

DiabetesEd.net Website Orientation

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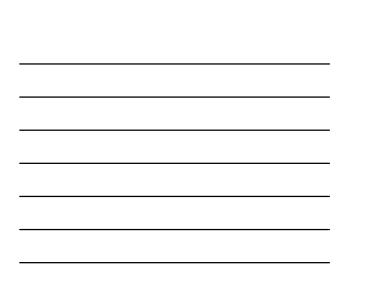
Beverly Thomassian, RN, MPH, CDCES, BC-ADM CEO, coach, instructor, cheerleader, mentor

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Diabetes Education 25-

PocketCards

Diabetes Stucation





Initiative inspired by CDR

- Inclusion
- Diversity
- Equity
 Accoss
- Access
- We are committed to promoting unlessly and inclusion in our educational offerings.
 We recognize, respect, and include differences in ability, age, culture, ethnicity, gender, gender identity, sexual orientation, size, and socioeconomic characteristics.
 Our goal is to promote equity and access, acknowledging historical and institutional
- We are committed to practicing cultural humility and cultivating our cultural
- We wish to create a safe space within our
- community where one's beliefs, experiences, identity, and differences in ability, age, size, socio-cultural/socioeconomic characteristics, and political affiliations are considered and respected.



Topics

- Getting ready for your CDCES and/or BC-ADM Exam.
- Helpful resources
- Strategies to approach test questions.
- How to get into best shape to succeed at test taking.
- Practice taking test questions.



Getting Ready for the Exam

- Assess your knowledge
- Take as many practice tests as possible
 - Test Taking Toolkit (DiabetesEd.net)
 ADCES Review Guide (over 480
- questions) • Prep for CDCES/ BC-ADM FREE
- Prep for CDCES/ BC-ADM FREE Webinars
- Fill in knowledge gaps with books, articles and online classes
- At exam, imagine your self calm but energized



Stretch During Exam Kind self-coaching

Diabetes Stucation





Diabetes Stucation

2. 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

Diabetes Stucation

3. Avoid 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.

Diabetes Education

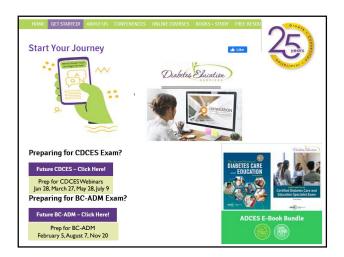
4. Keep it Person Centered

- Look for Person Centered answers
- Don't get lured in by juicy answers
- Only use content in question
- Avoid imposing your life experience into the question/answer



and BC-ADM Webinars

- Get rid of false answers
- Even simple math problem should be worked out on scratch paper

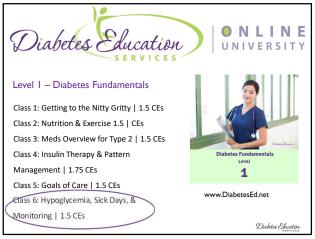




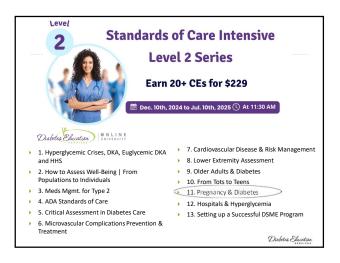
AR is 13 years old and started insulin pump therapy. AR is worried about glucose levels dropping too low. What is the most accurate definition of severe hypoglycemia?

- a. Blood glucose less than 54 mg/dL
- b. Hypoglycemia that results in a coma
- c. Person has to self-inject glucagon
- d. Hypoglycemia requiring assistance

Glucagon PocketCard & Level I



- LR is 32 years old and just went for their first prenatal visit. LR is 11 weeks pregnant and has a family history of type 2 diabetes. LR's fasting blood glucose is 131 mg/dL and 128 mg/dL on 2 different days.
- Based on these findings, which of the following statements is correct for LR?
- A. LR needs to be started on metformin.
- B. LR has diabetes in pregnancy and will need close follow-up.
- c. LR will need to do a 75 gm OGTT in the next few weeks to eval for gestational diabetes
- D. LR will need to go on a low carb, high protein diet to stop ketosis Level 2 – Diabetes & Preg Objetes Education



Question 3

JR wants to know the benefit of increasing activity. What is the most accurate statement regarding exercise and diabetes.

- a. Exercise increases visceral fat stores
- b. Exercise causes weight loss
- c. Exercise increases insulin sensitivity
- d. Exercise decreases counterregulatory hormones

Level I – MNT & Exercise

- Which of the following is an accurate statement about continuous glucose monitors (CGM)?
- A. It is important to verify CGM readings with a fingerstick check within 48 hours of sensor insertion.
- B. CGMs use plasma glucose to produce an electrical signal
- C. Components include a sensor, transmitter and a receiver
- D. Medicare insurance only covers CGM for people on insulin.

