



Preparing for Certified Diabetes Care and Education Specialist Exam (CDCES) 2024

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 Pronouns: She, her, and hers
 President, Diabetes Education Services

DiabetesEd.net Website Orientation



PocketCards




CDCES Coach App




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We are Here to Help!



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 Certification Pathway Coach &
 Customer Happiness Expert



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 Customer Advocate and Brand
 Ambassador

If you have questions, you can chat with us at www.DiabetesEd.net
 or call 530 / 893-8635 or email at info@diabetesed.net

Land Acknowledgment

► We acknowledge and are mindful that Diabetes Education Services stands on lands that were originally occupied by the first people of this area, the Mechoopda, and we recognize their distinctive spiritual relationship with this land, the flora, the fauna, and the waters that run through this area.



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Start Your Journey

Preparing for CDCES Exam?

Future CDCES – Click Here!

Prep for CDCES Webinars
May 28, July 10, Aug 14

Preparing for BC-ADM Exam?

Future BC-ADM – Click Here!

Prep for BC-ADM
April 10, Aug 8, Sept 12

ADCES Book Bundle
The Art & Science Desk Reference
Review Guide for Certification Exam

ADCES Book Bundle:
Desk Reference &
Review Guide - 6th
edition
\$ 388.95

Topics – Prep for CDCES

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



Diabetes Cert Names

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



www.cbdce.org



01 — 03

Thinking about Earning the CDCES?

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



Become Certified

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

Get started. →

What is a CDCES?

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

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

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



Why Take the CDCES Exam?

- ▶ Provides a mechanism to demonstrate professional accomplishment and growth
- ▶ Provide formal recognition of specialty practice and knowledge at a mastery level
- ▶ Provides validation of demonstrated dedication to diabetes
- ▶ Promote continuing commitment to best practices, current standards and knowledge



Professional Practice Experience Must meet all - 2024

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

AND

- ▶ *Minimum of 1,000 hours of professional practice experience within the past **5** years in diabetes self-management education with a minimum of **200** hours = about 4 hrs a week) accrued in the last 12 months.

AND

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

2021- 2026 Practice Experience Updates Extended through 2026 and beyond? CBCDE

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.

Professional Degree, DSME Practice Hours, plus CE

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



Quick Question A

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

Definition of Diabetes Education

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



Definition of Diabetes Education

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



DSMES is for Everyone

- ▶ All people with diabetes should participate in diabetes self-management education and support to facilitate the knowledge, decision-making, and skills mastery for diabetes self-care.
- ▶ Assess clinical outcomes, health status, well being and support.
- ▶ Person centered
- ▶ Digital coaching
- ▶ Identify barriers
- ▶ Eval SDOH
- ▶ Consider barriers



Diabetes Care & Education Includes:

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

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



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



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



Definition of Diabetes Education

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



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



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

Diabetes Self Management Ed Benefits

- ▶ Improved knowledge
- ▶ Lower weight
- ▶ Improved quality of life
- ▶ Reduced mortality
- ▶ Positive coping
- ▶ Reduced cost
- ▶ Only 5-7% of Medicare/insured receive DSME)
- ▶ Increased primary care, preventive services
- ▶ Less frequent use of acute care and inpt admissions
- ▶ More likely to follow best practice recommendations (esp those with Medicare)



FIVE critical times to provide and modify DSMES



- 1) At diagnosis.
- 2) Annually
- 3) When not meeting treatment targets.
- 4) When complicating factors develop.
- 5) When transitions in life and care occur.

Powers MA, Bardsley JK, et al. DSMES Consensus Report, The Diabetes Educator, 2020
ADCEB. AADE7 Self-Care Behaviors, The Diabetes Educator, 2020



([cdc.gov/diabetes/professional-info/training.html](https://www.cdc.gov/diabetes/professional-info/training.html))

DSME Overall Objective

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

Language of Diabetes Education

Old Way

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



Diabetes Care.

