



# 2024

## CERTIFICATION

## EXAMINATION

for

Diabetes Care and  
Education Specialists

# Handbook





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## Important General Information

The Certification Program for Diabetes Care and Education Specialists is owned by the Certification Board for Diabetes Care and Education (“CBDCE”). CBDCE is an autonomous specialty board responsible for the development and administration of the certification program for diabetes care and education specialists. CBDCE is independent and separate from any other organization or association. The Certified Diabetes Care and Education Specialist® (“CDCES®”) credential is conferred only by CBDCE, a national, nongovernmental, not-for-profit certification organization. Certification is valid for a period of five (5) years. A registry of CDCESs is maintained by CBDCE.

This Certification Examination for Diabetes Care and Education Specialists Handbook (“Handbook”) contains information about CBDCE’s diabetes care and education specialist certification examination. Individuals who elect to participate in the certification program are responsible for utilizing the most current Handbook and knowing its contents. This publication and application replace all previous editions of the Handbook.

CBDCE updates the information, fees and requirements in this Handbook on a regular basis and makes every effort to present all policies and directions clearly. Questions regarding policies or clarification of information should be directed to the CBDCE national office. CBDCE is not responsible for information that is not understood by the reader or obtained from any source other than CBDCE. CBDCE does not endorse, financially benefit from, or participate in the development of any preparatory or review courses or published materials claiming to be study guides for the CBDCE Certification Examination for Diabetes Care and Education Specialists, except those published or sponsored by CBDCE.

## Mission

The mission of the Certification Board for Diabetes Care and Education (CBDCE) is to promote ongoing quality diabetes care, education, prevention and support by providing certification and credentialing programs that incorporate and reflect best practices.

## Purpose

The purpose of the CBDCE certification program is to conduct certification activities in a manner that upholds standards for competent practice in diabetes education. The CDCES credential demonstrates that the certified health professional possesses distinct and specialized knowledge, thereby promoting quality care for persons with diabetes. Certification is a voluntary process used to assess and validate qualified health professionals’ knowledge in diabetes care and education. It is an evaluative process that demonstrates that rigorous eligibility requirements have been met. Certification is not required by law for employment in the field, although some agencies may use board certification as a basis for employment, job promotions, salary increases, or other considerations.

## Responsibility for Certification

This certification program is owned by CBDCE and all decisions made by CBDCE with respect to the certification program are final. Under an agreement with CBDCE, PSI Services assists in the development, administration, and scoring of Examinations and provides related administrative services.

### Executive Office

Certification Board for Diabetes Care  
and Education (“CBDCE”)  
1340 Remington Road, Suite J  
Schaumburg, IL 60173  
Phone: 847-228-9795  
Fax: 847-228-8469  
Web: [www.cbdce.org](http://www.cbdce.org)  
Email: [info@cbdce.org](mailto:info@cbdce.org)

### Testing Agency

PSI Services  
Candidate Support: 833-333-4754

**CBDCE and PSI endeavor to process all applications promptly and professionally. Nevertheless, in the event an application is improperly accepted or rejected, or action on it is delayed due to an inadvertent processing error, CBDCE liability to the applicant is limited to a complete refund of the application fee.**

**COVID-19 PANDEMIC IMPACT ON INITIAL CERTIFICATION STATEMENT  
IMPORTANT UPDATE**

**TEMPORARY CHANGES MOVED TO PERMANENT STATE FOR PRACTICE EXPERIENCE  
IN DIABETES CARE AND EDUCATION REQUIREMENT FOR INITIAL CERTIFICATION**

In 2021 to address the continuing impact of the COVID-19 pandemic on the ability of health professionals pursuing the CDCES credential to accrue practice experience in diabetes care and education (DCE), the CBDCE Board of Directors approved temporary changes to the professional practice requirement relating to DCE for initial certification.

**In November 2023, The CBDCE Board approved moving the temporary changes to the professional practice requirement relating to DCE for initial certification from temporary to permanent state effective January 1, 2024.**

With the November 2023 decision, DCE Professional Practice Experience Requirement Changes for applications submitted from 1/1/2024 and forward:

1. Minimum DCE experience needed in prior 12 months permanently reduced from 400 hours to 200 hours; and
2. Minimum 1000 hours (or 2000 hours for unique qualifications pathway) of DCE experience needed prior to application, the accrual period permanently increased from 4 years from application date to 5 years from application date.

STANDARD PATHWAY		
DCE PROFESSIONAL PRACTICE EXPERIENCE REQUIREMENT	WITHOUT ADJUSTMENTS (PRIOR REQUIREMENT)	PERMANENT REQUIREMENT CHANGE FOR ALL APPLICATIONS SUBMITTED FROM 1/1/2024 AND FORWARD*
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
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

UNIQUE QUALIFICATIONS PATHWAY		
DCE PROFESSIONAL PRACTICE EXPERIENCE REQUIREMENT	WITHOUT ADJUSTMENTS (PRIOR REQUIREMENT)	PERMANENT REQUIREMENT CHANGE FOR ALL APPLICATIONS SUBMITTED 1/1/2024 AND FORWARD*
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
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

\* Temporary changes were originally to set to end 2022 – 2025 were approved in November 2023 to move from temporary to permanent changes in the eligibility requirements for initial certification.



Examination Application Fees and Dates

Examination Window and Fees

	Application Fee	Application Submission Dates	Testing Window
Initial or Expired Certification	\$350+	Year-round	90 days from approval of application
Renewal of Certification	\$250	beginning July 15 of the renewal year	

\*For those approved by UQ approval process, fee is \$200 for first time examination applicants and \$350 for any future applications.

GENERAL

Introduction

The purpose of this Certification Examination for Diabetes Care and Education Specialists Handbook (Handbook) is to provide information and guidance to individuals who are interested in diabetes care and education specialist certification.

While certification may be a future goal for a health professional who elects to become a diabetes care and education specialist, it is not intended to serve as an entry to the specialty. Rather, being a practice-based certification, it requires individuals to accrue professional practice experience prior to applying. This practice experience is necessary in order to master the knowledge and application of that knowledge associated with the specialty. A mastery level program is different than an entry level credentialing process where prior to taking it, individuals need only complete mandatory, prescribed academic requirements, e.g., nursing license examination.

With this information in mind, it is critically important to understand at the outset that the Certification Examination for Diabetes Care and Education Specialists (Examination) is designed and intended for health professionals who have responsibilities that include the direct provision of DCE (as defined by CBDCE, see Definition of Diabetes Care and Education, page 4).

Definition of a Certified Diabetes Care and Education Specialist

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

Canons of Ethical Conduct

CBDCE has adopted Canons of Ethical Conduct and Rules and Procedures (see Appendix V, pages 36-43). All applicants for the Examination and CDCESs must attest to and agree to abide by the Canons and Rules and Procedures.

Statement of Nondiscrimination Policy

CBDCE does not discriminate among applicants on the basis of age, gender, color, creed, race, religion, national origin, disability, marital status, parental status, ancestry, sexual orientation, military discharge status, source of income, or any other status protected by law. All applications submitted for certification are individually reviewed on the basis of information submitted.

Confidentiality

- Under no circumstances will individual examination scores be reported to anyone but the individual who took the examination. Scores are released only to the candidates and are reported in written form only, in person, via email provided in applicant account, or by U.S. mail. Scores are not reported over the telephone or by facsimile.
- Names of applicants who do not pass the examination are confidential and are not revealed under any circumstances, except by legal compulsory process.
- Aggregate scores without personally identifiable markers may be used by the CBDCE Board and/or Examination Committee in collaboration with the testing agency to set the passing point for the examination and to analyze performance of specific test items.
- All information provided to CBDCE may be used for a variety of analyses to study diabetes care and education specialists, certified diabetes care and education specialists, and the practice of diabetes care and education. However, information sharing will be limited to data reports in aggregate form

or documents that do not contain personally identifiable information.

- Published studies and reports concerning applicants (exam and renewal by continuing education) will contain no information identifiable with any individual, unless authorized by the applicant.

**Information on the status of an individual's certification is considered public information; though verification requests may require specific information from the individual or requesting body to ensure correct identification of the individual in question.**

## **Disciplinary Policy**

CBDCE may deny, revoke, or otherwise act on any application for certification or on any CDCES credential when an individual is not in compliance with CBDCE requirements. CBDCE has the right to suspend, withhold, revoke, censure, or take other appropriate action with regard to certification status for validated cause and to make such actions public. Certification may be withheld, denied or revoked, or applications rejected for reasons including, but not limited to, the following:

1. Falsification of application information
2. Noncompliance with review and audit procedures
3. Loss of current, active, unrestricted licensure, certification or registration used to meet the discipline requirement at any time during application or examination windows or during the certification cycle
4. Revocation or suspension of current license or other credential, or other disciplinary action by a licensing or regulatory board or registration commission/agency
5. Violating the canons of ethical conduct
6. Validated unethical practice of diabetes care and education
7. Giving or receiving assistance during the Examination
8. Removing or attempting to remove Examination information or materials from the test center or LRP session
9. Representing oneself falsely as a Certified Diabetes Care and Education Specialist
10. Obtaining or attempting to obtain certification, whether initial or renewal, by fraud or deception
11. Unauthorized possession and/or distribution of any official CBDCE testing or Examination materials
12. Ineligibility for certification, as determined by CBDCE
13. Misrepresentation or fraud in any statement on the certification Application made to assist individual to apply for, obtain, or renew certification.

## Initial Certification: Eligibility Requirements

Individuals who have not previously taken or passed the Examination or whose CDCES credentials expired prior to 2019 must meet the requirements. To qualify for the Examination, the following must be met at the time of application and Examination:

### 1. Discipline\*\*

A. Licenses (current, active, unrestricted license from one of the United States or its territories):

- Clinical Psychologist
- Registered Nurse (includes Nurse Practitioners, CNS)
- Occupational Therapist
- Optometrist
- Pharmacist
- Physical Therapist
- Physician (M.D. or D.O.)
- Podiatrist

OR

B. Registrations/Certifications

- Dietitian or dietitian nutritionist holding active registration with the Commission on Dietetic Registration
- PA holding active registration with the NCCPA
- Exercise physiologist holding active certification as an American College of Sports Medicine Certified Clinical Exercise Physiologist
- Health educator holding active certification as a Master Certified Health Education Specialist from the National Commission for Health Education Credentialing

OR

C. Health care professional with 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.

**To verify the program, an official transcript that indicates that an advanced degree in social work was awarded must be submitted with the Application for the Examination.**

### 2. Professional Practice Experience

**After** meeting the Discipline requirement and before applying for the Examination, **both** of the following requirements must be met in the United States or its territories (Refer to Appendix I, [page 28](#), for accrual details.):

A. Professional Practice in Discipline - minimum of two (2) years to the day of professional practice experience in the discipline under which the individual is applying for certification (examples: if an individual applies for certification as a registered nurse, 2 years experience

working/volunteering as a registered nurse is required; if an individual applies as a registered dietitian nutritionist, 2 years experience working/volunteering as a registered dietitian nutritionist is required).

Waiver: Individuals may claim a one (1) year waiver for one (1) of the two (2) years professional practice experience requirement for individuals with a master's degree or higher in a health-related field. Using this waiver, individuals would only need a minimum of one (1) year working in their discipline. (Master's degree would qualify as a waiver for the second year.)

AND

B. DCE hour requirement - minimum of 1000\* hours of DCE experience (accrued within 5 years prior to applying for certification) with a minimum of 20% (200 hours) of those hours accrued in the most recent year preceding application. Delivery method of DCE can be provided via face to face or electronic (e.g. telephone, internet, web-based conference calls, etc.).

In meeting the hourly requirement\*, professional practice experience is defined as responsibilities, within the past 5 years, that include the direct provision of DCE, as defined by CBDCE. See Definition of Diabetes Care and Education, [page 4](#).

### 3. Continuing Education (CE)

**After** meeting the Discipline requirement and before applying for the Examination, the following continuing education requirement must be met:

CE requirement - minimum of 15 clock hours/CEUs of CE activities applicable to diabetes within the two (2) years prior to applying for certification and provided by or approved by a provider on the CBDCE list of Recognized Continuing Education Providers. See Continuing Education Guidelines, [pages 29-30](#), for the details on this requirement.

### 4. Application Fee(s) Payment

#### **\*\*Unique Qualifications (UQ) Pathway**

An alternative pathway for eligibility to become a CDCES – known as the UQ Pathway – is available for individuals providing diabetes education that do not qualify under the current list of disciplines that qualify for initial certification. This pathway is designed for health professionals holding an advanced degree in a health-related area/concentration from a United States college or university that is accredited by a nationally recognized regional accrediting body to pursue certification. This pathway has different eligibility requirements and requires pre-approval prior to applying for the Examination. The information for the UQ Pathway are available at [www.cbdce.org](http://www.cbdce.org).



### Definition of Diabetes Care and Education (DCE)

Diabetes self-management education and support or DSMES, historically also referred to as diabetes self-management training or diabetes education, is performed by health professionals who have appropriate credentials and experience consistent with the particular profession's scope of practice. For purposes of this Handbook, diabetes care and education (DCE) is used.

DCE<sup>±</sup> involves the person with prediabetes or diabetes and/or the caregivers and the specialist(s) and is defined as the ongoing process of facilitating the knowledge, skill, and ability necessary for prediabetes and diabetes self-care, as well as activities that assist a person in implementing and sustaining the health practices needed to manage the condition on an ongoing basis, beyond or outside of formal self-management training. It is a component of a comprehensive plan of diabetes care. The process incorporates the needs, goals and life experiences of the person with prediabetes or diabetes and is guided by evidence-based standards. DCE should include practical problem-solving approaches and collaborative care, address psychosocial issues, lifestyle change, and strategies to sustain self-management.

**For purposes of certification eligibility, some or all of the following components of the DCE process may be performed and counted towards meeting the DCE practice experience requirement:**

- **Assessment:** The participant's DCE needs are identified. This process is led by the participant with assessment and support of the educator.
- **Education and Care Plan:** The participant's individualized education and care plan is developed. The plan reflects the participant's self-management goals and current evidence and practice guidelines and includes criteria for evaluating outcomes.
- **Interventions:** The specialist delivers intervention options to assist the participant in meeting self-management goals. **Ongoing Support:** The specialist provides options for ongoing support and resources. The support option(s) is selected by the participant to best meet their self-management goals.
- **Participant Progress:** The specialist will monitor and communicate whether the participant is achieving their self-management goals and other outcome(s) to evaluate effectiveness of interventions. Additional assessments are based on the participant's needs across the lifespan.

- **Documentation:** The specialist documents the assessment, education plan, intervention, and outcomes in the participant's health record.
- **Services Development/Administration:** Development and administrative activities performed as part of DSMES services.

Have you read the definition and not sure if you are providing DCE? For more information visit our website: <https://www.cbdce.org/eligibility>.

**Note: Regardless of discipline, knowledge (and the ability to apply that knowledge) is necessary across all areas of the examination content outline.**

<sup>±</sup>Adapted from the 2023 National Standards for Diabetes Self-Management Education and Support, American Diabetes Association. Diabetes Care, (NSDSMES) updated every year as the 1st supplement of "Diabetes Care."

### On the Other Hand...

For initial certification, there are activities that are **not** considered DCE for purposes of certification eligibility and should not be included as part of Professional Practice Experience. While not an exhaustive list, the following are examples of such activities:

#### Occupational Activities

- demonstrating a basic skill in which the health professional is not providing DCE
- providing medical assessment or diagnosis
- conducting/participating in research activities in which the health professional is not providing DCE
- dispensing/prescribing medications
- promoting sales of diabetes medications, supplies, and products

#### Professional Activities

- providing continuing education to professionals (e.g., teaching nurses, physicians)
- membership or committee work in professional organizations

#### Personal Activities

- having diabetes or caring for a family member with diabetes
- diabetes-related volunteer activities that do not include some or all of the components of DCE

**Assess Your Readiness to Apply for the CDCES Examination**

NOTE: The Certification Examination for Diabetes Care and Education Specialists is designed and intended for health professionals who have responsibilities that include the direct provision of diabetes care and education (DCE), as defined by CBDCE. Refer to Definition of Diabetes Care and Education section, [page 4](#).

†This review list represents a summary of requirements. See [pages 2-4](#) for all details.

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, registered 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 or are you using a Master’s degree in a health-related field as a waiver for one of the two years?
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.**

\* See Eligibility Requirements for Initial Certification, [page 2](#), 1. A., B. or C. for specific licensure/certification/registration requirements.

\*\* See Continuing Education Guidelines, [pages 29-30](#), for details.

**INITIAL**

## January 1, 2024 to June 30, 2024 Examination Content Outline

### I. Assessment of the Diabetes Continuum (59)

#### A. Learning (19)

1. Goals and needs of learner
2. Learning readiness (attitudes, developmental level, perceived learning needs, etc.)
3. Preferred learning styles (audio, visual, observational, psychomotor, etc.)
4. Technology literacy and use (devices, software, apps, virtual coaching, patient portals, etc.)
5. Challenges to learning (concrete vs. abstract thinking, literacy and numeracy, language, cultural values, religious beliefs, health beliefs, psychosocial and economic issues, family dynamics, learning disabilities, etc.)
6. Physical capabilities/limitations (visual acuity, hearing, functional ability, etc.)
7. Readiness to change behavior (self-efficacy, value of change, etc.)