DiabetesEd Virtual or Live Conference – Technology Diabetes Shusteen



Question 5

Which of the following are the ADA recommended lipid treatment strategies for non-pregnant adults with diabetes?

- a. Start a low dose statin if LDL is more than 100mg/dl
- b. Start high dose statin therapy if younger than 40 with ASCVD
- c. Only start a statin if over the age of 40
- d. Consider statin therapy if the 10-year ASCVD risk is greater than 50%

Level 2 Standards and CV Disease

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Which of the following is true about Diabetes Self-Management Education (DSME) training?

- a. Medicare part B covers 80% of DSME training
- b. Medicare covers 9 hours of group education annually
- c. Medicare Part D covers 100% of DSME training
- d. Medicare part A covers 80% of DSME training

Level 2 Setting up Successful Diabetes Programmeter Studies



LS weighs 60 kg and is on 30 units glargine (Lantus) and 2000 mg metformin (Glucophage) daily. A1c is 8.9%. What would be the best next step?

- a. Decrease caloric intake by 7%
- b. Increase the glargine by 30 40%
- c. Add bolus insulin or GLP-1 RA
- d. Limit concentrated sweets

Levels, I, 2, 3 & 4 on insulin management Diabetes Sheation

Question 8

RT is on basal bolus insulin therapy. Which of the following blood glucose levels indicate that basal insulin is at the correct dose?

- a. Post lunch blood glucose of 148
- b. Post dinner blood glucose of 138
- c. Morning blood glucose of 126
- d. Pre dinner blood glucose of 118

Level I – Insulin Fundamentals

Diabetes Education

Question 9

Which of the following medications would you avoid for someone who has had a bad experience with hypoglycemia?

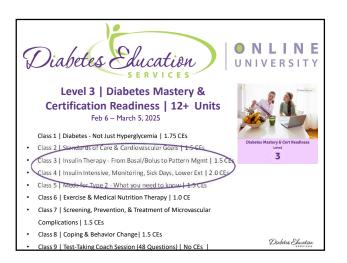
- a. Pioglitazone (Actos)
- b. Exenatide (Byetta)
- c. Canagliflozin (Invokana)
- d. Glimepiride (Amaryl)

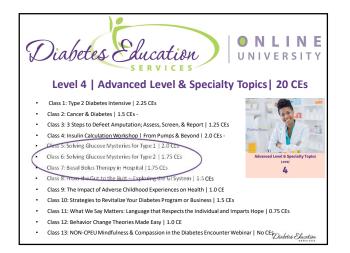
Level 1& 3 – Meds For Type 2

Bonus Question

- RL is on basal bolus therapy. He injects 1 unit for every 12gms of carb for breakfast and lunch and 1 unit for 15gms at dinner. For lunch, RL plans to eat a ham sandwich, a small orange, and a glass of milk. How much insulin will RL need to inject?
- A. 3.8 units
- B. 4.0 units
- C. 4.7 units
- D. 5.0 units

Level 3 & 4 - Insulin Pattern Mgmt & MNT Diabetes Education



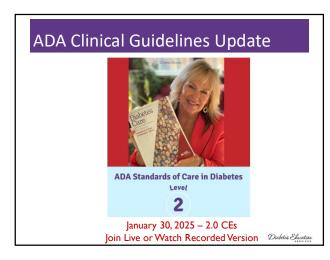


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For new type 2 diabetes, which of the following is the preferred initial class of pharmacologic intervention based on ADA Guidelines?

- a. Depends on cardiorenal risk factors and individual preferences
- b. Sulfonylureas or Metformin
- c. Nutrition therapy for 3 months to evaluate if effective response.
- d. GLP-1 RA or Mounjaro Injectable

Level 2 Standards or Levels 3 & 4 – Insulin Pattern Mgmt & MNT





Question 11

Sandy is a 15 year old female who just started wearing a continuous glucose monitoring (CGM) device. At her one week follow-up visit, she complains that she can't sleep at night because the device is constantly beeping at her. The Diabetes Care and Education Specialist reviews the CGM report with the family. Sandy is 54% time in range with 46% time in hyperglycemia. The high glucose alert is set at 200mg/dL and the low glucose alert is set at 70mg/dL.

Which CGM setting should be adjusted at this visit?

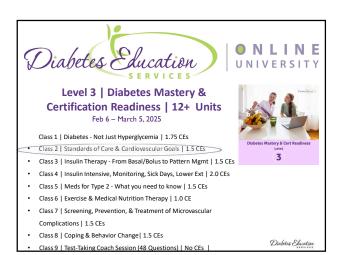
- A. Increase the high alert setting
- B. Increase the low alert setting
- C. Decrease the high alert setting
- D. Decrease the low alert setting

Diabetes Ed Course or Tech Toolkit

What did the Diabetes Prevention Program Demonstrate?