The Use of Language in Diabetes Care and Education
Position Statement: American Diabetes Association, 2017. <https://doi.org/10.2337/171401>

New Way

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

What we say matters

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



Test Taking Window

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



Starting March 1, Apply through CBDCE

- ▶ Effective March 1, 2024 you will apply for the CDCES Exam through CBDCE but will first need to create an account with CBDCE.
- ▶ If approved, you will be emailed an eligibility confirmation notice which includes the 90-day window during which you'll need to schedule and take your exam. Keep it handy. There's a lot of important and valuable information in it. Once you've got the confirmation notice, you can schedule your exam through your CBDCE account that you created.
- ▶ To apply for the CDCES exam, create and log into your CBDCE account > click on "Get Certified > Application > Create New Application" and follow through the application pages through application submittal and payment.
- ▶ To schedule your exam, you can do so, easily, in your CBDCE account. Log into your CBDCE account, click on "Get Certified" > click on "details" in the application > click on Schedule Exam > you will be redirected to the PSI test taker portal to schedule your exam. Please be mindful of the required timeframes for rescheduling as some fees may apply.

CDCES Live Remote Proctoring (LRP)

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



Live Remote Proctoring

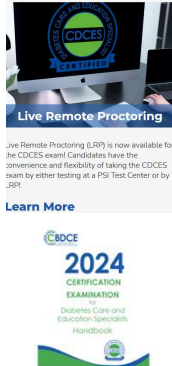
Live Remote Proctoring (LRP) is now available for the CDCES exam! Candidates have the convenience and flexibility of taking the CDCES exam by either testing at a PSI Test Center or by LRP.



<https://www.cbdce.org/apply-and-schedule>

CDCES Live Remote Proctoring

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



When will I get my results?

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



Scoring the Exam

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



CDCES Exam First Time Pass rates

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

2010 – 69%

2011 - 65%

2012 – 63.5%

2013 – 67 and 69%

2014 - 66 and 67%

2015 - 62 and 64% (test updated)

2016 – 67%

2017 – 66%

2018 – 67%

2019 – 70%

2020 & 2021 & 2022 – 67%



Exam Details

- ▶ Questions are linked directly to a task or tasks.
- ▶ Each question is designed to test if the candidate possesses the **knowledge necessary to perform the task or has the ability to apply it to a job situation.**
- ▶ 25 of the 200 (175 in July) questions are new - but are **not** counted in the determination of individual examination scores.

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)



Quick Question – Multiple answers

What are some study strategies that will help you succeed?

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

220 Test Questions – Assess your Knowledge



DiabetesEdUniversity.com
\$49 for 220+ Questions

Online Courses – Live Conferences – Virtual Conferences – Bundles – Books – Extensions –

Home > Toolkit > Test Taking Practice Exam Toolkit | Webinar + 220 Sample Practice Test Questions



Test Taking Practice Exam
Toolkit | Webinar + 220
Sample Practice Test
Questions

\$ 49.00

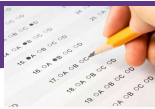
Quantity
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Overview of CDCES Exam



▶ Composed of 200 (175 starting in July) multiple-choice, objective questions with a total testing time of four (4) hours.

▶ Based on job analysis completed in 2018, which surveyed diabetes educators about the tasks they performed.

▶ **Exam will be updated in July 2024 based on new exam outline!**

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)

Exam Content through June vs July 1, 2024 - Assessment

- ▶ **Assessment (59)**
 - ▶ **Starting in July (37)**
 - ▶ Learning (19)
 - ▶ Health and Psychosocial Status (19)
 - ▶ Knowledge and Self-Management Practices (21)



Starting July 1st

- 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 (diabetes, site responses, extremities, etc.)
 - 3. Social determinants of health (income, living situation, healthcare access, social support, 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 (cognition, physical, language, cultural, spiritual, health/language dynamics, fears and myths, life transitions, etc.)
 - B. **Self-Management Behaviors and Knowledge (15)**
 - 1. Diabetes process
 - 2. Eating habits and preferences
 - 3. Activity habits and preferences
 - 4. Medication practices and preferences (prescriptions, nonprescription, complementary and alternative medicine)
 - 5. Monitoring and data collection (glucose, ketones, weight, dietary intake, activity, etc.)
 - 6. Care of feet
 - 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, experiential, individual or 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, health/language dynamics, learning disabilities, etc.)