#### B. Health and Psychosocial Status (19)

1. Diabetes-relevant health history (diagnosis/presentation, duration, symptoms, complications, treatment, etc.)
2. General health history (family history, allergies, medical history, etc.)
3. Diabetes-specific physical assessment (biometrics, site inspection, extremities, etc.)
4. Data trends (laboratory and self-collected)
5. Current use of technology (meters, pumps, sensors, apps, software, etc.)
6. Treatment fears and myths (hypo/hyperglycemia, causes, complications, needles, weight gain, etc.)
7. Family/caregiver dynamics and social supports
8. Substance use (alcohol, tobacco, marijuana, caffeine, etc.)
9. Life transitions (living situation, insurance coverage, age related changes, etc.)
10. Mental health status (adjustment to diagnosis, coping ability, etc.)
11. Challenges to diabetes self-care practices (cognitive, language, cultural, spiritual, physical, economic, etc.)

#### C. Knowledge and Self-Management Practices (21)

1. Disease process
2. Eating habits and preferences
3. Activity habits and preferences
4. Monitoring (blood glucose, ketones, weight, etc.)
5. Record keeping (blood glucose, food, activity, etc.)
6. Medication taking habits (prescription, nonprescription, complementary and alternative medicine, etc.)
7. Use of health care resources (health care team, community resources, etc.)
8. Risk reduction (cardiovascular, etc.)
9. Problem solving

### II. Interventions for Diabetes Continuum (88)

#### A. Collaborate with Individual/Family/Caregiver/Health Care Team to Develop: (18)

1. Individualized education plan based on assessment (selection of content, learning objectives, sequence of information, communication, etc.)

2. Instructional methods (discussion, demonstration, role playing, simulation, technology-based platforms, etc.)
3. Goals for lifestyle changes (S.M.A.R.T. goals, AADE-7, etc.)

#### B. Educate Based on Individualized Care Strategies (35)

1. General topics
  - a) Classification and diagnosis
  - b) Modifiable and non-modifiable risk factors
  - c) Pathophysiology (auto-immunity, monogenic, insulin resistance, secondary diabetes, cardiometabolic risks, etc.)
  - d) Effects and interactions of activity, food, medication, and stress
  - e) Drug and non-drug treatment options (access, risk/benefit, etc.)
  - f) Immunizations
  - g) Therapeutic goals (A1C, blood pressure, lipids, quality of life, etc.)
  - h) Laboratory test interpretation (A1C, lipids, renal and hepatic function tests, etc.)
  - i) Evidence-based findings for decision support (Diabetes Prevention Program, Diabetes Attitudes Wishes and Needs study, clinical trials, etc.)
2. Living with diabetes and prediabetes
  - a) Healthy coping (problem solving, complications, life transitions, etc.)
  - b) Psychosocial problems (depression, eating disorders, distress, etc.)
  - c) Role/Responsibilities of care (individual, family, team, etc.)
  - d) Social/Financial issues (employment, insurance, disability, discrimination, school issues, etc.)
  - e) Lifestyle management
  - f) Record keeping (blood glucose logs, food records, etc.)
  - g) Safety (sharps disposal, medical ID, driving, etc.)
  - h) Hygiene (dental, skin, feet, etc.)
3. Monitoring
  - a) Glucose (meter selection, continuous glucose sensing, sites, etc.)
  - b) Ketones
  - c) A1C
  - d) Blood pressure and weight
  - e) Lipids and cardiovascular risk
  - f) Renal and hepatic (function studies, microalbuminuria, serum creatinine, etc.)
4. Nutrition principles and guidelines
  - a) American Diabetes Association (ADA) and Academy of Nutrition and Dietetics nutrition recommendations (meal planning, macro/micronutrients, etc.)
  - b) Carbohydrates (food source, sugar substitutes, fiber, carbohydrate counting, etc.)
  - c) Fats (food source, total, saturated, monounsaturated, etc.)
  - d) Protein (food source, renal disease, wound care, etc.)
  - e) Food and medication integration (medication timing, meal timing, etc.)
  - f) Food label interpretation (nutrition facts, ingredients, health claims, sodium, etc.)
  - g) Alcohol (amount, precautions)
  - h) Weight management (adult and childhood obesity, failure to thrive, fad diets, etc.)

## Examination Content Outline – For individuals testing January 1, 2024 through June 30, 2024

- i) Special considerations (food allergies, food aversion, gastroparesis, celiac disease, metabolic surgery, etc.)
  - j) Dietary and herbal supplements
  - 5. Activity
    - a) ADA and American College of Sports Medicine recommendations
    - b) Benefits, challenges, and precautions (comorbid conditions, post exercise delayed onset hypoglycemia, etc.)
    - c) Activity plan (aerobic, resistance training, etc.)
    - d) Adjustment of monitoring, food, and/or medication
  - 6. Medication management
    - a) ADA, European Association for the Study of Diabetes (EASD), American Association of Clinical Endocrinologists (AAACE) guidelines
    - b) Medications (insulin, oral and injectable medications, administration, side effects, etc.)
    - c) Delivery systems (pump therapy, devices, etc.)
    - d) Medication adjustment
    - e) Interactions (drug-drug, drug-food, etc.)
    - f) Non-prescription preparations
  - 7. Acute complications: causes, prevention and treatment
    - a) Hypoglycemia
    - b) Hyperglycemia
    - c) Diabetic ketoacidosis (DKA)
    - d) Hyperosmolar hyperglycemic state (HHS)
  - 8. Chronic complications and comorbidities: causes, prevention and treatment
    - a) ADA Clinical Practice screening recommendations
    - b) Eye disease (retinopathy, cataracts, glaucoma, etc.)
    - c) Sexual dysfunction
    - d) Neuropathy (autonomic, peripheral, etc.)
    - e) Nephropathy
    - f) Vascular disease (cerebral, cardiovascular, peripheral, etc.)
    - g) Lower extremity problems (ulcers, Charcot foot, etc.)
    - h) Dermatological (wounds, yeast infection, ulcers, etc.)
    - i) Infection (genitourinary tract, pulmonary, skin and soft tissue, etc.)
    - j) Dental and gum disease
    - k) Comorbidities (hypertension, heart disease, depression, cognitive dysfunction, thyroid disease, celiac disease, obesity, sleep apnea, polycystic ovarian syndrome, etc.)
  - 9. Problem Solving and Other Management Issues
    - a) Honeymoon period, dawn phenomenon
    - b) Hypoglycemia unawareness
    - c) Pump, device, and sensor
    - d) Sick days
    - e) Surgery and special procedures
    - f) Changes in usual schedules (shift, religious, cultural, etc.)
    - g) Travel
    - h) Emergency preparedness
    - i) Physical capabilities and limitations (visual acuity, hearing, functional ability, etc.)
    - j) Assistive and adaptive devices (talking meter, magnifier, etc.)
    - k) Pre-conception planning, pregnancy, post-partum, and gestational diabetes
    - l) Special populations (pediatric, adolescence, geriatric, etc.)
    - m) Transitions of care (pediatric, young adult, care settings, etc.)
    - n) Substance use (alcohol, tobacco, marijuana, caffeine, etc.)
    - o) Disparities (economic, access, sex, ethnicity, geographic, mental capabilities, etc.)
  - C. Evaluate, Revise and Document (26)
    - 1. Weight, blood glucose patterns, eating habits, medication management, activity
    - 2. Self-reports and/or device downloaded reports
    - 3. Evaluate the effectiveness of interventions in:
      - a) achievement and progress toward goals
      - b) self-management skills
      - c) psychosocial adjustment
      - d) unexpected challenges (loss of insurance, job change, etc.)
    - 4. Individual's plan for the continuum of care with health care team and follow-up education and support
  - D. Referral, Support, and Follow-Up (9)
    - 1. Issues requiring referral
      - a) Education (diabetes, diabetes prevention program, peer, group vs. individual, behavioral, etc.)
      - b) Medical Nutrition Therapy
      - c) Exercise
      - d) Lifestyle coaching
      - e) Behavioral health
      - f) Learning disabilities
      - g) Medical care (foot care, dilated eye exam, pre-conception counseling, family planning, sexual dysfunction, etc.)
      - h) Risk reduction (smoking cessation, obesity, preventative services, etc.)
      - i) Medication management
      - j) Sleep assessment
      - k) Financial and social services
      - l) Discharge planning, home care, community resources (visual, hearing, language, etc.)
    - 2. Support (community resources, care managers, peer, prescription assistance programs, etc.)
    - 3. Communication between diabetes educator and health care team
- ### III. Disease Management (28)
- A. Education Services Standards (8)
    - 1. Apply National Standards for Diabetes Self-Management Education and Support (NSDSMES)
      - a) Perform needs assessment (target population, etc.)
      - b) Develop curriculum (identify program goals, content outline, lesson plan, teaching materials, etc.)
      - c) Choose teaching methods and materials for target populations
      - d) Evaluate program outcomes (number of people served, provider satisfaction, patient satisfaction, effectiveness of diabetes education materials, etc.)
      - e) Assess patient outcomes (behavior changes, A1C, lipids, weight, quality of life, emergency department visits, hospitalizations, work absences, etc.)
      - f) Perform continuous quality improvement activities
      - g) Maintain patient information and demographic database
  - B. Clinical Practice (18)
    - 1. Apply practice standards (AAACE, ADA, Endocrine Society, etc.)
    - 2. Implement and support population management strategies
    - 3. Identify medical errors and employ risk mitigation strategies
    - 4. Mentor staff (clinical and non-clinical) and/or lay leaders in need of education
    - 5. Advocate formulary management of diabetes medications and supplies
  - C. Diabetes Advocacy (2)
    - 1. Promote primary and secondary diabetes prevention strategies in at risk individuals and populations
    - 2. Participate in community awareness, health fairs, media

## Examination Content Outline

**Effective July 1, 2024**

### I. Assessment (37)

#### A. Physical and Psychosocial (12)

1. Diabetes-relevant health history (diagnosis, duration, symptoms, complications, treatment, comorbidities, healthcare utilization)
2. Diabetes-specific physical assessment (biometrics, site inspection, extremities, etc.)
3. Social determinants of health (economic, living situation, healthcare access, social supports, and food/housing insecurity)
4. General health history (family, medical, mental health, substance use, surgical, allergies and medication)
5. Diabetes measures and other laboratory data
6. Mental health wellbeing (adjustment to diagnosis, coping ability, etc.)
7. Considerations related to diabetes self-care practices (cognitive, physical, language, cultural, spiritual, family/caregiver dynamics, fears and myths, life transitions, etc.)

#### B. Self-Management Behaviors and Knowledge (15)

1. Disease process
2. Eating habits and preferences
3. Activity habits and preferences
4. Medication practices and preferences (prescription, nonprescription, complementary and alternative medicine)
5. Monitoring and data collection (glucose, ketones, weight, dietary intake, activity, etc.)
6. Use of resources
7. Use of technology (monitors, smart delivery systems, apps, online education, patient portals, etc.)
8. Risk reduction of acute and chronic complications
9. Problem solving

#### C. Learning (10)

1. Goals and needs of learner
2. Readiness to learn and change behavior
3. Preferred learning styles (audio, visual, observational, psychomotor, individual vs. group, virtual, etc.)
4. Literacy, numeracy, health literacy, and digital literacy
5. Considerations related to learning (developmental stage, physical abilities, language preferences, cultural, spiritual, psychosocial, economic, family/caregiver dynamics, learning disabilities, etc.)

### II. Care and Education Interventions (105)

#### A. Disease Process and Approach to Treatment (22)

1. Diagnosis and classifications
2. Pathophysiology including honeymoon period, dawn phenomenon
3. Modifiable and non-modifiable risk factors
4. Lifestyle management (activity, food, sleep, and stress)
5. Pharmacological approaches and options
6. Treatment goals (glycemic metrics, blood pressure, lipids, risk reduction, quality of life)

#### B. Individualized Education Plan (17)

1. Develop plan based on assessment, in collaboration with person with diabetes/pre-diabetes and care team
2. Identify instructional methods
3. Set S.M.A.R.T. goals

#### C. Person-Centered Education on Self-Care Behaviors (58)

1. Nutrition Principles and Guidelines
  - a) American Diabetes Association (ADA) and Academy of Nutrition and Dietetics nutrition recommendations (meal planning, macro/micronutrients, dietary approaches, etc.)
  - b) Carbohydrates (types, food source, sugar alcohol and substitutes, carbohydrate counting)
  - c) Fats (types, food source)
  - d) Protein (food source, renal disease, wound care)
  - e) Alcohol (amount, precautions)
  - f) Food and medication integration (medication timing, meal timing, etc.)
  - g) Food label interpretation (nutrition facts, ingredients, health claims, sodium, etc.)
  - h) Weight management
  - i) Dietary and herbal supplements
  - j) Special considerations (food allergies, food aversion, gastroparesis, celiac disease, metabolic surgery, failure to thrive, disordered eating, etc.)
2. Physical Activity
  - a) ADA and American College of Sports Medicine recommendations
  - b) Benefits, challenges, and safety (comorbidities, post exercise delayed onset hypoglycemia, etc.)
  - c) Activity plan (frequency, intensity, time, and types)
  - d) Adjustment of monitoring, food, and/or medication for planned and unplanned activities
3. Medication Management
  - a) ADA/European Association for the Study of Diabetes (EASD) guidelines
  - b) Medications (class, action, administration, side effects, contraindications, etc.)
  - c) Medication selection (cardiorenal protection, glycemic efficacy, impact on weight, types and duration of diabetes, cost, hypoglycemia risk)
  - d) Medication adjustment
  - e) Insulin delivery systems
  - f) Immunizations
4. Monitoring and Interpretation
  - a) Glucose (device selection, use, testing techniques, metrics)
  - b) Ketones
  - c) A1C
  - d) Blood pressure
  - e) Weight
  - f) Lipids
  - g) Kidney health

## Examination Content Outline

**Effective July 1, 2024**

- h) Hepatic function
- 5. Acute Complications: Causes, Prevention, and Treatment
  - a) Hypoglycemia and hypoglycemia unawareness
  - b) Hyperglycemia
  - c) Diabetic ketoacidosis (DKA)
  - d) Hyperosmolar hyperglycemic state (HHS)
- 6. Chronic Complications and Comorbidities: Causes, Prevention, and Treatment
  - a) ADA Clinical Practice screening recommendations
  - b) Eye disease (retinopathy, cataracts, glaucoma, etc.)
  - c) Sexual dysfunction
  - d) Neuropathies
  - e) Nephropathy
  - f) Vascular disease (cerebral, cardiovascular, peripheral, etc.)
  - g) Lower extremity problems (ulcers, Charcot foot, etc.)
  - h) Dermatological (wounds, ulcers, site reactions)
  - i) Infection (genitourinary tract, pulmonary, skin and soft tissue)
  - j) Dental and gum disease
  - k) Other comorbidities (depression, cognitive dysfunction, thyroid disease, celiac disease, obesity, sleep apnea, polycystic ovarian syndrome, etc.)
- 7. Problem Solving
  - a) Sick days
  - b) Surgery and other procedures
  - c) Changes in schedules (shift, religious, cultural, etc.)
  - d) Travel
  - e) Emergency preparedness
  - f) Assistive and adaptive devices (talking meter, magnifier, etc.)
  - g) Substance use (alcohol, tobacco, marijuana, caffeine, etc.)
- 8. Living with Diabetes and Prediabetes
  - a) Life changes
  - b) Transitions of care
  - c) Special populations (pediatric, adolescence, geriatric, transplant, etc.)
  - d) Pre-conception planning, pregnancy, post-partum, and gestational diabetes
  - e) Psychosocial wellbeing (depression, disordered eating, distress, etc.)
  - f) Role/Responsibilities of care (individual, family, team)
  - g) Safety (sharps disposal, medical ID, driving, etc.)
  - h) Personal hygiene (dental, skin, feet, etc.)
  - i) Social/Financial considerations (employment, insurance, disability, discrimination, school issues, etc.)
- D. Evaluation, Documentation, and Follow-up (8)
  - 1. Evaluate the effectiveness of interventions related to:
    - a) achievement and progress toward goals
    - b) self-management skills
    - c) psychosocial wellbeing
    - d) weight, eating habits, medications, activity
    - e) glycemic metrics
  - 2. Revise, document, and communicate individual's plan for follow-up care, education, support, and referral

### III. Standards and Practices (8)

- A. Describe the current National Standards for Diabetes Self-Management Education and Support (NSDSMES)
- B. Describe the National Diabetes Prevention Program Standards (National DPP)
- C. Apply practice standards (ACE, ADA, Endocrine Society, etc.)
- D. Describe population health strategies
- E. Collaborate with other healthcare professionals to advance team-based care.
- F. Advocate for people with diabetes (access to medications and supplies, care in institutional settings, policies, etc.)
- G. Promote primary and secondary diabetes prevention strategies in at risk individuals and populations
- H. Promote evidence-based care and education
- I. Recognize the impact of disparities (economic, access, gender, ethnicity, geographic, etc.)
- J. Incorporate principles of diversity, equity, and inclusion

### Application Process

To qualify for the examination, you must meet ALL the eligibility requirements prior to placing your application. For initial certification, to assist you in determining if you meet the eligibility requirements, you may want to review the Assess Your Readiness to Apply sheet on page 5 in this Handbook.

