ADM

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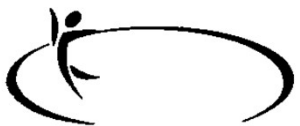
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