Exam Content - Intervention

- ▶ Intervention (88)
 - Starting July- Care & Education Interventions (105)
- ▶ Collaboration with Individual, Family, Caregiver, and Healthcare Team (18)
- ▶ Educate based on individualized care strategies (35)
 - ▶ Meds, MNT, acute and chronic complications, problem solving
- ▶ Evaluate, Revise and Document (26)
- ▶ Follow-up, support and referral (9)



Exam Content – Disease Management

- ▶ Education and Program Standards (28)
 - Starting July Standards & Practices (8)
- ▶ Education services standards
- ▶ National Standards for Diabetes Self Management Education and Support (8)
- ▶ Clinical Practice (18)
 - ▶ Inpt and Outpt Standards for ADA, AACE
- ▶ Promote Diabetes Advocacy (2)



- ▶ For detailed outline look in Testing Handbook

Examination Content Outline
Effective July 1, 2024

A. Assessment (37)

1. Diabetes-related health history (diagnosis, duration, symptoms, complications, treatment, comorbidities, healthcare utilization, adherence, etc.)
2. Diabetes-specific physical assessment (vitals, skin inspection, edema, etc.)
3. Social determinants of health (economic, living situation, healthcare access, social support, and food/housing insecurity)
4. General health history (living, medical, mental health, substance use, surgical, allergies, and medications)
5. Diabetes measures and other laboratory data
6. Mental health (well-being, 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 practice and preference (prescription, nonprescription, complementary and alternative medicine)
5. Monitoring and data collection (glucose, ketones, weight, dietary intake, etc.)
6. Use of resources
7. Use of technology (insulin, 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, experiential, individual or 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, resources, learning/engagement dynamics, learning disabilities, etc.)

D. Care and Education Interventions (100)

1. Disease Process and Approaches to Treatment (22)
 - a. Diagnosis and classification
 - b. Pathophysiology (including long-term period, disease phenomenon, modifiable and non-modifiable risk factors)
 - c. Effective management (intensity, timing, dose, and stress)
 - d. Pharmacological and non-pharmacological
 - e. Treatment goals (glycemic metrics, blood pressure, lipids, risk reduction, quality of life)
2. Individualized Education Plan (15)
 - a. Developing plan based on assessment, in collaboration with person with diabetes (pre-diabetes and care team)
 - b. Identify instructional methods
 - c. Set SMART goals
3. Patient-Centered Education on Self-Care Behaviors (58)
 - a. Nutrition Principles and Guidelines
 - i. American Diabetes Association (ADA) and Academy of Nutrition and Dietetics nutrition recommendations (meal planning, meal/snack techniques, dietary approaches, etc.)
 - ii. Carbohydrate types, food sources, sugar, alcohol and substitutes, carbohydrate counting
 - iii. Fat types, food sources
 - iv. Protein/food sources, meal/dietary, record (and)
 - v. Alcohol (amount, precautions)
 - vi. Food and medication integration (medication timing, meal timing, etc.)
 - b. Food label interpretation (nutrition facts, ingredients, health claims, sodium, etc.)
 - c. Weight management
 - d. Dietary and herbal supplements
 - e. Special considerations (food allergies, food aversion, gastrointestinal, color blindness, metabolic surgery, failure to thrive, disordered eating, etc.)
4. Physical Activity
 - a. ADA and American College of Sports Medicine recommendations
 - b. Benefits, challenges, and safety considerations, post-exercise adjustment (and hypoglycemia, etc.)
 - c. Activity plan (frequency, intensity, time, and type)
 - d. Adjustment of monitoring, food, and/or medication for planned and unplanned activities
5. Medication Management
 - a. ADA/European Association for the Study of Diabetes (EASD) guidelines
 - b. Medication (class, action, administration, side effects, contraindications, etc.)
 - c. Medication selection (cardiovascular protection, glycemic efficacy, impact on weight, lipids and duration of diabetes, etc.)
 - d. Medication adjustment
 - e. Insulin delivery systems
 - f. Immunization
 - g. Monitoring and integration
 - h. Glucose (device selection, use, testing techniques, metrics)
 - i. AACE
 - j. Blood pressure
 - k. Weight
 - l. Lipids
 - m. Kidney health

CBDCE.org

CDCES Prep Bundle & Virtual Conference with Free Bundle address these topic areas for the pre & post July exams.