Applicants may apply year round and submit applicable fee(s). Upon eligibility confirmation and application approval, candidates are issued a 90-day window in which to schedule and take the Examination. All applications submitted become the property of CBDCE. **Those who apply are advised to retain a copy for personal reference.** Under no circumstances are applications, including copies, returned to applicants.

Documentation of eligibility does not need to be submitted with an application for the Examination. However, CBDCE reserves the right to verify and/or audit information supplied by an applicant.

If selected for an audit, the applicant will be asked to submit appropriate documentation supporting eligibility. The necessary documentation must be received by the deadline date. Individuals selected for audits will not be able to make appointments for the Examination until their applications have been approved. Neither the CBDCE national office nor PSI can provide the status of an audit via telephone, facsimile or email.

Upon eligibility confirmation and application approval, candidates are issued a 90-day window in which to schedule and take the Examination.

### How to Apply for an Examination

Step	Candidate Action
1.	Login or create an account at <a href="http://www.cbdce.org">www.cbdce.org</a> .
	Currently have an account at CBDCE? Log in with your username and password and click on Get Certified to begin the application process.
	Don't have an account at CBDCE? If you do not have an account at CBDCE, you will need to create one. To create an account, visit <a href="http://www.cbdce.org">www.cbdce.org</a> > click on Sign In > Select New User? Create an Account! and follow the prompts to create your CBDCE account.
	Forgot your Password or Username? Use the forgot password on the login page.
2.	To begin your registration, click on the Get Certified > Select your exam to begin the application. There are four (4) steps to complete.

Step	Candidate Action
3.	Payment – Your final step in the process is to provide payment. Complete the payment page with your payment information.
4.	Status – You will know upon submittal of your application if you are selected for an audit or approved to take the exam.
	Audit – If you are audited, you will need to provide documentation in support of meeting the eligibility requirements. Be on the lookout for an email with the audit instructions.
	Approved – If eligibility is confirmed and application approved for the exam, you will be provided an eligibility email with your 90-day testing window to schedule an examination appointment and take the examination. Once you receive your eligibility email, you are good to schedule your exam.

### Registration/Testing Reminders

- CBDCE offers year-round testing.
- Candidates can choose to test at a testing center or via Live Remote Proctoring (LRP). Candidates should review the various testing options prior to registering to decide which option is right for them.
  - Candidates wishing to test at a Testing Center, will want to visit our site list for the available testing centers.
  - Candidates wishing to test via LRP will want to make sure their computer/internet and testing environment meet the LRP testing requirements. Candidates can test their device using a compatibility check. Candidates using a work computer must have administrative rights to disable any firewalls to download the testing environment and/or may need the assistance of YOUR IT department or approval. It is the candidate responsibility that the computer/internet/testing environment meet the established requirements. Review the CBDCE Guide to LRP for complete details.
- ID Reminder: If you are creating your account, you will want to make sure that the name on your account is the same as that appears on the government-issued ID that you will be using on exam day. Refer to page 20 for acceptable forms of ID.
- Special Accommodations: If you require special accommodations, special accommodations requests must be requested during the registration process and approved by CBDCE before scheduling the exam. Once the accommodation is approved, candidates can schedule through the PSI Exam Accommodations team.

## Testing Window

An individual's application is only valid for 90 days after approval. **An examination appointment must be made and the examination must be taken within 90 days from application approval.** Those who fail to schedule an appointment within the testing window forfeit the application and all fees paid to take the Examination. A complete application and fee(s) are required to reapply for Examination. Unscheduled individuals (walk-ins) are not tested.

Click here to see Audit Documentation:  
<https://www.cbdce.org/apply-and-schedule>

## Examination Administration

Registration for the CDCE exam is ongoing and testing is year round. Candidates may take the exam by either testing at a PSI Test Center or testing by Live Remote Online Proctoring (LRP). Candidates should thoroughly review the information on testing choices to determine which one is best for them. Detailed information on each method of testing, including requirements for LRP, can be found on [pages 18-26](#) in this Examination Handbook.

### Testing at a Test Center

The Examination is delivered by computer at approximately 300 Test Centers throughout the United States and selected international locations. The Examination is administered by appointment only, Monday through Saturday. Appointment starting times may vary by location. Visit section "Testing at a Test Center" [page 18](#) for complete details including instructions for applying and testing.

### Testing via Live Remote Proctoring (LRP)

The Examination is delivered via Live Remote Online Proctoring to a candidate using their own computer from their home. The candidate must have a computer that meets the requirements for the LRP. Visit section "Testing by Live Remote Online Proctoring" [page 23](#) and [CBDCE Guide to Live Remote Proctoring](#) for complete details on the requirements for this method of testing.

## Copyrighted Examination Questions

All Examination questions are the copyrighted property of CBDCE. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these Examination questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

## Requests for International Test Centers (Outside United States)

CBDCE and PSI are making computerized examinations available outside of the United States. For information regarding the availability of international computerized Test Centers, please visit the website at <http://schedule.psiexams.com>. PSI is continuing to expand its international locations and more locations are being added throughout the year.

There is no additional fee for applicants who reside in one of the U.S. territories where an international Test Center is available. Individuals residing outside of the United States or its territories who are interested in testing at an international Test Center will need to submit a completed application form, the

### Examples - Examination Schedule

If you . . .	If your Application was . . .	Your 90-Day Exam Testing Window – Must Take Exam:
Apply Online – 5/20/2024	Processed and Approved – 5/20/2024	90 days from approval, or by 8/18/2024

## Fees

Initial or Expired Application . . . . . \$350+  
 Renewal of Certification Application . . . . . \$250  
 +UQ applicants pay \$200 with first application, \$350 with any subsequent applications.

**Fee payments may be made by credit card (VISA, MasterCard, American Express or Discover), or by check.** Do not send cash. Declined credit cards and/or insufficient fund checks returned are subject to a penalty. Repayment of a declined credit card or payment for an insufficient fund check and the penalty must be made with a cashier's or certified check or money order. Unless and until all fees have been paid in full, application processing will not be completed.

Processing of payment does not confirm acceptance to take the Examination. **In the event an application for the Examination is rejected by CBDCE, a \$100 nonrefundable processing fee will be retained and the remainder of the application fee refunded.**

## Adherence to Published Policies

Eligibility requirements and fee payment policies are strictly enforced by CBDCE. **No exceptions will be made.** If requested, applicants must respond with additional information to verify eligibility.

Applicants who apply online are advised to print and keep a copy of the "Eligibility Confirmation" page for their records.

## Audit Policy

CBDCE conducts random audits on a regular basis and also reserves the right to audit at any time any application submitted for certification.



application fee, and an international Test Center fee of \$200. All other rules and regulations regarding the computerized examination apply to international examination applicants. All examinations will be given in computerized format only. International applicants will not receive instant score reports. Results will be sent via U.S. mail within 3-5 business days after completion of the examination to the applicant's address of record.

### Requests for Special Accommodations

CBDCE complies with the Americans with Disabilities Act ("ADA") and provides reasonable and appropriate accommodations for those with documented disabilities taking the Examination and for other individuals taking the Examination with qualifying medical conditions that may be temporary or are not otherwise covered by the ADA. Accommodations may be made for these individuals, provided a request for special accommodations is submitted to CBDCE **with** the application and the request is approved. The form for requesting special accommodations is included on [pages 44-45](#). Instructions for completion must be followed and both required documents submitted.

If you require special accommodations, you will need to indicate this during the exam registration as well as upload the (completed) Request Special Accommodation and Documentation of Disability-Related Needs forms.

Requests for special accommodations are reviewed on an individual basis. CBDCE will make reasonable efforts to provide requested special accommodations for those who have documented disabilities or qualifying medical conditions. Decisions about medical conditions not covered by the ADA are made at the sole discretion of CBDCE.

For applicants anticipating the need for food or beverages for medical reasons, please provide notification to PSI Exam Accommodations at 800-367-1565 ext. 6750 prior to the Examination. Individuals testing at a Test Center can take breaks as necessary to access and consume these items outside of the testing room. Food and beverages are NOT allowed inside the testing room. Additional testing time is not provided for any breaks.

### Changes after the Application Is Submitted

Any changes in your name or address can be made in your CDCES account. All name changes must be made at least 72 hours prior to your examination appointment.

### Rejected Applications

1. Applications may be rejected under the following circumstances:
  - A. CBDCE determines that the applicant did not meet eligibility requirements.

- B. The application is incomplete in any way or improperly completed.
- C. The applicant, if selected for audit, does not submit required documentation by the audit deadline date.

When an application is rejected for any of these reasons, the application fee, minus a \$100 processing fee, will be refunded.

2. Applications may be rejected if the payment for the application fee(s) is not honored by the card issuer or bank and is not resubmitted on a timely basis.

### Appeals – Policies – Eligibility

Appeals are available only to individuals whose applications are rejected because of failure to meet eligibility requirements. The procedure for filing an appeal is sent with the notice of ineligibility. Those who elect to appeal should be aware that the appeals process cannot be completed in time for successful appellants to take the Examination within the 90-day window.

Appeals are not available to individuals whose applications are rejected for any other reason, including being incomplete or improperly completed, or when for other reasons evaluation of the application cannot be completed.

### Withdrawals and Refunds

Except for the situations below, once submitted, applications may not be withdrawn and fees are not refunded.

After an individual's eligibility has been confirmed, an individual may request one of the following:

- a) Transfer of the application to a new 90-day window (one time only). The request must be received no later than 10 business days prior to their scheduled appointment. If the request is received in the required time frame, an individual may schedule their appointment in a new 90 day window with payment of a \$100 transfer fee. The new 90-day window begins from approval date of transfer. Transfers are not available if requests are received fewer than 10 business days prior to scheduled appointment. Note: The acceptance of a transfer request does not extend the expiration date of a CDCES credential. An individual holding the CDCES credential who does not successfully renew during the year of expiration must stop using the credential after the expiration date and cannot resume using the credential until written confirmation of passing the examination is received.
- b) To withdraw from the examination and obtain a refund of the application fee, less the \$100 non-refundable processing fee (and any other late/penalty fees). This option is available only when circumstances for withdrawal relate to medical situations involving the applicant or immediate family, a death in the immediate family, or other dire circumstances that take place fewer than 30 days prior to the scheduled appointment. Request for the withdrawal/refund must be submitted in writing to the CBDCE national office via mail

or facsimile and should include documentation pertinent to and supporting the reason for the withdrawal. The request must be received no later than 30 days after the scheduled appointment. Requests will be considered on a case by case basis.

**If you cancel a scheduled exam, you must reschedule and test within your eligibility window. Refunds are NOT issued for canceled exams nor is eligibility extended.**

NOTE: Refer to Missed Appointments and Forfeitures, [page 19](#), for important information on failing to arrive at the Test Center on date/time scheduled.

### Scheduling an Examination

After you have received written confirmation of eligibility from PSI, there are two ways to schedule an appointment for the Examination.

1. **Online Scheduling:** Candidates can schedule their exam online through their CBDCE account.
  - Log into your CDCES account > Get Certified > select the Schedule button in your exam application > you will be redirected to PSI scheduling platform > follow the prompt to schedule your exam.
  - Follow the simple, step-by-step instructions to select your program and schedule an examination.

**OR**

2. **Telephone Scheduling:** Call PSI at 833-333-4754 to schedule an examination appointment. This toll-free number is answered from 7:00 a.m. to 9:00 p.m. (Central Time) Monday through Thursday, 7:00 a.m. to 7:00 p.m. on Friday and 8:30 a.m. to 5:00 p.m. on Saturday.

When scheduling an examination, be prepared to provide your assigned identification number and to confirm a location, a preferred date and time for testing. When PSI is contacted to schedule an examination appointment, you will be notified of the time to report to the Test Center. Please make note of it at that time because admission letters will NOT be sent.

### Holidays

Examinations are not offered on the following holidays:

New Year's Day  
Martin Luther King Jr. Day  
Memorial Day  
Independence Day (July 4)  
Labor Day  
Thanksgiving Day  
Day after Thanksgiving  
Christmas Eve Day  
Christmas Day

## Examination Information

### Examination Construction and Scoring

CBDCE develops the Certification Examination for Diabetes Care and Education Specialists (Examination) with the technical assistance of a testing agency. The two organizations work together to construct and validate the examination. CBDCE periodically conducts a survey of diabetes care and education specialists practice – often called a practice or job analysis. The study surveys Certified Diabetes Care and Education Specialists to determine the significance of specific tasks to a CDCES's practice. The practice analysis information is used to develop the examination content outline and to determine the percent distribution of the items for the role. Therefore, the subject matter and importance of each item on the examination reflects data validated by this periodic study.

CBDCE selects CDCESs who represent the multidisciplinary aspect of profession to serve on its Examination Committee. The Examination Committee drafts the examination's multiple-choice items, which are then edited and validated by the testing agency, and approved by the Committee for inclusion on the examination. The Examination Committee and the testing agency review all the examination items for subject matter, validity, difficulty, relevance, bias, and importance for current practice. All items are evaluated, classified, and revised by the Examination Committee and the testing agency for conformance to psychometric principles. Each item is pretested prior to its use and must meet statistical parameters prior to being used as a scored item.

On the basis of a completed practice analysis, it is usually necessary to develop a new examination form to reflect the updated examination content outline and to review the minimum passing point/score. A Passing Point Study is conducted by a panel of experts in the field. The methodology used to set the minimum passing score is the Angoff method. For those testing January 1, 2024, through June 30, 2024, CBDCE uses the analysis which was completed in 2018, with the examination content outline being implemented starting with July 1, 2019 examinations and running through June 30, 2024. In conducting the Passing Point Study, the experts evaluated each question on the 2019 examination beginning July 1, 2019 to determine how many correct answers were necessary to demonstrate the knowledge and skills required to pass the examination, while keeping in mind the need to ensure that the passing score was consistent with the intended purpose of the examination. For individuals testing starting July 1, 2024, CBDCE will use the most recent analysis which was completed in 2023.

Scores are reported as raw scores and scaled scores. A raw score is the number of correctly answered questions; a scaled score is statistically derived from the raw score. The total score determines whether candidate passes or fails; it is reported as

a scaled score ranging between 0 and 99. The minimum scaled score needed to pass the examination has been set at 70 scaled score units.

See Following The Examination, Scoring of the Exam for more information on scoring ([page 16](#)).

### Details

The Examination is a written examination composed of multiple-choice, objective questions with a total testing time of four (4) hours. Questions on the Examination are linked directly to a task or tasks. Each question, therefore, 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.

The questions are developed and reviewed for relevancy, consistency, accuracy, and appropriateness by individuals with expertise in diabetes care and education. Twenty-five of the questions are pre-test questions that have not been used on previous Examinations. Inclusion of these questions allows for collection of meaningful statistics about new questions, but are not used in the determination of individual Examination scores. These questions are not identified and are scattered throughout the Examination so that candidates will answer them with the same care as the questions that make up the scored portion of the Examination. This methodology assures candidates that their scores are the result of sound measurement practices and that scored questions are reflective of current practice.

Testing Dates	Number of Questions on the Exam
January 1, 2024 through June 30, 2024	200 questions (175 scored, 25 pre-test)
July 1, 2024 and forward	175 questions (150 scored, 25 pre-test)

### Testing of Advancements

CBDCE recognizes that advances in the treatment of diabetes continue to be made. It is also recognized that the dissemination of this information may not occur at the same rate in different areas of the United States. In consideration, CBDCE has developed the following policies:

1. New medical advances, guidelines, or pharmaceuticals impacting diabetes care and education and/or treatment of diabetes will be included in the Certification Examination for Diabetes Care and Education Specialists no sooner than one year after the information is released.
2. 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 included in the examination at any time.

## Studying for the Examination

The content of the Examination is not based on any one text, resource book or journal. Being a mastery level examination, **regardless of discipline, knowledge (and the ability to apply that knowledge) is necessary across all areas of the examination content outline.** Your practice experience should include at least some or all in the diabetes care and education process: assessment, education and care plan, interventions, ongoing support, monitoring and communication of participant progress, documentation, and development of DSMES services/administration.

## Examination Content Outline

The Examination Content Outline (ECO) identifies what is covered on the Examination. To assist in preparing for the Examination, CBDCE suggests that applicants refer to the ECO (see [pages 6-7](#)). Candidates should review the ECO and identify any areas in which additional review is needed. As the Examination Content Outline changes on July 1, 2024, please be mindful of this when preparing for the Examination.

## Resource List

If there are particular subject areas where additional study may be needed, resources specific to those areas may need to be identified. To assist in this process, CBDCE has compiled a list of suggested resources (see Appendix IV, [page 34](#)). The resources are suggestions ONLY. Their inclusion does not imply that Examination content is based on them, that all content will be covered, or that studying any of the resources will ensure success on the Examination. It should also not be inferred that Examination questions are based on any particular book or journal or that studying particular resources or attending any review course guarantees a passing score.

## Sample Questions

Several sample questions to help individuals become familiar with the structure and format of questions are available in this Handbook (see Appendix III, [page 33](#)).

CBDCE does not endorse, financially benefit from, or participate in the development of any preparatory or review courses or published materials claiming to be study guides for the Examination, except those published or sponsored by CBDCE.