- a. Taking metformin daily reduced diabetes risk by 58%
- Losing 10 pounds reduces diabetes risk by 38%
- c. Exercising 30 minutes a day reduces diabetes risk by decreasing belly adiposity
- d. Losing weight and exercising reduces diabetes risk by 58%

Cheat Sheet on Landmark Trials & Level 3 Diabetes Shucation



Question 13

Who is the most appropriate candidate for continuous subcutaneous insulin infusion?

- a. LR with type 2, A1c of 7.9% on glipizide (Glucotrol) 10mg daily
- b. BT with type 1 diabetes who wants to simplify their insulin management
- c. ST with type 1 who is struggling with addiction
- d. RL type 2 with an A1c of 9.3%, who is on basal bolus insulin therapy and carb counting

Diabetes Ed Course or Tech Toolkit

> JR arrives at the clinic wearing a walking boot due to a recent foot injury. Tells you that they "banged their foot" on some farm equipment and since then it has been warm and swollen. It hurt at first, but the pain has diminished with time.

- When JR takes off the boot, you see this that the left foot needs attention. Based on this photo, what diabetes related food condition do you suspect?
- A. Peripheral arterial disease
- B. Venous statis ulcer
- c. Pre gangrenous inflammation
- D. Charcot Foot



Level 2, 4, 5 - Lower Extremities

Question 15

PR is has type 2 diabetes and wants to start swimming on a regular basis. What statement reflects pre-exercise evaluation guidelines?

- a. People with diabetes need to refrain from exercise until cleared by a Provider
- b. Routine exercise testing for asymptomatic adults is not recommended.
- c. EKG is required before a person with diabetes engages in an exercise program.
- d. High risk people with diabetes must avoid exercise

Level 3 – MNT & Activity

Diabetes Education

Question 16

TR is taking 15 units of glargine at bedtime and 4 units of lispro (Humalog) before each meal. TR is experiencing at least one episode of hypoglycemia a week, usually between lunch and dinner. TR checks glucose levels before each meal. Pre meal glucose levels are 110mg/dl on average. What initial change in self-management would you recommend?

a. move the glargine to the am to prevent post meal hypoglycemia

- b. decrease lispro at breakfast
- c. increase carbohydrate intake by 15 gms at meals
- d. decrease the lispro at lunch

Level 3 & 4 - Insulin Pattern Mgmt & MN Diabetes Shuation

JR wants to lose weight and tells you they will give up drinking 2 sodas a day and will substitute with water. They plan to give up sodas for two months. Each soda is 150 calories. How much weight would JR lose in two months by making this change?

- a. 16, 800 calories
- b. 5.14 pounds
- c. 300 cals a day
- d. 2.7 pounds

Stuff to memorize – IIb equal 3,5000 kCals Level 3 Diabetes Education

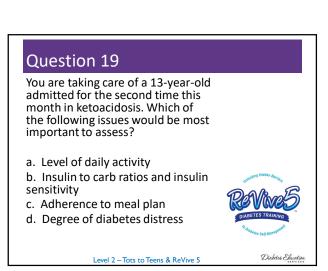
Question 18

A participant says to you, "I guess I could start riding my bike again." Using the transtheoretical model, what stage of change are they in?

Learning Theories Made Easy – Free Webinar

- a. precontemplation
- b. internal locus of control
- c. contemplation

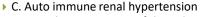
d. action



DigitalStudie University Behavior Change Theories Made Easy Insult care professional who are coaching individual to ing the other and annual studies of the other and the other Recorded & Ready for Viewing! Discover Advanced Specialty Topics

Poll Question 20

- ML has had type 2 diabetes for 12 years, a BMI of 33.7, an A1 C of 8.3% and elevated triglycerides and LDL cholesterol levels. You notice ML's palms are deeply red. Which of the following conditions is ML most likely experiencing in addition to diabetes?
- A. Steatosis
- B. Dermatomyositis secondary to inflammation



> D. Acanthosis Nigricans of the palmar sur

Level 2 – Critical Assessment of Diabetes

Diabetes Sucatio







CDCES / BC-ADM Success Page

Melissa is a Registered Diettian Nutritionist based out Pforth Mumi. She is most passionate about using her Medical Nutrition Theragy coupled with Mothvational Interviewing stills to help can most vulnerable populations. Since she became a Diettian and began working with her community, the howard he would pursue a specialization in Diabetes Management to most. She is wry excited to join the CDCES community of providers?



I want to thank you all for the support you give to Diabetes Educators but also to those of us preparing for the CDCSS Exam. Itruly want to HABKN VOI for that I usin passed mey aroan on June 31.2023. I appreciate all that you do to simplify the updates and once videous based practice information. The chest basets you provided were the one thing that I would say helped really reinforce the information on L allow worthed the boot cam yideous 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. Conjon Facteker, BSN, RN, CDCSS