EXAMINATION CONTENT OUTLINE

CBDCE.org



Know these ADA 2024 for Exams

A1c less than 7%
(individualize)

- Pre-meal BG 80-130
- Post meal BG <180
- Time in Range (70-180) 70% of time

Blood Pressure
<130/80



Cholesterol

- Statin therapy based on age & risk status
- If 40+ with ASCVD Risk, decrease LDL by 50%, LDL <70
- If 40+ with ASCVD, decrease LDL by 50%, LDL <55

Articles to Read to Prepare for CDCES Exam

Read More: Recommended Articles

ADA Standards of Care 2024 - This yearly publication by the American Diabetes Association outlines the national goals of care based on the latest research for diabetes management. This is one of the most important guidelines to read as a Certified Diabetes Care and Education Specialist.

Summary of Revisions: Standards of Care in Diabetes-2024 - The 2024 Standards of Care includes revisions to incorporate person-first and inclusive language. Efforts were made to consistently apply terminology that empowers people with diabetes and recognizes the individual at the center of diabetes care.

Screening and Diagnosis of Diabetes Mellitus 2024 - One-page cheat sheet that summarizes screening, risk status, and diagnostic criteria for diabetes. Great for your office and as a study tool.

Pharmacologic Approaches to Glycemic Treatment in 2024 - This ADA/ASD hyperglycemia road map details strategies to improve glucose management for both Type 1 and Type 2 Diabetes. Section 8 of Standards of Care, 2024.

Language & Diabetes: What we say matters! Resource page

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

Med Cheat Sheets | Cholesterol and Hypertension Medications 2024 - These summary sheets are helpful for your clinical practice and preparing for certification exams. For exam success, be familiar with the general concepts, side effects and precautions of these medications.

ADCE's 7th Self-Care Behaviors - A must-read for anyone entering the field of Diabetes or as a reference for those already in the field. These 7 Self-Care Behaviors™ provide a framework for patient-centered diabetes self-management education and training (DSME/T) and care.

American Association of Clinical Endocrinology Consensus Statement: Comprehensive Type 2 Diabetes Management Algorithm - 2023 Update, Part 1

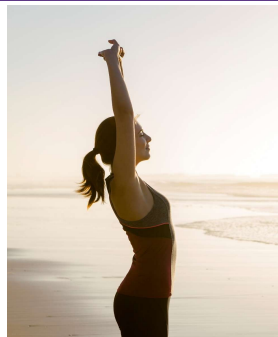
American Association of Clinical Endocrinology
2 Diabetes Mellitus. If you are taking the slide content that reviews diabetes management

What to Study?



Taking the Exam

- ▶ Questions
- ▶ Answers
- ▶ Pitfalls



Empowerment Errors

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



Thinking Pitfalls

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



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

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



Look for Clues in The Answers

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



Getting to the Right Answers

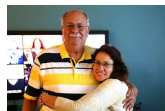
- ▶ Do not leave any answers blank
- ▶ Look for clues in the question
- ▶ Don't get lured in by juicy answers
- ▶ Avoid imposing your life experience into the question/answer
- ▶ Keep breathing – Get up and move
- ▶ Even simple math problem should be worked out on scratch paper



Sample Question -1

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

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



Sample Question 2

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

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



Vignette Style Question

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



Vignette Style Question 1

- ▶ Given his age and health status, according to ADA 2023 Standards, what are his goals?
- A. BP less than 140/90, LDL less than 100
- B. BP less than 130/80, LDL less than 70
- C. BP less than 120/80, start statin
- D. BP less than 130/80, LDL less than 100



Vignette Style Question 2

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



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Diabetes Education 25

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NEW Webinar

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1.0 CE (Pre-Webinar & Post-Webinar)
Test Taking Practice Exam Sample Questions Tutorial
2023-2024 Self-Administered Exam Rights to Test
3 Steps to Define Ambiguity
Language that Supports the Individual and Supports Hope

NEW Webinar

Healthy Habits: Sign Up & Follow
Blog Sign Up
Renewing My CDE® - What is Required?
FREE Resource Library

Follow the Guide to the Guide - Exploring the US System
Health Impact of Advanced Glycemic Examinations
Ambulatory Glucose Monitoring (AGM) Specialists
Behavior Change Theories Made Easy
Strategies to Reinforce your Diabetes Program or Business
Testimonials - Live Webinars

Vignette Style Question 3

- He requests information about healthy eating. Which meal planning approach best suits this individual until he can see a registered dietitian?
- A. Very low-calorie diet
 - B. Eliminate all concentrated sweets
 - C. Eat 3 meals a day with snacks in between
 - D. Plate Method



Sample Question 3 – Carb Counting

JL uses an insulin pump and is carb counting using exchange list. A typical breakfast includes: ½ banana, 1 cup of milk, 2 tablespoons almond butter and 1 piece whole grain bread. LS's insulin to carb ratio for breakfast is 1:12, for lunch and dinner it is 1:15. Based on this, how much insulin does LS need for breakfast?