## Practice Examination

CBDCE has developed a Practice Examination. The practice exam is not a training or educational product leading to initial certification, but rather serves as a test drive of the exam user experience. The practice exam is provided in an on-line format that an individual can access from their computer. With 50 multiple-choice questions; the practice exam is illustrative of the type and format of questions included on the actual Examination and can assist in 1) providing comfort with how the exam will look on the monitor in the test environment; and 2) using time management skills in reviewing the

questions and answers, providing the candidate with an indication of how to pace themselves come exam time. There is only one form of the Practice Examination.

Questions are based on the current Examination Content Outline (see [pages 6-7](#)). The practice examination and the actual Examination both represent a comparable sampling of questions that are selected from a larger pool of potential topics appropriate for diabetes care and education specialists.

NOTE: The focus of this examination is practice, rather than self-assessment. The score report does not include a report on specific items answered incorrectly; it will only identify scores by major content outline areas. Your individual results will remain confidential. Though aggregate scores (i.e., without individual identifiers) may be reviewed by CBDCE to evaluate the practice examination process.

There is a fee to take the practice examination and payment must be made via credit card. Individuals can take the practice examination online within a 60-day window after purchase (or until one finishes the practice exam, whichever comes first). For more information about the practice examination and how to purchase one, please use the following Internet address: <http://store.lxr.com/dept.aspx?id=71>.

CBDCE does not require, provide, accredit, or endorse any specific study guides, training or review courses, or other examination preparation products. The CBDCE practice examination is developed independently from the certification Examination and is NOT a requirement for certification. CBDCE and its subject matter experts do not have involvement in the creation, accreditation, approval, endorsement or delivery of examination review courses, preparatory materials, educational programs, or training programs/products that prepare candidates for the certification Examination.

Neither CBDCE Board of Directors nor subject matter experts may counsel or provide assistance to organizations developing the content for review courses or materials. Continuing education credits are not awarded by the CBDCE.

## Following the Examination

### Scoring of the Exam

Scores are released only to the candidates and are reported in written form only, in person or by U.S. mail or email. Scores are not reported over the telephone or by facsimile.

Examination scores are reported as raw scores and scaled scores. A raw score is the number of correctly answered questions; a scaled score is statistically derived from the raw score. The total score determines whether candidate passes or fails; it is reported as a scaled score ranging between 0 and 99.

The minimum scaled score needed to pass the examination has been set at 70 scaled score units. The reason for reporting scaled scores is that different forms (or versions) of the examination may vary in difficulty. As new forms of the examination are introduced each year, a certain number of questions in each content area are replaced. These changes may cause one form of the examination to be slightly easier or harder than another form. To adjust for these differences in difficulty, a procedure called "equating" is used. The goal of equating is to ensure fairness to all candidates.

In the equating process, the minimum raw score (number of correctly answered questions) required to equal the scaled passing score of 70 is statistically adjusted (or equated). For instance, if the examination is determined to be more difficult than the previous form of the examination, then the minimum raw passing score required to pass will be slightly lower than the original raw passing score. If the examination is easier than the previous form of the examination, then the minimum raw score will be higher. Equating helps to ensure that the scaled passing score of 70 represents the same level of competence no matter which form of the examination a candidate takes.

In addition to the candidate's total scaled score and the scaled score required to pass, raw scores are reported for the three major categories on the Content Outline. The number of questions answered correctly in each major category compared to the total number of questions possible in that category is reported on the score report (e.g., 15/20). Content categorical information is provided to assist candidates in identifying areas of relative strength and weakness; however, passing or failing the examination is based ONLY on the scaled score. Although a degree of confusion might be avoided by reporting only scaled scores to candidates, CBDCE and PSI believe that by reporting raw scores in addition to scaled scores, candidates can learn important information about their area(s) of weakness by examining raw subscores by content areas.

While we are confident in the integrity, reliability, and validity of our scoring procedures and processes, score verifications will be available for a period of 12 months from the date of an administration for a fee of \$25. All rescores will be performed by PSI. Individuals seeking a score verification must submit a request along with a \$25 score verification fee payable to PSI Services Inc. by mailing check or money order addressed to PSI Services,

18000 W 105th St, Olathe, KS 66061. The request must also include the candidate testing information such as the name of the exam, candidate first and last name, exam ID number, testing location, and test date.

Questions concerning Examination results must be referred in writing to CBDCE or PSI Examination Services Department.

Refer to Confidentiality, [page 1](#).

### Re-Examination

There is no limit to the number of times unsuccessful candidates may take the Examination, provided eligibility requirements in effect at the time of applying for re-examination are met. A current Application must be submitted with applicable fee each time.

### Appeals – Policies – Testing Circumstances

- In the rare event that a problem arises in the administration of an examination, it may affect an individual or group of applicants. Problems may include, without limitation, power failures, defective equipment, or other disruptions of exam administrations such as natural disasters or other emergencies. When these atypical circumstances occur, the testing agency will conduct an investigation to provide information to CBDCE. Based on this information, CBDCE, at its sole discretion, may not score the exam, may withhold reporting of a score while CBDCE reviews the matter, or may cancel/ invalidate the test score. If CBDCE deems it appropriate to do so, CBDCE will work with the testing agency to give affected candidates the opportunity to retake the exam as soon as possible, at no additional cost. Affected applicants will be notified of the reasons for the cancellation and their options for retaking the examination.
- Applicants who do not pass the examination and believe irregular testing conditions (such as a disturbance) were a contributing factor may file an appeal with the CEO. All appeal requests must be filed no later than fifteen (15) days after the applicant's examination administration date. All appeals must describe the suspected problem and the requested remedy. Appeals based on irregular testing conditions will be reviewed by CBDCE only in the event the applicant does not pass the examination. If the applicant passes the examination, the appeal will be terminated without a decision on the appeal.
- Notice of the CEO's final determination will be provided to the applicant, and the determination of the CEO will be final.
- Applicants may not:
  - » Obtain copies of the examination
  - » Appeal the content or interpretation of CBDCE's examination questions or examinations.

You can find information in the Appeals Section on the CBDCE FAQ web page, located at <https://www.cbdce.org/faqs>.



## **Scores Cancelled by CBDCE or PSI**

CBDCE and PSI are responsible for the validity and integrity of the scores they report. On occasion, occurrences, such as computer malfunction or misconduct by a candidate, may cause a score to be suspect. CBDCE and PSI reserve the right to void or withhold examination results if, upon investigation, violation of its regulations is discovered.

## **Duplicate Score Report**

Score reports are available directly from PSI, CBDCE's testing agency, for a period of 12 months from the date of the exam administration. A fee of \$25 is required with each request for a duplicate score report. This fee is paid directly to PSI. Please contact PSI for additional information: [examschedule@psionline.com](mailto:examschedule@psionline.com) or 833-333-4754.

## **Certificates and Wallet Cards**

Complimentary certificates and wallet cards are provided by CBDCE to those who pass the Examination approximately three months after passing the Examination.

## **Use of Certification Marks**

Certification is a process by which recognition is granted to an individual who has satisfactorily met all requirements. Only after receiving official written notice of either passing the Examination or renewing certification may an individual use the mark "CDCES®" following his/her name. The marks CDCES®, CERTIFIED DIABETES CARE AND EDUCATION SPECIALIST®, and CDCES® in the design form(s) approved by CBDCE are also used on certificates, lapel pins, cards, and promotional materials in accordance with CBDCE policies.

The CDCES designation is not punctuated with periods. An example of proper use of the CDCES credential is as follows: Joan M. Smith, RN, MSN, CDCES®.

For additional information upon passing the Examination, visit our website: <https://www.cbdce.org/newly-certified>

## Testing at a Test Center

The CDCES exam is delivered at approximately 300 PSI Test Centers geographically located throughout the United States. A current listing of PSI Test Centers, including addresses and driving directions, may be viewed on the [PSI website](#). The examinations are administered by appointment only, Monday through Saturday. Appointment starting times may vary by location.

## Exam Scheduling

Candidates will schedule their exam online through their CBDCE account. Once eligibility is confirmed and application approved for the exam, candidates are provided an eligibility email with their 90-day testing window to schedule an examination appointment and take the examination. Candidates may schedule their exam upon issuance of eligibility. Candidates **MUST** schedule and take the exam within their 90-day eligibility window.

### To schedule Online:

1. Log into your CBDCE account.
2. Click on Schedule Your Exam where you will be redirected to the PSI dashboard to go through the process to schedule your exam.
3. Once on the PSI dashboard > click TESTS > you will then be prompted to select the exam modality > Continue Booking.
4. Enter the "City or Postal Code" and select "Radius > Find".



5. Click on the preferred test site.



6. Then click on the date and time to make an appointment to take the exam and confirm your selection by selecting Book This Time Slot > review and agree to terms > Confirm Booking.



7. Once you have scheduled your exam, you will receive a scheduling confirmation email from [no-reply@psiexams.com](mailto:no-reply@psiexams.com) confirming your exam appointment. Select the "My Home" link to view the exact reporting instructions for your examination.

**To schedule by Phone:** Call PSI at 833-333-4754.

This toll-free number is answered from 7:00 a.m. to 9:00 p.m. (Central Time) Monday through Thursday, 7:00 a.m. to 7:00 p.m. on Friday and 8:30 a.m. to 5:00 p.m. on Saturday. All individuals are scheduled on a first-come, first-served basis.

## Special Arrangements for Candidates with Disabilities

If special arrangements are being requested, submit the two-page Request for Special Examination Accommodations form found in the CBDCE Examination Handbook when you apply for the exam. For assistance with exam accommodations contact PSI at 800-367-1565 ext. 6750. PSI is interested in ensuring that no individual with a disability is deprived of the opportunity to take the examination solely by reason of that disability. PSI will provide reasonable accommodations for candidates with disabilities.

- Wheelchair access is available at all established Test Centers. Candidates must advise CBDCE/PSI at the time of registration that wheelchair access is necessary.
- Candidates with visual, sensory or physical disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements.

TESTING AT A TEST CENTER

## Examination Rescheduling and Transfer

You may reschedule the examination within your eligibility window at no charge if you make the change online in your CBDCE account at least 72 hours prior to the scheduled appointment. No changes can be made after that time.

Action	Steps to Complete
Reschedule Your Exam	<p>Candidates may only reschedule the exam to another date within their eligibility window. All reschedule requests must be completed a minimum of 72 hours prior to the schedule date.</p> <ol style="list-style-type: none"> <li>1. Login in at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Click &gt; Get Certified &gt; select the Schedule button in your exam application &gt; you will be redirected to PSI scheduling platform &gt; follow the prompt to re-schedule your exam</li> <li>3. Follow the on-screen instructions to reschedule your exam appointment.</li> </ol>

You can transfer your application to a new 90-day window (one time only) for the fee of \$100. Transfer requests must be received no later than 10 business days prior to your scheduled appointment or to your eligibility end date. Refer [page 12](#) section entitled "Withdrawals and Refunds" for details and [page 46](#) for the Transfer of Application form.

Action	Steps to Complete
Transfer to a new 90-day eligibility window	<p>Candidates may transfer to a new 90-day window by completing a transfer form and paying a \$100 transfer fee. Transfers must be requested at least 10 days prior to the scheduled date or your eligibility end date, whichever is earliest.</p> <p>To transfer to a new 90-day window:</p> <ol style="list-style-type: none"> <li>1. Login at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Click on Get Certified &gt; Application &gt; Extension Checkout Selection &gt; Yes &gt; Extension Checkout to make your payment. No transfer will be completed until payment is made in full and must be made by the dates above.</li> </ol>

## Missed Appointments and Forfeitures

You will forfeit the Examination registration and all fees paid under any one of the following circumstances.

- You wish to reschedule an examination appointment but fail to contact CBDCE at least two business days prior to the scheduled testing session
- You wish to reschedule a second time
- You appear more than 15 minutes late for an examination
- You fail to report for an examination appointment.
- You cancel your exam and do not schedule/reschedule within your eligibility window

A complete Application and appropriate fee are required to re-apply for a new 90-day testing window.

## Inclement Weather, Emergency or Power Failure

In the event of inclement weather or unforeseen emergencies on the day of an examination, PSI will determine whether circumstances warrant the cancellation and subsequent rescheduling of an Examination. The Examination will usually not be rescheduled if the Test Center personnel are able to open the Test Center.

You may visit [www.psonline.com/openings](http://www.psonline.com/openings) prior to the Examination to determine if PSI has been advised that any Test Centers are closed. Every attempt is made to administer the examination as scheduled; however, should an Examination be canceled at a Test Center, all scheduled candidates will receive notification following the original Examination date regarding rescheduling or reapplication procedures.

If power to a Test Center is temporarily interrupted during an administration, the Examination will be restarted. The responses provided up to the point of interruption will be intact.

## Prior to Exam Day

It is recommended that you familiarize yourself with any and all information necessary (exact location, traffic patterns, driving times, weather conditions, etc.) to arrive on time to your scheduled appointment. Your exam confirmation includes directional information. NOTE: CBDCE and PSI are NOT responsible for candidate delays caused by weather or candidates' unfamiliarity with routes to, or locations of, Test Centers. If possible, candidates are encouraged to do a 'dry run' to become familiar with the location and best route of travel.



### On the Day of the Examination

Report to the Test Center no later than your scheduled appointment time. Look for the signs indicating PSI Test Center Check-in. **IF YOU ARRIVE MORE THAN 15 MINUTES AFTER THE SCHEDULED EXAMINATION TIME, YOU WILL NOT BE ADMITTED AND WILL FORFEIT YOUR EXAM FEES PAID.**

If you are absent (no show), late, or refused admission for lack of proper identification, you must submit a new application(s) and fee(s). Neither applications nor fees are transferable.

To access an overview video of the testing experience, please use the following link: <https://psi.wistia.com/medias/3321yp1ic8>.

### Identification

You must have proper identification to gain admission to the Test Center. **The name on your primary identification must match the name on your exam registration.** Failure to provide appropriate identification at the time of the examination is considered a missed appointment and there will be no refund of your examination fee. You must have one (1) form of identification with a current photograph. Your identification must be valid and include your current name and signature. No form of temporary identification will be accepted. You will be required to sign a roster for verification of identity.

Acceptable forms of your primary identification include a current driver's license with photograph, a current state identification card with photograph, a current passport, or a current military identification card with photograph. Employment identification cards and student ID cards are NOT acceptable as the primary form of identification.

If your name on your exam registration has changed and is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

During the admission process and prior to beginning the examination, you will be required to participate in a process to biometrically verify your identify. Biometric identification may include photography, fingerprint scan, or other. All sessions are also subject to audio and video surveillance. If you do not agree to these conditions, you will not be able to test and will be excused from the Test Center. The fee will NOT be refunded. Failure to provide appropriate identification and fingerprint scan at the time of the examination is considered a missed appointment. There will be no refund of the application fee.

If you need to change your name to match your ID that will be used for exam check-in you can do so in your CDCES account.

Change Type	Candidate Action
Name	<p>The name on your CBDCE account must match the name (first and last) on the ID used to check-in for your exam. <b>Name change requests must be completed a minimum of 72 hours prior to your scheduled date.</b></p> <p>To update your name:</p> <ol style="list-style-type: none"> <li>1. Login at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Click Update my Profile.</li> <li>3. Make the necessary change</li> <li>4. Click SAVE</li> </ol>

### Security

PSI administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The Test Center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, tape recorders, pagers or cellular/smart phones are allowed in the testing room. Possession of a cellular/smart phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
- If needed there is an on-screen calculator for your use during the exam. The calculator is located in the lower left side of the screen.
- No guests, visitors or family members are allowed in the testing room or reception areas.

### Personal Belongings

No personal items, valuables, or weapons should be brought to the Test Center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker:

- watches
- hats
- wallets
- keys

Once you have placed everything into the soft locker, you will be asked to pull out your pockets to ensure they are empty. If all personal items will not fit in the soft locker you will not be able to test. The site will not store any personal belongings.

If any personal items are observed in the testing room after the examination is started, the administration and your exam fee will be forfeited.

## ▲ Examination Restrictions

Violation of any examination restrictions or misconduct may result in termination of your exam. Your exam fees will NOT be refunded if your exam is terminated.

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing, or you will not receive your score report.
- No documents or notes of any kind may be brought into or removed from the Test Center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking or smoking will not be permitted in the Test Center.
- Only individuals with medical reasons requiring access to food/beverages are allowed to bring these items into the Test Center. These special accommodation requests must be approved in advance of scheduling.
- No hats or large coats are allowed in the examination room.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

## ▲ Misconduct

If you engage in any misconduct during the examination you may be dismissed, your scores will not be reported and examination fees will not be refunded.

Examples of misconduct are when you:

- create a disturbance, are abusive, or otherwise uncooperative;
- display and/or use electronic communications equipment including, but not limited to, pagers, cellular/smart phones, etc.;
- talk or participate in conversation with other examination candidates;
- give or receive help or are suspected of doing so;
- leave the Test Center during the administration;
- attempt to record examination questions or make notes;
- attempt to take the examination for someone else;
- being observed with notes, books or other aids not listed on the roster;
- are observed with personal belongings.

## Computer Login

After your identification has been confirmed, you will be directed to a testing carrel. You will be instructed on-screen to enter your identification number. Your photograph, taken before beginning the examination, will remain on-screen throughout your examination session. This photograph will also print on your score report.

## Practice Testing

Prior to attempting the examination, you will be given an opportunity to practice taking an examination on the computer. The time you use for this practice examination is NOT counted as part of your examination time or score. When you are comfortable with the computer testing process, you may quit the practice session and begin the timed examination.

## Timed Examination

You will have four (4) hours to complete the examination. Before beginning the examination, instructions for taking the examination are provided on-screen.

Testing Dates	Number of Questions on the Exam
January 1, 2024 through June 30, 2024	200 questions (175 scored, 25 pre-test)
July 1, 2024 and forward	175 questions (150 scored, 25 pre-test)

The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time allowed. You may click on the Time box in the lower menu bar on the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The Time feature may be turned off during the examination.

Only one examination question is presented at a time. The question number appears in the lower right portion of the screen. Choices of answers to the examination question are identified as A, B, C, or D. You must indicate your choice by either typing in the letter in the response box in the lower left portion of the computer screen or clicking on the option using the mouse. To change your answer, enter a different option by typing A, B, C, or D or by clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.



### Examination Results

After completion of the exam and evaluation, candidates are instructed to report to the proctor to receive their score reports. Scores are released only to the candidates and are reported in written form only, in person or by U.S. mail or email. Scores are not reported over the telephone or by facsimile. Under certain circumstances, scores may be reported via email. If you do not receive a score report, please notify CBDCE at [info@cbdce.org](mailto:info@cbdce.org).

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you forward through the examination question by question. If you wish to review any question or questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.

An examination question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. Click on the double arrows (>>) to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the double arrows (>>). When the examination is completed, the number of questions answered is reported. If not all questions have been answered and there is time remaining, return to the examination and answer those questions. Be sure to provide an answer for each question before ending the examination. There is no penalty for guessing.

Should you need to perform any calculations, use the on-screen calculator located in the lower left hand corner of the screen. To enable the calculator, click on the calculator icon.

### Candidate Comments

During the examination, you may make comments for any question by clicking on the Comment button to the left of the Time button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided. Under no circumstances are candidates or other individuals allowed access to the Examination(s) or to specific questions (including obtaining copies) at any time.

Any issues experienced during the testing session should be brought immediately to the proctors attention on site in order to rectify the situation. After completing the examination, you are asked to answer a short evaluation of your examination experience. You should include any testing issues faced in your testing session in the evaluation.

## Testing by Live Remote Online Proctoring (LRP)

If you choose to test using the Live Remote Online Proctoring (LRP), the CDCES exam is delivered by Live Remote Online Proctoring to a candidate using their own computer from their home. A compatibility check of the computer's audio/video, webcam and system is required prior to scheduling.

### Brief Overview of LRP Testing Requirements

For detailed information refer to the Guide to Live Remote Online Proctoring (LRP) on the CBDCE website.

**Candidates are expected to review CBDCE's Guide to LRP to familiarize themselves with the platform requirements, testing environment rules, restrictions, and misconduct.**

**Computer requirements:** 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. You will want to make sure your computer has the most up-to-date browser version.



**Computer Compatibility:** You must perform a computer compatibility test on the computer you will be testing on to ensure your computer will operate as needed in the LRP testing environment. This should be done prior to your test day (including prior to selecting to take the exam via LRP) to ensure your computer is equipped to handle the exam. You will also need to do a last minute compatibility check on your test day. Visit <https://home.psiexams.com/static/#/bcheck> to check your computer. If you are using a work computer, you must have administrative rights to disable any firewalls to download the testing platform. Note that the compatibility check does NOT check for administration rights or firewalls. You WILL want to check with your IT staff to confirm your administrative rights if using your work computer. No refunds or exam rescheduling will be issued for individuals whose computers fail to meet the compatibility requirements at the time of the exam.

**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.

 **Breaks:** You are NOT allowed any breaks during your LRP exam session.

**Calculator:** The LRP platform has a calculator built-in. You can find the calculator in the lower left hand corner of the screen. Clicking on the calculator icon will display it for your use. You will

use the calculator in the LRP platform to perform any calculations needed.

**Communicating with your proctor:** Communications between you and the testing proctor will be conducted via chat during the testing session.

### Exam Scheduling

Candidates will schedule their exam online through their CBDCE account. Once eligibility is confirmed and application approved for the exam, candidates are provided an eligibility email with their 90-day testing window to schedule an examination appointment and take the examination. Candidates may schedule their exam upon issuance of eligibility. Candidates MUST schedule and take the exam within their 90-day eligibility window.

#### To schedule Online - Live Remote Proctoring:

1. Log into your CBDCE account.
2. Select your application > click on Schedule > where you will be redirected to the PSI dashboard to go through the process to schedule your exam.
3. Once on the PSI dashboard > click TESTS > you will then be prompted to select the exam modality.
4. Select Remote Online Proctored Exam and "Continue Booking". By scheduling your exam online, you are attesting to reviewing LRP testing requirements and CBDCE's Guide to Live Remote Proctoring and that your computer/internet/testing environment meets the LRP requirements.
5. Select your Country and Time Zone.



6. Select the date and time you will be taking the exam. DO NOT HIT CONTINUE. YOU MUST FIRST CHECK THE COMPATIBILITY OF YOUR COMPUTER to include Audio/Video Check, Webcam Check and System Check. You must use Google Chrome Browser. Please note that if your computer performs any system update (i.e. software, server, firewall, webcam, etc.) from the time you schedule your exam to when you attempt to launch your exam, you may experience issues with your compatibility. It is best to conduct another compatibility check on the machine that you will be taking your exam at least 24 hours prior to your scheduled exam. You may also check your compatibility before or after registering for your exam at <https://home.psiexams.com/static/#/bcheck>.



7. You are now scheduled and will receive an email confirmation. If you need to reschedule your exam, see below for rescheduling instructions and timelines.
8. You will launch your LRP exam from your CBDCE account. This is the account you created when you applied for the exam. You will want to keep your CBDCE account login information handy as you will use it to login to launch/reschedule your exam.

**To schedule by Phone:** Call PSI at 833-333-4754.

This toll-free number is answered from 7:00 a.m. to 9:00 p.m. (Central Time) Monday through Thursday, 7:00 a.m. to 7:00 p.m. on Friday and 8:30 a.m. to 5:00 p.m. on Saturday. All individuals are scheduled on a first-come, first-served basis.

### Special Arrangements for Candidates with Disabilities

If special arrangements are being requested, candidates must submit the two-page Request for Special Examination Accommodations form found in the CBDCE Examination Handbook at the time of application and prior to scheduling an examination.

PSI is interested in ensuring that no individual with a disability is deprived of the opportunity to take the examination solely by reason of that disability. PSI will provide reasonable accommodations for candidates with disabilities. Depending upon the nature of the request not all may be accommodated through the Live Remote Proctoring (LRP) setting and may require candidates to schedule and take the exam at a testing center. Candidates will want to check with PSI at 800-367-1565 ext. 6750 prior to scheduling for Live Remote Online testing to confirm whether or not the special accommodation request can be accommodated through LRP.

### Examination Rescheduling and Transfer

You may reschedule the examination within your eligibility window at no charge if you make the change online in your CBDCE account at least 72 hours prior to your scheduled exam date. Note that you cannot schedule beyond your 90-day eligibility period. No changes can be made after that time.

Action	Steps to Complete
Reschedule Your Exam	<p>Candidates may only reschedule the exam to another date within their eligibility window. All reschedule requests must be completed a minimum of 72 hours prior to the schedule date.</p> <ol style="list-style-type: none"> <li>1. Login in at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Select 'Schedule' in your exam application to proceed to PSIs scheduling dashboard</li> <li>3. Follow the on-screen instructions to reschedule your exam appointment.</li> </ol>

You can transfer your application to a new 90-day window (one time only) for the fee of \$100. Transfer requests and payment of the \$100 transfer fee must be received no later than 10 business days prior to your scheduled appointment or 3 days prior to the end of your eligibility end date. Refer [page 12](#) section entitled "Withdrawals and Refunds" for details and [page 46](#) for the Transfer of Application form.

Action	Steps to Complete
Transfer to a new 90-day eligibility window	<p>Candidates may transfer to a new 90-day window by completing a transfer form and paying a \$100 transfer fee. Transfers must be requested at least 10 days prior to the scheduled date or to your eligibility end date, whichever is earliest.</p> <p>To transfer to a new 90-day window:</p> <ol style="list-style-type: none"> <li>1. Login at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Click on Get Certified &gt; Application &gt; Extension Checkout Selection &gt; Yes &gt; Extension Selection to to make your payment. No transfer will be completed until payment is made in full and must be made by the dates above.</li> </ol>

### Missed Appointments and Forfeitures

You will forfeit the Examination registration and all fees paid under any of the following circumstances.

- You wish to reschedule an examination appointment but fail to contact CBDCE in writing at least 72 hours prior to the scheduled testing session
- You wish to reschedule a second time
- You do not start your exam within 15 minutes after your scheduled appointment time
- You fail to report for an examination appointment
- You cancel your exam and do not schedule/reschedule within

your eligibility window

A complete Application and appropriate fee are required to re-apply for a new 90-day testing window.

## Inclement Weather, Emergency or Power Failure

In the event of inclement weather or unforeseen emergencies on the day of an examination, PSI will determine whether circumstances warrant the cancellation and subsequent rescheduling of an Examination.

## On the Day of the Examination

Candidates may log in to their account up to 30 minutes prior to the scheduled start time. By not starting your exam within 15 minutes after your scheduled appointment time, you forfeit your examination scheduling fee or exam eligibility. Fees and exam eligibilities are non-refundable.



If you have any questions regarding your compatibility check, or if you experience issues launching your exam, you may contact the remote proctoring technical support team at 855-421-2675. You may also initiate a chat after you close the Secure Browser Software by [clicking here](#).

## Your LRP Testing Location

Prior to initiating the exam, the proctor will ask you to share your screen to complete a room scan. The scan requires 30 seconds of video. The room scan will be reviewed by a check-in specialist prior to the release of your exam. This scan is to ensure a secure testing environment free from any form of cameras/videos, notes, personal items, reference materials, etc. that may infer the exam being compromised.

## Identification

You must present proper identification to the proctor. **The name on your primary identification must match the name on your exam registration.** You will be required to present the primary photo ID to the web cam for the proctor to evaluate and record. You will also be required to take a photo of yourself, and your photo will remain on-screen throughout your examination session. The photo will also appear on your result notification. Failure to provide appropriate identification at the time of the examination is considered a missed appointment and there will be no refund of your examination fee. You must have one (1) form of identification with a current photograph. Your identification must be valid and include your current name and signature. No form of temporary identification will be accepted.

For your primary photo ID, at least one government-issued ID with photograph is required. Acceptable forms of your primary identification include a current driver's license with photograph, a current state identification card with photograph, a current passport or passport card, Green card, Alien registration, Permanent resident card or National identification card. A military identification card is NOT acceptable for remote online proctored exams. Employment identification cards and student ID cards are NOT acceptable as the primary form of identification

If your name on your exam registration has changed and is different than it appears on your identification, you must show proof of your name change (e.g., marriage license, divorce decree or court order).

If you need to change your name to match your ID that will be used for exam check-in you can do so in your CDCES account.

Change Type	Candidate Action
Name	<p>The name on your CBDCE account must match the name (first and last) on the ID used to check-in for your exam. <b>Name change requests must be completed a minimum of 72 hours prior to your scheduled date.</b></p> <p>To update your name:</p> <ol style="list-style-type: none"> <li>1. Login at <a href="http://www.cbdce.org">www.cbdce.org</a></li> <li>2. Click Update My Profile.</li> <li>3. Make the necessary change</li> <li>4. Click SAVE</li> </ol>

## Allowable Items in LRP

- You are allowed one white piece of scratch paper and one pen/pencil during you LRP exam
- You are allowed one glass of water (in a clear container or water bottle with the label removed) during the remote online proctored exam. This must be present at the beginning of your examination for proctor review and approval of the container and/or water bottle during the exam. No additional time is given to clean up a spill.
- You are allowed one small snack during your exam. The snack must be removed from its original packaging and placed in a clear plastic bag. You must show this to the proctor during check-in. No additional time is given to eat your snack or to clean up any spills.

## Examination Restrictions

Violation of any examination restrictions or misconduct may result in termination of your exam. Your exam fees will NOT be refunded if your exam is terminated.

- The use of any writing device is PROHIBITED during the Remote Online exam duration. There is a comment space available on each question screen which can be used to make notes to determine an answer to the question or to make comments

about the question.

- You are prohibited from reproducing, communicating or transmitting any test content in any form for any purpose. This behavior will result in the disqualification of examination results, will be reported to CBDCE and may lead to legal action.
- No questions concerning the content of the examination may be asked during the examination.
- You may not read questions aloud, mumble, or whisper during your exam as this may infer you are recording exam information.
- Your entire face must be visible to the camera at all times.
- Handheld calculators are NOT allowed at the LRP session. To perform any calculations, you will use the built-in calculator in the LRP platform.
- You may not have any papers or study materials in the testing area.
- You may not wear headphones, earbuds, or smart enabled devices.
- You are not allowed any breaks during your LRP exam session. If you leave the testing environment or the camera view, your exam will be canceled.
- You may not exit the camera view or use your cell phone or other electronic devices except the computer in use for taking the exam.

## Misconduct

If you engage in any misconduct during the examination your exam will be ended, your scores will not be reported, and examination fees will not be refunded. View the complete list of major and minor violations here:

<https://www.cbdce.org/documents/20123/108727/LRP+Violations+Information+Web+Posting.pdf/02fdb990-8fea-6cd8-fa15-89018128b555?t=1636576136484>

Examples of misconduct are when you:

- create a disturbance, are abusive, or otherwise uncooperative;
- display and/or use electronic communications equipment including, but not limited to, pagers, cellular/smart phones, etc.;
- talk or participate in conversation with yourself or others;
- give or receive help or are suspected of doing so;
- leave the testing environment during the administration;
- attempt to record examination questions or make notes;
- attempt to take the examination for someone else;
- are observed trying to read/access personal belongings, notes, reference materials.

## Practice Testing

Prior to attempting the examination, you will be given the opportunity to take a short practice examination on the computer to become familiar with the navigation features. The time you use for this practice examination is NOT counted as part of your examination time or score.

Please know that time spent to verify the System Compatibility,

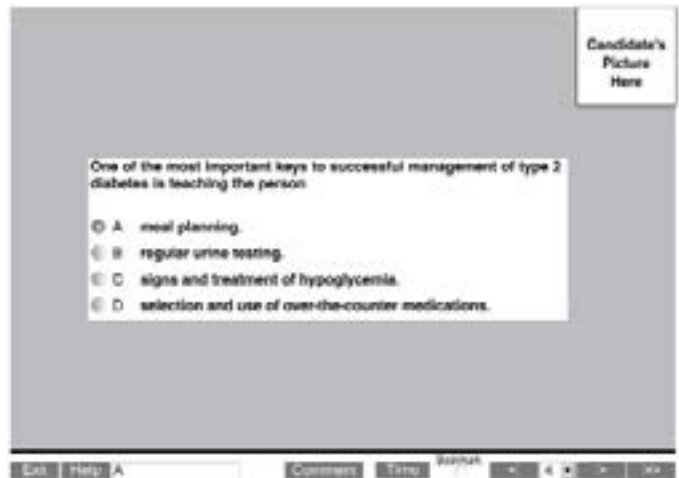
install Secure Browser and any other Settings adjustment on the computer, ID verification and your practice test is EXCLUDED from the 4 hours allowed for the exam.

## Timed Examination

You will have four (4) hours to complete the examination. Before beginning the examination, instructions for taking the examination are provided on-screen.

Testing Dates	Number of Questions on the Exam
January 1, 2024 through June 30, 2024	200 questions (175 scored, 25 pre-test)
July 1, 2024 and forward	175 questions (150 scored, 25 pre-test)

The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time allowed. You may click on the Time box in the lower menu bar on the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The Time feature may be turned off during the examination.



Only one examination question is presented at a time. The question number appears in the lower right portion of the screen. Choices of answers to the examination question are identified as A, B, C, or D. You must indicate your choice by either typing in the letter in the response box in the lower left portion of the computer screen or clicking on the option using the mouse. To change your answer, enter a different option by typing A, B, C, or D or by clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you

forward through the examination question by question. If you wish to review any question or questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.

An examination question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. Click on the double arrows (>>) to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the double arrows (>>). When the examination is completed, the number of questions answered is reported. If not all questions have been answered and there is time remaining, return to the examination and answer those questions. Be sure to provide an answer for each question before ending the examination. There is no penalty for guessing.

Should you need a calculator to perform any calculations, there is a built-in calculator in the LRP platform. The calculator is located in the lower left side of the screen.

### Candidate Comments

During the examination, candidates may make comments for any question by clicking on the Comment button to the left of the Time button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided. Under no circumstances are candidates or other individuals allowed access to the Examination(s) or to specific questions (including obtaining copies) at any time.

Any issues experienced during the testing session should be brought immediately to the proctor's attention via chat in order to rectify the situation. After completing the examination, you are asked to answer a short evaluation of your examination experience. You should also include any issues faced in your testing session in the evaluation.

### Examination Results

At the completion of the examination, the candidate will receive onscreen results. An email message will follow that contains the score report. Scores are released only to candidates and are not reported over the telephone or by facsimile. If you do not receive

a score report, please notify CBDCE at [info@cbdce.org](mailto:info@cbdce.org).