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

Sample Question 4

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

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



Med and Insulin PocketCards



NEW Accordion 2-sided PocketCards

Glucagon Treatment for Diabetes-Related Hypoglycemia

Name / Delivery	Supplier	Age	How to Use	How to Store	How to Dispose
Glucagon (Bioss)	Bioss	12 years and older	1 mg (0.5 mL)	Store at room temperature (20° to 25°C) or in the refrigerator (2° to 8°C). Do not freeze.	See package insert for disposal instructions.
Glucagon (Bioss) - 1 mg/0.5 mL	Bioss	12 years and older	1 mg (0.5 mL)	Store at room temperature (20° to 25°C) or in the refrigerator (2° to 8°C). Do not freeze.	See package insert for disposal instructions.
Glucagon (Bioss) - 3 mg/1.5 mL	Bioss	12 years and older	3 mg (1.5 mL)	Store at room temperature (20° to 25°C) or in the refrigerator (2° to 8°C). Do not freeze.	See package insert for disposal instructions.
Glucagon (Bioss) - 1 mg/0.5 mL	Bioss	12 years and older	1 mg (0.5 mL)	Store at room temperature (20° to 25°C) or in the refrigerator (2° to 8°C). Do not freeze.	See package insert for disposal instructions.
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Standards of Care
Meds PocketCards
Question of the Week
Online Course Viewing

Sample question 5

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

- Increase evening dose of basal insulin
- Increase morning dose of bolus insulin
- Check 3am blood glucose
- Eliminate bedtime snack












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Level 1 - Diabetes Fundamentals

Diabetes Fundamentals Sessions 2024 Webinar Updates

All courses air at 11:30 a.m. (PT)

- January 11, 2024 - **Class 1: Getting to the Nitty Gritty** | 1.5 CEs
- January 16, 2024 - **Class 2: Nutrition & Exercise 1.5** | CEs
- January 18, 2024 - **Class 3: Meds Overview for Type 2** | 1.5 CEs
- January 23, 2024 - **Class 4: Insulin Therapy & Pattern Management** | 1.75 CEs
- January 25, 2024 - **Class 5: Goals of Care & Lower Extremity Assessment** | 1.5 CEs
- January 30, 2024 - **Class 6: Hypoglycemia, Sick Days, & Monitoring** | 1.5 CEs

Recorded and Ready for On-Demand Viewing







Level 2 | Standards of Care Intensive | 20 CEs

Standards of Care Intensive 2024 Webinar Updates

All courses air at 11:30 a.m. (PT)

- December 12, 2023 - **Class 2: Hyperglycemic Crises, DKA & HHS Standards** | 1.0 CE
- December 19, 2023 - **Class 3: How to Assess Well-Being** | From Populations to Individuals | 1.5 CEs
- December 21, 2023 - **Class 4: Meds Management Update for Type 2 Diabetes** | 1.5 CE
- February 1, 2024 - **Class 1: ADA Standards of Care** | 2.0 CEs
- March 27, 2024 - **Class 5: Critical Assessment in Diabetes Care** | Fine-Tuning Diabetes Detective Skills | 2.0 CEs
- April 11, 2024 - **Class 6: Microvascular Complications Prevention & Treatment** | Eye, Kidney, Nerve Disease | 1.75 CEs
- April 25, 2024 - **Class 7: Cardiovascular Disease & Risk Management** | 1.5 CEs
- April 30, 2024 - **Class 8: Lower Extremity Assessment** | 1.5 CEs
- May 2, 2024 - **Class 9: Older Adults & Diabetes** | 1.5 CEs
- May 30, 2024 - **Class 10: From Tots to Teens** | Diabetes Standards | 1.5 CEs
- June 11, 2024 - **Class 11: Pregnancy & Diabetes** | 1.5 CEs
- June 13, 2024 - **Class 12: Hospitals & Hyperglycemia** | 1.5 CEs
- June 20, 2024 - **Class 13: Setting up a Successful DSME Program** | 1.5 CEs