**Appendix I  
Accrual Information for Initial/Expired or  
Renewal of Certification/Expired Certification**

<b>Category</b>	<b>Number of Continuing Education Hours Required</b>	<b>Accrual Start Date for Continuing Education Activities</b>	<b>Professional Practice Experience</b>	<b>Accrual Start Date for Professional Practice Experience</b>
Initial Or Expired Prior to 2019	15 hours	No earlier than 2 years prior to the date of application	Per Eligibility Requirements for Initial Certification, see <a href="#">page 2 2</a> . Professional Practice Experience	No earlier than 5 years prior to the date of application

Information below is applicable ONLY for current CDCEs who ARE able to document meeting the practice requirement and wish to renew by Examination. Refer to Renewal Practice Requirement, [page 31](#), for definition of practice.

<b>Category</b>	<b>Number of Continuing Education Hours Required</b>	<b>Accrual Start Date for Continuing Education Activities</b>	<b>Professional Practice Experience</b>	<b>Accrual Start Date for Professional Practice Experience</b>
Renewal of Certification – 1st Renewal (e.g., first certified in 2019)	None	n/a	1000 hours	January 1, 2020
Renewal of Certification – certified prior to 2019				September 16, 2019

Information below is applicable ONLY for current CDCEs who CANNOT document meeting the practice requirement. Renewal is dependent upon successfully documenting 75 hours of applicable continuing education activities and successfully passing the Examination.

<b>Category</b>	<b>Number of Continuing Education Hours Required</b>	<b>Accrual Start Date for Continuing Education Activities</b>	<b>Professional Practice Experience</b>	<b>Accrual Start Date for Professional Practice Experience</b>
Renewal of Certification – 1st Renewal (e.g., first certified in 2019)	75 hours	January 1, 2020	n/a	n/a
Renewal of Certification – certified prior to 2019		September 16, 2019		

Information below is applicable ONLY for individuals whose credentials expired between 12/31/2019 and 12/31/2023. Upon application, individuals must be able to document EITHER 75 hours of acceptable continuing education activities OR 1000 renewal practice hours. Reinstatement is dependent upon documenting 75 hours of applicable continuing education activities OR 1000 hours of renewal practice hours and then successfully passing the Examination. Refer to Renewal Practice Requirement, [page 31](#), for definition of practice.

<b>Category</b>	<b>Number of Continuing Education Hours OR Renewal Practice Hours</b>	<b>Accrual Start Date for Continuing Education Activities OR Renewal Practice Hours</b>
Credential Expired 12/31/2019 to 12/31/2023	75 continuing education hours OR 1000 renewal practice hours	1/1/2019

## Appendix II

### Continuing Education Guidelines - Initial Certification

1. Expectations:

- Health professionals specializing in diabetes care and education will demonstrate through certification:
  - knowledge and skills are up-to-date
  - ability to practice proficiently, safely, and in a manner consistent with current National Standards of Diabetes Self-Management Education and Support (NSDSMES)
- All individuals will engage in a personal assessment to identify professional needs and participate in appropriate activities that are inclusive of the Examination Content Outline in the current Handbook.

2. Continuing Education CE Cycles for 2024 Applications

Refer to the Accrual Cycles Information, Appendix I, [page 28](#).

3. Continuing education activities:

- Must be provided by or approved by a provider on the CBDCE List of Recognized Providers. (Refer to the list of Recognized Continuing Education Providers on [page 30](#)).
- Must be applicable to diabetes. All subject matter on the Certification Examination Content Outline published in the 2024 Certification Examination for Diabetes Care and Education Specialists Handbook is considered applicable to diabetes.
- All continuing education activities must be completed before submitting the application.
- Must be at a professional level that enhances the quality and effectiveness of diabetes care and education practice.
- Does not have to be discipline specific nor does it have to be in any specific area of concentration, e.g., social workers may attend a diabetes related nursing program and use those clock hours for renewal of certification.

Activities acceptable for continuing education

- Continuing education courses
- Independent study
- Seminars
- Online programs
- Workshops
- Telephonic or video conference programs
- Conferences

Activities **not** acceptable for continuing education

- Academic courses
- Other certification/credentials awarded
- Elected office or serving on Boards and/or Committees
- Articles or books written by the applicant
- Journal clubs or professional reading
- Presentations or lectures by the applicant
- Posters or poster sessions and exhibits
- Preceptorships or mentor hours
- Research
- Volunteer activities

4. Continuing Education Hours

- A. All continuing education activities must be reported in clock hours, i.e., the actual time spent on the continuing education activity, not contact hours, credits, or units awarded by the recognized provider. One clock hour equals 60 minutes.
- B. Presentations – Participants may include in the time to be counted as clock hours the course overview, introductions, the educational presentation, and questions and answers. Time may not be counted for general announcements, breaks, lunch, exhibits, or poster sessions.
- C. Self study programs (online or written booklets) – Participants may count the actual time spent on completing the activity. Clock hours submitted cannot be more than the number of contact hours/credits/units awarded by the recognized provider.

5. For initial certification you need fifteen (15) hours of continuing education earned prior to your applying for certification.

If you are using applying under the Unique Qualifications (UQ) Pathway, you will need thirty (30) hours of continuing education.

### 5. Recognized Continuing Education Providers\*

Continuing education programs must be provided by or approved by one of the following:

Association of Diabetes Care and Education Specialists (ADCES) <https://www.diabeteseducator.org/education>

American Diabetes Association (ADA) <https://professional.diabetes.org/continuing-education>

Academy of Nutrition and Dietetics (ACADEMY) <https://www.eatrightstore.org/cpe-opportunities>

Accreditation Council for Pharmacy Education (ACPE) Accredited or Approved Providers  
<http://www.acpe-accredit.org/>

Accreditation Council for Continuing Medical Education (ACCME-AMA) Accredited or Approved Providers  
<http://www.accme.org/>

American Nurses Credentialing Center (ANCC) Accredited or Approved Providers  
<https://www.nursingworld.org/Organizational-Programs/Accreditation/Find-an-Accredited-Organization>

American Academy of Family Physicians (AAFP) <http://www.aafp.org/cme.html>

American Association of Nurse Practitioners (AANP)  
<http://www.aanp.org/education/continuing-education-ce/ce-opportunities>

American Academy of Optometry (AAO) <http://www.aaopt.org/>

American Academy of PAs (AAPA) <https://www.aapa.org/learning-central/>

American Association of Clinical Endocrinologists (AACE) <https://www.aace.com/>

American College of Endocrinology (ACE) <https://www.aace.com/college/>

American College of Sports Medicine (ACSM) <https://www.acsm.org/learn-develop-professionally/ceonline2>

American Medical Association (AMA) <https://www.ama-assn.org/education-center>

American Nurses Association (ANA) <https://www.nursingworld.org/ana/>

American Occupational Therapy Association (AOTA) <http://www.aota.org/Education-Careers/Continuing-Education.aspx>

American Physical Therapy Association (APTA) <http://www.apta.org/CareersEducation/>

American Psychological Association (APA) <http://www.apa.org/ed/ce/index.aspx>

Commission on Dietetic Registration (CDR) Accredited or Approved Providers  
<https://www.cdrnet.org/products/continuing-professional-development-education>

Council on Continuing Medical Education (CCME-AOA) Approved Sponsors <https://osteopathic.org/cme/>

Council on Podiatric Medical Education (CPME-APMA) Approved Sponsors  
<http://www.cpme.org/education/content.cfm?ItemNumber=2422&navItemNumber=2237>

International Diabetes Federation (IDF) <http://www.idf.org/>

National Association of Clinical Nurse Specialists (NACNS) <https://nacns.org/professional-resources/education/>

National Association of Social Workers (NASW) <https://www.socialworkers.org/Careers/Continuing-Education>

National Commission for Health Education Credentialing (NCHEC) Designated Providers  
<https://www.nchec.org/continuing-education>

Continuing education hours from accredited academic institutions within the United States or its territories granting degrees related to professional practice are also accepted. Contact the CBDCE national office for information.

\* Note: The links to the various organizations on the list are provided as a courtesy, and though all attempts are made to ensure the links are viable, CBDCE is not responsible for links that may be incorrect or become inactive. In addition, though CBDCE may have a professional relationship with any number of these organizations, CBDCE is separate and autonomous from all of the organizations included on the list.

### Renewal of Certification by Exam

Renewal of certification by examination must be completed during the calendar year in which a CDCES's credential expires. Certification renewal demonstrates that professionals previously certified have maintained a level of contemporary knowledge in diabetes education. CBDCE requires all CDCESs to recertify every five (5) years to maintain certification status. It is the responsibility of each CDCES to stay abreast of changes in certification and/or renewal requirements and to recertify in a timely manner. Valid dates of the credential should be monitored and application for renewal submitted by published deadlines. Extensions of certification are not granted.

\*The details on the Renewal by Continuing Education process and how to obtain the Handbook for Renewal of Certification by Continuing Education can be obtained via CBDCE's website ([www.cbdce.org](http://www.cbdce.org)).

### Eligibility Requirements for Renewal of Certification

For CDCESs whose credentials will expire 12/31/2024:

1. Individuals must continue to hold the license, certification or registration for the same discipline held at the time of initial certification. This license, certification or registration must be current, active, and unrestricted at the time of renewal (e.g., applied for CDCES certification as a registered nurse, must maintain RN license).
2. Accrual of a minimum of 1000 hours of professional practice experience during the five-year certification cycle. NOTE: Refer to the Renewal Practice Requirement section below.
3. Individuals renewing by Examination will need to take/pass the Examination by 12/31/2024 in order to renew their certification with no interruption.
4. Application Fee(s) Payment.

### Renewal Practice Requirement

Individuals will need to document a minimum of 1000 hours of professional practice experience during the five-year certification cycle, in addition to either passing the Certification Examination or successfully renewing by continuing education. The professional practice requirement for renewal of certification, however, is not the same as that required for initial certification. CBDCE recognizes that diabetes care and education is an evolving specialty and that experienced CDCESs often assume roles other than the practice of diabetes care and education directly with people with diabetes that is required for initial certification.

### Renewal Practice Requirement Definition

For purposes of renewal of certification, practice means providing a direct or indirect professional contribution to the care and self-management education of people with diabetes. Practice hours must have taken place in the United States or its territories.

This definition is intended to be as inclusive as possible of positions currently held by CDCESs. In addition to providing DCE to persons with diabetes, it also includes

- service development
- service management
- public health/community surveillance
- volunteer activities
- diabetes-related research
- clinical roles in diabetes industry
- case management
- professional education
- consultant roles to industry or other providers, or others.

### What is NOT Included in the Definition

Employment in the manufacture, direct sales, or distribution of diabetes-related products or services in pharmaceutical or other diabetes-related industries, or jobs or volunteer activities unrelated to diabetes will not meet the practice requirement.

### Your Renewal Accrual Cycle

For those renewing in 2024, the 1000 hours of professional practice experience requirement must have:

- Been completed during the appropriate five year certification cycle.
- For those renewing for the first time, the start date for accruing practice hours is January 1 following the year of initial certification.
- For those who have previously renewed, the start date for accruing practice hours is the day after the deadline date of their last renewal by continuing education window (e.g., for those renewing in 2024, those who renewed by continuing education on September 15, 2019, accrual starts September 16, 2019); for a CDCES who last renewed by examination, the accrual date starts on September 16, 2019).
- All hours must be obtained prior to the date of application for renewal.

NOTE: There is no requirement about how or when this must be accomplished, e.g., to complete 200 hours per year each of the five years, or to be practicing at the time of application.

### For Those Unable to Meet the Practice Requirement

For CDCESs who wish to maintain certification status but do not or cannot meet the practice requirement, there is only one renewal option. That method requires both successful completion of the Examination and the accrual of 75 clock hours of continuing education. During the five year period that certification is valid, if a CDCES has practiced less than the required 1000 hours, has taken employment unrelated to diabetes care and education, is on leave from employment or has retired, but still wishes to maintain certification as a diabetes care and education specialist, the requirements to hold a current, active unrestricted license or registration for the same discipline held at the time of initial certification and to demonstrate knowledge of current standards and practices by passing the Examination and documenting relevant continuing education activities are required. No exceptions will be available.

To renew by Examination and CE, you will need to apply online through your CDCES account along with your CE information. Online renewal by exam opens July 15 of the renewal year. Check your CDCES portal for your date last renewed for your accrual start date and to download the CE packet.

**If renewing by examination and continuing education, you cannot claim CEs that have already been used in the previous 5 year cycle.**

### Reinstatement of Expired Credential

- Individuals whose CDCES credential has expired may pursue reinstatement of their credential. Reinstatement requires that an individual must meet appropriate eligibility requirements and pass the Examination.
- Certification is NOT extended between the time of credential expiration and passing the Examination.

#### 1. Expired Credential Reinstatement Option: Expiration Date of 12/31/2019 – 12/31/2023

Successful reinstatement starts a new certification cycle. The amount of time the credential is expired cannot be used as part of cumulative active status certification years. The individual may not use the credential until receipt of passing score report.

#### Requirements:

- Individuals must continue to hold the license, certification or registration for the same discipline held at the time of initial certification. This license, certification or registration must be current, active, and unrestricted at the time of application and Examination (e.g., applied for CDCES certification as a registered nurse, must maintain RN license).

- Expired option extends to five years after most recent expiration date. For 2024 Examinations, the expired reinstatement option is available to individuals whose CDCES credential expired 12/31/2019 through 12/31/2023.
- Must apply for the examination, **with** documentation of either 75 hours of acceptable continuing education hours OR renewal practice requirement at the time of applying for the examination.
- Accrual cycle start date for either the continuing education hours or renewal practice hours begins five years prior to the opening application date e.g., apply for 2024 examination, accrual start date is January 1, 2019; Refer to Appendix I, [page 28](#).
- Application Fee: \$350
- Must pass the Examination
- For reinstated individuals, a new accrual cycle will be issued upon passage of the examination.

#### 2. Expired Credential Option: Expiration Date of 12/31/2018 or earlier

Individuals whose credential expired 12/31/2018 or earlier must be able to document meeting all eligibility requirements in place for initial applicants prior to applying for reinstatement.

- See Eligibility Requirements for Initial Certification, [page 2](#).
- Application Fee(s) Payment

## Appendix III

### Sample Examination Questions\*

1. In persons with diabetes, the symptoms of serious psychological depression may resemble
  - A. the "dawn phenomenon".
  - B. the onset of nephropathy.
  - C. symptoms of chronic hypoglycemic episodes.
  - D. symptoms of chronic high blood glucose levels.
2. According to ADA Standards of Care, a diagnosis of diabetes mellitus may be confirmed by the findings of
  - A. weight loss.
  - B. polydipsia and polyuria.
  - C. two random plasma glucose levels of 145 mg/dL.
  - D. two fasting plasma glucose levels of 135 mg/dL.
3. According to the ADA Nutrition Consensus Report, the recommended fat content for a diabetes meal plan is
  - A. individualized.
  - B. 10% of calorie intake.
  - C. 30% of calorie intake.
  - D. dependent on patient's age.
4. According to DCCT participants striving to better manage their blood glucose levels, some adverse effects of intensive treatment were
  - A. multiple injections causing lipohypertrophy.
  - B. marked hormonal changes requiring more insulin.
  - C. weight gain and risk of severe hypoglycemia.
  - D. insulin resistance caused by hyperinsulinemia.
5. Metformin is an oral 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. reduces hyperglycemia in persons with diabetes, but does not lower blood glucose levels in persons who do not have diabetes.
  - D. results in weight gain and increase in plasma insulin levels.
6. Which of the following is a major clinical feature of hyperosmolar hyperglycemic nonketotic syndrome?
  - A. large ketones
  - B. profound dehydration
  - C. nausea and vomiting
  - D. severe acidosis
7. A 25 year-old female is on a basal/bolus regimen using Lantus<sup>®</sup> (insulin glargine) at bedtime and Humalog<sup>®</sup> (insulin lispro) before meals. For the past 5 days, her morning fasting blood glucose tests have been consistently high, but all other blood glucose tests during the day have remained in her suggested target range. Which of the following changes in insulin regime would MOST likely be recommended?
  - A. increase the evening meal Humalog<sup>®</sup> (insulin lispro) dose
  - B. increase the bedtime Lantus<sup>®</sup> (insulin glargine) dose
  - C. decrease the evening meal Humalog<sup>®</sup> (insulin lispro) dose
  - D. decrease the bedtime Lantus<sup>®</sup> (insulin glargine) dose
8. One of the most important keys to successful management of type 2 diabetes is educating the person
  - A. meal planning.
  - B. regular urine testing.
  - C. signs and treatment of hypoglycemia.
  - D. selection and use of over-the-counter medications.
9. A 48-year-old male with type 2 diabetes wants to begin an exercise program. He has had diabetes for 8 years, takes no medication, monitors blood glucose twice a day, has no complications from diabetes, is 130% of ideal body weight, and follows a 1500 calorie diet. What adjustments to food intake, if any, should be suggested to him?
  - A. Carry a fast-acting carbohydrate with him.
  - B. Increase his diet by 300 calories to prevent hunger during exercise.
  - C. Increase his carbohydrate intake before exercising.
  - D. There should be no change in diet.
10. A 14 year-old female is currently on insulin pump therapy. It is noted that her hemoglobin A1C is 14%. She insists that she boluses for her insulin based on suggested insulin/carbohydrate ratios and correction factors. What is the MOST likely reason for her high A1C?
  - A. The insulin/carbohydrate ratios for meals need to be increased.
  - B. The correction factors need to be decreased.
  - C. Her infusion sets need to be changed more frequently.
  - D. She forgets to bolus for meals and snacks.

\* The purpose of the Sample Examination Questions is to provide information to candidates as to the structure and format of the questions on the exam. Refer to *pages 15-15*.

CORRECT ANSWERS TO SAMPLE QUESTIONS

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

## Appendix IV

### Resources

The resource list found on this page may be of help in preparing for the Examination. There has been no attempt to include all acceptable resources nor is it suggested that the Examination is necessarily based on these resources. Individuals wishing to obtain any of the cited resources should contact the organization or company that publishes them. It should not be inferred that Examination questions are necessarily based on any particular book or journal or that studying particular resources or attending any review course guarantees a passing score on the Examination. (See "Examination Construction and Scoring" and "Studying for the Examination" sections on pages 14-15 for additional information.)

American Diabetes Association, Standards of Medical Care in Diabetes are updated every year as the 1st supplement of Diabetes Care.

American Diabetes Association, Practical Insulin (5th ed.). (2019). Arlington, VA: American Diabetes Association.

Academy of Nutrition and Dietetics and American Diabetes Association. Choose Your Foods: Food Lists for Diabetes (5th Ed.). (2019).

Academy of Nutrition and Dietetics and American Diabetes Association. Choose Your Foods: Match Your Insulin to Your Carbs (4th ed.). (2019)

American Diabetes Association, The Complete Guide to Carb Counting (4th ed.). (2019). Arlington, VA: American Diabetes Association.

American College of Sports Medicine, ACSM's Guidelines for Exercise Testing and Prescription (11th ed.). (2021). Wolters Kluwer.

Association of Diabetes Care and Education Specialists, The Art and Science of Diabetes Self-Management Education Desk Reference (6th ed.). (2023). Chicago, IL: Association of Diabetes Care and Education Specialists.

Association of Diabetes Care and Education Specialists, Danatech, website on diabetes technology for healthcare providers (updated regularly). <https://www.adces.org/danatech/home>.

Dietary Guidelines for Americans (latest edition). Department of Health and Human Services and the Department of Agriculture.

Dagogo-Jack, S., Prediabetes: A Fundamental Text (2021). Arlington, VA: American Diabetes Association.

Draznin, B., Diabetes in Practice: Case Studies with Commentary (2021). Arlington, VA: American Diabetes Association.

Kirkman, M.S., Medical Management of Type 1 Diabetes (8th ed.). (2022). Arlington, VA: American Diabetes Association.

Meneghini, L., Medical Management of Type 2 Diabetes (8th ed.) (2020). Arlington, VA: American Diabetes Association.

Rollnick, S., Miller, W., Butler, C, Motivational Interviewing in Health Care: Helping Patients Change Behavior (2nd ed.) (2022). New York, NY: The Guilford Press.

Steenkamp, D., Intensive Diabetes Management ( 7th ed.) (2021). Arlington, VA: American Diabetes Association.

Werner, E.F., Medical Management of Pregnancy Complicated by Diabetes (6th ed.) (2019). Arlington, VA: American Diabetes Association.

White, Jr., J.R., 2022-23 Guide to Medication for the Treatment of Diabetes Mellitus (2022). Arlington, VA: American Diabetes Association. (Updated annually.)

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## Appendix V

### Canons of Ethical Conduct and Rules and Procedure

#### Canons of Ethical Conduct

##### I. PREAMBLE

###### C1.1 Introduction

The practice of diabetes self-management education (“Profession”) is a recognized allied health profession. The Certified Diabetes Care and Education Specialist (“CDCES”) assumes specific responsibilities to physicians or other licensed/registered health professionals, people with diabetes or prediabetes and their significant other(s), the public, associates, and to the Profession itself. These responsibilities must be discharged with honor and integrity to assure the maintenance of public confidence in the Profession and to protect the person with diabetes or prediabetes and his/her significant other[s]. For the purposes of these Canons of Ethical Conduct (“Canons”), the term “CDCES” shall mean any person who has earned the certification offered by the Certification Board for Diabetes Care and Education (the “Board”). As used herein, “Committee” refers to the Professional Discipline Committee of the Board.

The Profession exists for the primary purpose of recognizing and advancing the specialty practice of diabetes self-management education and support (DSMES). CDCESs are responsible for maintaining and promoting ethical practice, including, without limitation, reporting unethical practices in accordance with these Canons. These Canons, adopted by the Board, shall be binding upon all CDCESs and candidates approved to take the CDCES certification examination.

###### C1.2 Ethics, Custom and the Law

Unethical conduct may involve violations of customs and usages of the Profession as well as actions that violate the law and regulations. Failure to conform to these Canons, including conduct that violates moral principles, customs and practices of the Profession, the law or regulations, may be subject to disciplinary action in accordance with the “Rules and Procedures Regarding the Canons of Ethical Conduct” (“Rules”). Disciplinary action depends on the particular circumstances involved and, without limitation, how the conduct in question reflects upon the dignity and integrity of the Profession.

The Committee will take appropriate action, if any, consistent with the Rules. Each CDCES has a civic and professional obligation to report to the appropriate governmental body any and all evidence that may come to his/her attention involving the alleged criminal conduct of any CDCES relating to the practice of DSMES.

###### C1.3 Disclosure of Other Agency Actions

Each CDCES must promptly, fully and accurately disclose to the Board any and all investigations, findings, and actions by any government agency, quasi-government agency, licensing board, registration body, or other similar health related agency or body responsible for national, state or local licensing and/or oversight of diabetes education-related licenses, certifications, or the like (“Agencies”). The CDCES’s disclosure requirement includes investigations by federal, state and/or private payors regarding existing or potential known or unknown billing malfeasance. Each CDCES must make such disclosure to the Board within thirty (30) days from the date of the commencement of action by any Agency. Each CDCES must promptly and fully cooperate with the Board and with the Agencies.

##### II. RESPONSIBILITIES TO THE PHYSICIAN AND/OR APPROPRIATELY LICENSED/REGISTERED HEALTH CARE PROVIDER

###### C2.1 Provision of Services

The CDCES shall recognize the person’s freedom of choice in selection of diabetes treatment and education and his/her health care provider. Professional affiliations, including employment and referral relationships, may not adversely limit access to services and shall not adversely affect the decision-making process of the CDCES. The CDCES must adhere to the ethical principles of the Board which shall take preference over business relationships.

###### C2.2 Scope of Practice

The Certification Examination for Diabetes Care and Education Specialists (Examination) is sensitive to areas of general practice and contemporary diabetes knowledge across multiple professional disciplines. Passing the Examination verifies core knowledge in the field of diabetes. Holding the CDCES credential does not confer any permission to manage diabetes beyond the scope of the individual’s professional practice. The boundaries of professional practice are determined by state practice acts. Job descriptions and job functions are determined by employing agencies, not the CDCES credential.

###### C2.3 Services Not Components of DSMES

The CDCES shall only provide DSMES as defined by the Certification Board for Diabetes Care and Education. While other services may be provided in the management and treatment of a person with diabetes/prediabetes, they may not be promoted or provided as components of DSMES.

### **III. RESPONSIBILITIES TO THE PERSON WITH DIABETES/ PREDIABETES**

#### **C3.1 Evaluation and Recommendation**

It is the responsibility of the CDCES to recommend diabetes self-management plans specific to the needs of the individual and to provide appropriate educational and learning information to the person with diabetes/prediabetes, other healthcare professionals, the public, etc. The CDCES shall recognize that each individual person is unique and deserves specific and responsive guidance from the CDCES. The CDCES shall be guided at all times by concern for the physical, emotional, social and economic welfare of the person. The needs, goals and life experiences of the person shall be taken into account. All decisions by the CDCES must be made with the understanding and intent that the individual person's best interests are the primary concern.

#### **C3.2 Confidential Information**

All information related to a person's identity, background, condition, treatment, management plan or education plan or any other information related to the CDCES/person or people with diabetes/prediabetes is and shall always remain confidential and may not be communicated to any person or entity who is not providing direct medical care to the patient without the prior written consent of the patient or patient's legal guardian.

Information that may be derived from any CDCES's peer review process shall be held and always remain confidential by all participants unless written permission to release the information is obtained from the person under the care of the CDCES or that person's legal guardian. All information derived in a work place from a working relationship related to the care of a person with diabetes/prediabetes shall be held and always remain confidential by all parties. The confidentiality requirements set forth in this Canons C3.2 shall be strictly adhered to by all CDCESs unless required otherwise by law or valid court order or subpoena, or if it becomes necessary to disclose such information to protect the welfare of the person with diabetes/pre-diabetes and/or the community. In such an event, any disclosure of confidential information shall be in accordance with applicable legal requirements.

#### **C3.3 Trust and Honesty**

The CDCES shall be truthful and honest.

#### **C3.4 Fees and Compensation**

The CDCES shall provide services based on the needs of the individual receiving the services and not solely for personal financial gain. The CDCES shall not engage in false, misleading or deceptive actions in relation to the ultimate cost of the services undertaken or furnished. The CDCES shall not over utilize or unnecessarily continue services beyond the point of benefit or by providing services more frequently than necessary.

The CDCES shall not submit false or misleading information in requesting payment or reimbursement.

#### **C3.5 Practice Arrangements**

The CDCES shall not: (i) directly or indirectly request, receive or participate in dividing, transferring, assigning or rebating any funds derived from a referral of a patient to any other individual or entity, whether affiliated with the CDCES or otherwise; or (ii) profit by means of a credit or other valuable consideration, such as an unearned commission, discount or gratuity for providing services, except for the fees earned for services performed for the patient.

The CDCES shall refer all persons with diabetes/prediabetes to the most appropriate service provider, taking into consideration the nature and extent of the problem, treatment resources and availability of healthcare benefit coverage, and the likelihood of receiving appropriate and beneficial care. If the CDCES is involved in an arrangement with a referring source in which the referring source derives income from the CDCES's services, the CDCES must disclose all pertinent information to the patient, including without limitation that the referring practitioner derives income from the provision of the services. The CDCES shall advise his/her employer of any employer or employee practice which is in contradiction with this Canons C3.5.

#### **C3.6 Compliance with Laws and Regulations**

The CDCES shall provide DSMES and other services in accordance with Federal law and the laws and regulations of the jurisdiction(s) in which they practice.

#### **C3.7 Reporting**

The CDCES shall report to the Board any conduct that reasonably appears to violate these Canons. This reporting requirement includes, without limitation, self-reporting, and the reporting about other CDCESs, in connection with a third party investigation and finding, regardless of whether the investigation has been completed.

#### **C3.8 Delegation of Responsibility**

The CDCES shall not delegate any task requiring unique skills, knowledge or judgment to an unqualified person. The primary responsibility for services provided by supporting personnel rests with the delegating CDCES.

#### **C3.9 Illegal Discrimination**

The CDCES shall not decline to accept a patient on the basis of race, gender, color, religion or national origin or on any basis that would constitute illegal discrimination under federal law.

### **C3.10 Sexual Relations with Patient Prohibited**

The CDCES shall not have consensual or nonconsensual sexual relations with a current or former person under the care of CDCES unless a consensual sexual relationship existed between the CDCES and the person prior to the provision of any diabetes educational services or the CDCES has not provided any diabetes educational services to the person for a one year period preceding the beginning of the sexual relationship or for a one year period after the termination of the sexual relationship. The CDCES shall not engage in, require, or demand sexual relations with a person incident to or as a condition of any diabetes education services.

### **IV. RESPONSIBILITIES TO COLLEAGUES AND THE PROFESSION**

#### **C4.1 Dignity**

The CDCES has the personal responsibility to conduct him/herself in a manner that will assure the dignity and status of the Profession. Examples of unacceptable behavior include, but are not limited to, falsifying documents, misusing the certification credential, slandering or libeling another, disparaging former employers, disparaging former employees, and misrepresenting one's capacity as a provider of services.

#### **C4.2 Solicitation**

The CDCES shall not, either directly or indirectly, solicit the patronage of individual patients or students by way of intimidation, threats, harassing conduct, undue influence, coercion, duress, or unwarranted promises of benefits. The CDCES shall not solicit a person who is in a mental condition that impairs his/her personal judgment to make decisions concerning the services being offered. The CDCES shall not solicit a person in a manner that is inconsistent with his/her obligation to act in a dignified manner as set forth in Canon C4.1 above.

#### **C4.3 Examination**

The CDCES shall maintain the security and prevent the disclosure of credentialing examinations and their content.

### **V. PATIENT CARE BY OTHER HEALTH PROFESSIONALS**

#### **C5.1 Concern about Care by Other Health Professionals**

The CDCES should exercise appropriate respect for other health professionals. Concerns regarding patient care provided by other such professionals should be addressed directly to those professionals rather than to the patient. In the event that such concerns rise to the possible level of criminal violation, incompetence or malpractice, then the CDCES must immediately notify the appropriate credentialing, licensure, or registration authority and, if necessary, the patient or legal guardian.

### **VI. CREDENTIAL**

#### **C6.1 Use of Credential**

The CDCES shall use the fact that he/she is credentialed only as evidence of meeting the requisite standard of knowledge and competency in the discipline in which the CDCES is credentialed, as defined by the Board. The CDCES shall not use the credential to promote any services that are outside the scope of practice of a diabetes care and education specialist (formerly known as diabetes educator).

#### **C6.2 Endorsement of Products, Medication, Devices or Supplies**

While a CDCES may recommend the use of specific products, medications, devices or supplies, the CDCES credential may not be used to label, suggest or otherwise infer that such products, medications, devices or supplies have been endorsed by the Certification Board for Diabetes Care and Education.

#### **C6.3 Employment by Manufacturers, Pharmaceutical Companies or Suppliers**

It is permissible to be employed by a manufacturer, pharmaceutical company or supplier as a CDCES. However, the CDCES credential may not be used in a manner prohibited by Canon C6.2.

### **VII. APPLICATION OF CANONS**

#### **C7.1 Adherence to Canons**

These Canons shall apply to all CDCESs, including certification examination candidates.

## Rules and Procedures

### I. RESPONSIBILITY AND OBJECTIVES OF THE PROFESSIONAL DISCIPLINE COMMITTEE

**R1.1 Objectives.** The fundamental objectives of the Professional Discipline Committee (“Committee”) are to enforce the Canons of Ethical Conduct (“Canons”) to ensure that any person who has applied for, or has been awarded the Certified Diabetes Care and Education Specialist (“CDCES”) credential by the Certification Board for Diabetes Care and Education (“CBDCE”) is practicing in accordance with professional standards and to protect the public against unprofessional and unethical conduct by CDCESs or certification candidates.

**R1.2 Rules.** The Committee shall review and analyze the Canons and shall propose recommendations regarding the Canons for adoption by the Board of Directors (“Board”) of CBDCE.

**R1.3 Conduct.** The Committee is responsible for receiving, reviewing and, if appropriate, adjudicating complaints of unprofessional conduct and/or alleged violations of the Canons.

**R1.4 Resolution of Complaints.** The Committee shall resolve all complaints of unprofessional and unethical conduct and/or alleged violations of the Canons, including, without limitation, findings, conclusions and sanctions, if warranted.

**R1.5 Reports.** Upon the Board’s request, the Committee shall deliver a summary report to the Board identifying the Committee’s activities.

**R1.6 Procedures.** Subject to the review of the Board, the Committee shall adopt procedures and safeguards governing the functions of the Committee to ensure that all CDCESs and certification applicants and the Committee are in full compliance with the Canons and these Rules and Procedures Regarding the Canons of Ethical Conduct (“Rules”).

**R1.7 Time.** The time periods set forth in these Rules are intended to provide guidance to the Committee, the Board and all relevant parties, and may be extended at the Committee’s discretion depending on the circumstances of each proceeding. Failure of the Committee, the Board or any party to comply with the time periods shall in no event prevent the continuation or conclusion of a proceeding by the Committee or the Board.

### II. NATURE OF AUTHORITY

**R2.1 Power to Investigate.** The Committee shall have the power to, but shall not be obligated to, adjudicate all allegations of unprofessional and unethical conduct that may be harmful to colleagues, or to the public or that may be otherwise contrary to the objectives of the Canons or CBDCE, provided that such allegations are made in writing. The Committee’s powers do not extend to addressing economic issues as they relate to legitimate marketplace competition.

**R2.2 Disposition of Complaints.** The Committee has the sole

authority to decide whether to act on a complaint and to make final determinations regarding each complaint, subject to the Board’s authority to conduct an appeal as set forth in these Rules.

**R2.3 Committee Actions.** The Committee may take the following actions:

- a. notify all parties in writing that no action is warranted against the CDCES or certification candidate;
- b. request that the CDCES or certification candidate cease the improper conduct, accept supervision, or seek appropriate assistance;
- c. place on probation or reprimand the CDCES;
- d. suspend the CDCES’s credential for an appropriate amount of time;
- e. permanently revoke the CDCES’s credential or temporarily or permanently revoke a certification candidate’s eligibility to take the certification examination;
- f. refer the matter to the proper authorities for criminal prosecution, if appropriate; and/or
- g. propose other action that is warranted under the circumstances.