Level 3 | DiabetesEd Specialist 2024 Boot Camp | 12+ CEs Ready for Viewing

All courses air at 11:30 a.m. (PT)

- February 13, 2024 - **Boot Camp 1: Diabetes | Not Just Hyperglycemia** | 1.75 CEs
- February 15, 2024 - **Boot Camp 2: Standards of Care & Cardiovascular Goals** | 1.8 CEs
- February 20, 2024 - **Boot Camp 3: Meds for Type 2** | What you need to know | 1.75 CEs
- February 22, 2024 - **Boot Camp 4: Insulin Therapy** | From Basal/Bolus to Pattern Management | 1.75 CEs
- February 27, 2024 - **Boot Camp 5: Insulin Intensive & Risk Reduction** | Monitoring, Sick Days, Lower Extremities | 1.75 CEs
- February 29, 2024 - **Boot Camp 6: Medical Nutrition Therapy** | 1.75 CEs
- March 12, 2024 - **Boot Camp 7: Microvascular Complications & Exercise** | Screen, Prevent, Treat | 1.75 CEs
- March 14, 2024 - **Boot Camp 8: Coping & Behavior Change** | 1.75 CEs
- March 19, 2024 - **Boot Camp 9: Test-Taking Coach Session** (48 Questions) | No CE

Recorded and Ready for On-Demand Viewing




Level 4 | Advanced Level & Specialty Topics | 20 CEs

Clinical Practice & Assessment

- Class 1: Type 2 Diabetes Intensive (2 CEs) - Ready for On-Demand Viewing
- Class 2: 3 Steps to Definitive Amputation: Access, Screen, & Report (1.0 CE) - Ready for On-Demand Viewing
- Class 3: Cancer & Diabetes (1.25 CEs) - Ready for On-Demand Viewing



Insulin Calculations & Pattern Management

- Class 4: Insulin Calculation Workshop (From Pumps & Beyond) (1.5 CEs) - Ready for On-Demand Viewing
- Class 5: Solving Glucose Mysteries for Type 1 (1.5 CEs) - Ready for On-Demand Viewing
- Class 6: Solving Glucose Mysteries for Type 2 (1.5 CEs) - Ready for On-Demand Viewing
- Class 7: Basal Bolus Therapy in Hospital (1.5 CEs) - Ready for On-Demand Viewing

Beyond the Usual Diabetes Topics

- November 16, 2023 - Class 8: From the Gut to the Butt - Exploring the GI System (1.0 CE)
- Class 9: The Impact of Adverse Childhood Experiences on Health (1.0 CE) - Ready for On-Demand Viewing

Bonus Courses

- Class 10: What We Say Matters: Language that Respects the Individual and Inspires Hope (1.5 CEs) - Ready for On-Demand Viewing
- Class 11: Mindfulness & Compassion in the Diabetes Encounter Webinar (1.0 CE) - Ready for On-Demand Viewing



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Knowledge = Confidence

- Most important aspect of test taking
- Knowing the content will improve your confidence
- As you study your knowledge base expands



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CDCES / BC-ADM Success Page

Melissa is a Registered Dietitian Nutritionist based out of North Miami. She is most passionate about using her Medical Nutrition Therapy coupled with Motivational Interviewing skills to help our most vulnerable populations. Since she became a Dietitian and began working with her community, she knew she would pursue a specialization in Diabetes Management to maximize her impact and help those who need it most. She is very excited to join the CDCES community of providers!

Melissa Dolan, MS, RDN, LD/N, CDCES



I want to thank you all for the support you give to Diabetes Educators, but also to those of us preparing for the CDCES Exam. I truly want to THANK YOU for that! I just passed my exam on June 1st, 2023. I appreciate all that you do to simplify the updates and new evidence based practice information. The cheat sheets you provided were the one thing that I would say helped really reinforce the information for me. I also watched the boot camp videos. I had less stress because of your supportive site and that helped so much! I am so honored to be able to make Diabetes easier for patients everyday.

Carolyn Fletcher, BSN, RN, CDCES



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Thank You



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