**R2.4 Monetary Award.** The Committee will not determine or impose monetary awards or penalties.

**R2.5 Committee Meetings.** The Committee shall meet as needed. A quorum at such meetings shall consist of a majority of the members of the Committee. The Committee may meet by telephone conference call. All Committee members must be given at least ten (10) days advance written notice of any meeting, provided that such notice may be waived by any member of the Committee or by the attendance of any member of the Committee at the meeting. Notices may be communicated by mail, hand delivery, electronic transmission or by facsimile.

**R2.6 Confidentiality.** All information disclosed to the Committee and/or the Board, shall be maintained on a confidential basis, except that the Committee and/or the Board shall be permitted to disclose such information when compelled by a validly issued subpoena, when otherwise required by law, to law enforcement officers and/or government agencies if warranted and as determined by CBDCE or the Committee in its sole discretion, or to parties essential to the review and investigation of the alleged unethical or unprofessional conduct, including their legal counsel. Public information shall not be considered confidential information for purposes of this Rule R2.6.

**R2.7 Determination.** When an investigation has been completed and the Committee has made its decision, it shall inform both the complainant (“Complainant”) and the CDCES or certification candidate of its conclusions and the actions to be taken, if any, along with the bases for such actions. Such disclosures shall include a citation to any particular Canons section violated.

**R2.8 Record Keeping.** The Committee shall establish reasonable

procedures to ensure that confidentiality is maintained with respect to the handling, storage, maintenance and destruction of records.

### III. CDCES OR CERTIFICATION CANDIDATES CONVICTED OF OR CHARGED WITH FELONIES OR DISCIPLINED BY OTHER ENTITIES, ORGANIZATIONS OR AGENCIES

**R3.1 Conviction/Charge.** If the CDCES or certification candidate has been convicted of, pled guilty to, and/or pled nolo contendere to a felony, and/or if the Committee finds that a federal, state or other recognized appropriate enforcement agency ("Agency") has determined that the CDCES or certification candidate is in violation of pertinent rules and regulations, the Committee shall review the record leading to the conviction, plea and/or Agency finding and will thereafter send the CDCES or certification candidate a notice requesting the CDCES or certification candidate show good cause why he/she is not in violation of the Canons. This action will be conducted without the right to have a hearing, as described in Rule R5.6. Following receipt of the CDCES or certification candidate's response, the Committee may proceed with a final determination in accordance with Rules R2.3 and R6.1. If the CDCES or certification candidate has been charged with a felony and/or possible violation of a pertinent rule or regulation, such charge will neither require nor preclude further action by the Committee.

**R3.2 Affiliations.** If the CDCES or certification candidate has been expelled or suspended for unethical or unprofessional conduct from a national, regional or state professional association, or had his/her license/registration or credential revoked or sanctioned in any way on ethical grounds by a federal or state licensing, registration, or certifying authority, the Committee shall review the records leading to the sanction(s), if available, and may, if appropriate, send the CDCES or certification candidate a notice that his/her/its credentialed status will be suspended, denied or revoked without further proceedings.

**R3.3 Malpractice.** If the CDCES or certification candidate has acknowledged committing or has been found to have committed malpractice, the Committee shall review the record leading to the findings, if available, and may thereafter send the CDCES or certification candidate a notice that his or her credentialed status will be suspended or revoked without further proceedings.

**R3.4 Committee Hearing.** Except in those instances set forth in Rule R3.1 above, if the CDCES or certification candidate's credentialed status is revoked or suspended pursuant to Rule R3.2 or R3.3, within thirty (30) days from the date of notice of such decision, the CDCES or certification candidate shall be permitted to petition the Committee, in writing, to request an appeal hearing. The hearing shall be conducted orally by telephone conference call. The hearing may be conducted in person if the Committee determines that exceptional circumstances exist warranting an in-person hearing. The

hearing shall be scheduled by the Committee within thirty (30) days of receipt of the CDCES or certification candidate's notification, and shall take place within sixty (60) days thereafter at a date and time established by the Committee. The CDCES or certification candidate shall be responsible for all of his/her costs.

### IV. DISCIPLINARY PROCEDURES: INITIAL CONSIDERATION

**R4.1 Complaint.** A complaint ("Complaint") against any CDCES or certification candidate may be submitted by: (i) any party claiming to have been harmed by the unethical or unprofessional conduct of the CDCES or certification candidate; (ii) any national, regional or state professional association of which the CDCES or certification candidate is a member; (iii) any licensing or credentialing authority; (iv) CBDCE; or (v) the Committee. The Complaint must be in writing and must contain complete and accurate information as required by the Complaint form.

**R4.2 Disclosure of Previous Actions.** The Complainant shall inform the Committee of previous steps, if any, that have been taken with respect to the alleged unethical or unprofessional conduct and the results of such steps taken.

**R4.3 Committee Complaint.** The Committee may proceed on its own initiative when a CDCES or certification candidate appears to have violated the Canons by initiating an investigation and/or requesting information from the CDCES or certification candidate and/or by submitting a formal Complaint.

**R4.4 Anonymous or Oral Complaint.** The Committee may not act solely on the basis of an anonymous or oral Complaint.

**R4.5 Additional Information.** The Committee may, through correspondence or otherwise, seek supplementary information from the Complainant or any other party, when necessary, in order to completely evaluate the substance of the allegations. In the event that the Committee determines that additional information is necessary but the Complainant refuses to provide such information, the Committee may determine that the case should be closed.

**V. DISCIPLINARY PROCEDURES: INITIAL ACTION**

**R5.1 Initial Determination.** Within forty-five (45) days of receiving a Complaint from the Complainant, the Committee shall determine whether sufficient information exists to proceed with a formal investigation. The Committee shall not proceed until such time as the Committee is satisfied that the Complainant has complied with all procedural requirements. If the Committee concludes that an investigation is not warranted, it shall notify the Complainant of its determination within thirty (30) days thereafter.

**R5.2 Formal Investigation.** If the Committee determines that a formal investigation should ensue, it shall notify the Complainant and CDCES or certification candidate of its determination within thirty (30) days. The notification sent by the Committee to the CDCES or certification candidate shall include the Complaint and a description of the alleged behaviors involved in the Complaint, including the specific section of the Canons that the CDCES or certification candidate is alleged to have violated. The notification shall include a copy of the Canons and these Rules. The notification shall further contain the name of the Complainant. If the Complainant refuses to have his/her name known to the CDCES or certification candidate, the case shall be closed. The notification shall include a statement that the information submitted by the CDCES or certification candidate shall become part of the record and may be used in further proceedings.

**R5.3 Response to Complaint.** The CDCES or certification candidate is required to provide to the Committee, and personally sign, his/her written response within fifteen (15) business days from the date of the notification sent by the Committee. The CDCES or certification candidate's response must be complete, accurate and fully responsive to the Complaint. Failure to respond or any other unwarranted delay by the CDCES or certification candidate, or the lack of the CDCES or certification candidate's cooperation, shall in no way prevent the continuation or conclusion of the proceedings by the Committee as it deems fit.

**R5.4 Additional Information.** If, after receipt of the CDCES or certification candidate's response, the Committee determines that additional information is warranted from either or both the Complainant or the CDCES or certification candidate, or from any third party, it shall notify the Complainant and the CDCES or certification candidate of the request for additional information. The parties shall provide the additional information no later than fifteen (15) days from the date of the request for additional information.

**R5.5 No Further Action.** Once all of the information has been received pursuant to Rules R5.3 and R5.4 above, the Committee may conclude that the Complaint has no basis in fact, is insufficient or is likely to be corrected on its own merit and, therefore, may determine to close the case without further action. Such decision shall be made within forty five (45) days

of the Committee's receipt of all of the information. If the Committee determines to close the case, it shall inform both the Complainant and the CDCES or certification candidate.

**R5.6 Right to a Hearing.** If the Committee, having received all information pursuant to Rules R5.3 and R5.4 above, determines that further action is warranted, it shall notify the Complainant and the CDCES or certification candidate that the Committee is prepared to consider all of the information before it and render a decision on that basis. The CDCES or certification candidate may request that, prior to such analysis and decision, he/she be afforded the opportunity to have a hearing before the Committee so that he/she may present his/her interpretation of the facts before the Committee. If the CDCES or certification candidate desires to have a hearing before the Committee, he/she must so notify the Committee, in writing, within fifteen (15) days of the Committee's notification to the CDCES or certification candidate and Complainant as set out in this Rule R5.6. The CDCES or certification candidate's failure to timely request a hearing shall be deemed a waiver by the CDCES or certification candidate of the right to a hearing. All hearings shall be by telephone conference call unless, due to exceptional circumstances, the Committee determines in its sole discretion to conduct an in-person hearing. The Complainant shall be invited to be present during the hearing. If the Complainant is invited to be present during the hearing but does not attend, the hearing and investigation shall not be suspended or revoked. The Complainant's failure to attend may be considered as a factor in the Committee's determination relating to that particular matter.

**R5.7 Peer Review.** The hearing process shall be conducted through peer review. The CDCES or certification candidate may be accompanied by any third party, including legal counsel. However, the CDCES or certification candidate, personally, and not any other party including without limitation the CDCES or certification candidate's legal counsel, shall make all presentations, responses and address all issues to the Committee.

**R5.8 Committee Panel.** The Committee may, in its discretion, establish a panel ("Panel") consisting of at least three (3) Committee members, to act on its behalf at any hearing referred to in these Rules. The Panel shall conduct any such hearing in accordance with these Rules and shall report all findings during the hearing to the Committee for the Committee's consideration and determination.

**R5.9 Hearing Date/Time.** If the CDCES or certification candidate requests a hearing pursuant to Rule R5.6, the Committee shall schedule a hearing date no later than sixty (60) days after receipt of the CDCES or certification candidate's request. The Committee shall notify the CDCES or certification candidate and Complainant of the date and time of the hearing. If the hearing is conducted by telephone conference call, the Committee, in its sole discretion, shall determine the date and time of the hearing. If the hearing is conducted in-person, the Committee, in its sole discretion, shall determine the location, date, and time of the

hearing. The CDCES or certification candidate and Complainant shall each pay all of his/her own costs, respectively.

### VI. DISCIPLINARY PROCEDURES: DISPOSITION OF COMPLAINT

**R6.1 Committee Action.** If the Committee concludes that some type of action is warranted, it shall adopt any one (1) or more of the following sanctions or take any other appropriate action:

- a. require that the CDCES or certification candidate cease and desist the alleged conduct;
- b. require the supervision of the CDCES or certification candidate as the Committee sees necessary;
- c. reprimand the CDCES or certification candidate if the Committee determines there has been a Canons violation but no damage to another person, the public or the profession has occurred;
- d. censor the CDCES or certification candidate if the Committee determines there has been a Canons violation but the damage done is not sufficient to warrant more serious action;
- e. place the CDCES or certification candidate under probation and actually and systematically monitor the CDCES or certification candidate for a specific length of time;
- f. if appropriate, refer the matter to the national, regional and state professional association and/ or a state licensing, registration, or certifying authority;
- g. suspend or revoke the CDCES or certification candidate's credential;
- h. require the CDCES or certification candidate to take remedial personal rehabilitative and/or educational actions; and/or
- h. take any other action as set forth in Rule R2.3 above.

**R6.2 Notification.** The Committee shall notify the Complainant and CDCES or certification candidate of its determination and action to be taken within thirty (30) days of the date of its decision.

**R6.3 Appeal.** The CDCES or certification candidate shall have fifteen (15) days from the date of the notification to appeal the Committee's findings. The CDCES or certification candidate must notify the Committee in writing within fifteen (15) days of the date of the Committee's notification if he/she intends to appeal. The appeal must be mailed by certified mail, return receipt requested or by verifiable overnight express mail service, to CBDCE's headquarters. The CDCES or certification candidate's notification must include all reasons and bases for the appeal. If the CDCES or certification candidate does not appeal the Committee's decision within the fifteen (15) day time period, the Committee's conclusions and sanctions shall be deemed final, effective immediately. The Committee shall so notify the Complainant and the CDCES or certification candidate.

**R6.4 Panel.** The Board may elect to establish a panel consisting of three (3) of its members ("Appeal Panel"), who are not simultaneously serving on the Committee, to act on its behalf to review, consider and make a final determination about an appeal of a Committee decision.

**R6.5 Board.** If the CDCES or certification candidate appeals a decision by the Committee regarding the imposition of discipline and/or sanctions, he/she must do so by submitting a written appeal statement. The Board or Appeal Panel shall consider the written appeal statement and all available evidence. The CDCES or certification candidate shall pay for all of his/her own costs.

### VII. BOARD'S DECISION

**R7.1 Further Consideration.** The Board or Appeal Panel may, after reviewing the decision of the Committee, determine that the Committee did not properly review the evidence prior to making its final decision in the matter. In such case, the Board or Appeal Panel may remand the matter back to the Committee for further consideration.

**R7.2 Board or Appeal Panel's Decision.** The Board and Appeal Panel shall only overrule the Committee's decisions in the event of the following:

- a. the Canons were incorrectly applied;
- b. the findings of facts by the Committee were clearly erroneous;
- c. it would be unjust or unfair to implement the Committee's decision;
- d. the procedures used by the Committee were in serious and substantial violation of the Canons and these Rules; and/or
- e. the disciplinary sanctions determined by the Committee were grossly disproportionate to the facts.

In no event shall the Board and Appeal Panel be bound by the Committee's determination regarding the sanction.

**R7.3 Notification.** Within sixty (60) days of receipt of the written appeal statement, the Board or Appeal Panel shall notify the Complainant and the CDCES or certification candidate of its decision which shall be final. The Board and Appeal Panel's decision may not be appealed. Once the Board or Appeal Panel's decision has been made, it shall notify the Committee, which shall implement the Board or Appeal Panel's directives.

**R7.4 Publication of Sanction.** CBDCE shall report, at least annually, the names of all sanctioned CDCES or certification candidates and the violations of the Canons involved. In addition, CBDCE shall notify all interested national, regional and state professional associations as well state licensing and certifying authorities; and, on request, any interested person or public agency deemed necessary to protect the public and/or who recognizes the standards of CBDCE.

**VIII. CLOSE OF CASE**

**R8.1 Close of Case.** Once the final decision has been made by the Committee, the Board or Appeal Panel, the matter shall be closed and the files shall be retained at CBDCE's headquarters.

**IX. REQUEST FOR REINSTATEMENT OF CREDENTIAL**

**R9.1 Reinstatement Request.** CBDCE will consider all written reinstatement requests, which must include the following information: (i) the date of the final Committee or Board or Appeal Panel disposition; (ii) a complete statement of reasons that the CDCES or certification candidate believes support the reinstatement request; and (iii) copies of all relevant documents and materials supporting the reinstatement request. CBDCE will provide its decision to the CDCES or certification candidate within forty five (45) days of receipt of the reinstatement request.

**X. GOVERNING LAW/VENUE**

**R10.1 Governing Law.** The laws of the State of Illinois shall govern these Rules.

**R10.2 Venue.** The CDCES or certification candidate and CBDCE agree to file and pursue all claims and suits regarding these Rules solely with the applicable court in the jurisdiction in which CBDCE's headquarters are located.



# Request for Special Accommodations

If you have a disability covered by the Americans with Disabilities Act, **please complete this form and provide the Documentation of Disability-Related Needs on the next page and submit both pages with your application.** The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality.

## Candidate Information

Candidate ID # \_\_\_\_\_ Requested Test Center: \_\_\_\_\_

\_\_\_\_\_  
Name (Last, First, Middle Initial, Former Name)

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Daytime Telephone Number Email Address

## Special Accommodations

I request special accommodations for the Certification Examination for Diabetes Care and Education Specialists.

Please provide (check all that apply):

- Reader
- Extended testing time (time and a half)
- Reduced distraction environment
- Please specify below if other special accommodations are needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### PLEASE READ AND SIGN:

I give my permission for my diagnosing professional to discuss with CBDCE/PSI staff my records and history as they relate to the requested accommodation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Upload this completed Candidate Request for Special Accommodations form in your CBDCE portal during the registration process. If you have questions, contact CBDCE at info@cbdce.org or 847-228-9795.**

# Documentation of Disability-Related Needs

Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist) to ensure that PSI is able to provide the required accommodations.

## Professional Documentation

I have known \_\_\_\_\_ since \_\_\_\_ / \_\_\_\_ / \_\_\_\_ in my capacity  
Candidate Name Date

as a \_\_\_\_\_  
My Professional Title

The candidate discussed with me the nature of the test to be administered. It is my opinion that, because of this candidate's disability described below, he/she should be accommodated by providing the special arrangements listed on the Request for Special Accommodations.

Description of Disability: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date: \_\_\_\_\_ License # (if applicable): \_\_\_\_\_

**Upload this completed documentation of Disability-Related Needs form  
in your CBDCE portal during the registration process.  
If you have questions, contact CBDCE at info@cbdce.org or 847-228-9795.**

**If your examination application has been approved,  
you may request scheduling assistance through PSI at:  
[https://psi-cdexp.zendesk.com/hc/en-us/requests/new?ticket\\_form\\_id=360000991112](https://psi-cdexp.zendesk.com/hc/en-us/requests/new?ticket_form_id=360000991112)**

# Notes

# Notes

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