

Preparing for BC-ADM Resource Page



Starting your journey to becoming a BC-ADM?
Register for our FREE Preparing for BC-ADM Exam Webinar!

Interested in learning more about Board Certification in Advanced Diabetes Management?
This webinar will answer your questions.

PREPARING FOR THE BC-ADM EXAM
FREE WEBINAR

Interested in learning more about Board Certification in Advanced Diabetes Management? This webinar will answer your questions.



Speaker: Sarah Bivens, Thomasian, RN, MPH, BC-ADM, CDEES

www.DiabetesEd.net

We are Here to Help!



Bryanna Sabourin
Director of Operations

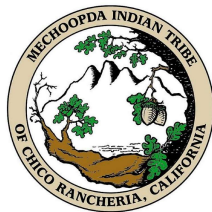


Tiffany Bergeron
Customer Advocate &
Customer Happiness Expert

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.



DiabetesEd.net Website Orientation

PocketCards

CDCES Coach App

Question of the Week & Sample Questions

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

www.DiabetesEd.net | info@diabetesed.net | 530-893-8635

Diabetes Education Services Inclusion Statement

Based on the IDEA Initiative inspired by CDR

- ▶ Inclusion
- ▶ Diversity
- ▶ Equity
- ▶ Access

- ▶ We are committed to promoting diversity 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 inequities.
- ▶ We are committed to practicing cultural humility and cultivating our cultural competence.
- ▶ 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.

Start Your Journey

HOME | GET STARTED | ABOUT US | CONFERENCES | ONLINE COURSES | BOOKS + STUDY | FREE RESOURCES

25 YEARS OF CELEBRATING 25 YEARS OF CELEBRATING

Step 1: Becoming a Diabetes Specialist (CDCES)

Step 2: Preparing to Take the CDCES Exam

1 Step: Becoming a Diabetes Specialist (CDCES)

2 Step: Preparing to Take the CDCES Exam

Preparing for CDCES Exam?

Future CDCES – Click Here!

Prep for CDCES Webinars
March 27, May 28

Preparing for BC-ADM Exam?

Future BC-ADM – Click Here!

Prep for BC-ADM – Feb 5, Aug 7, Nov 20

Focus on requirements to apply.

Focus on exam success.

Topics

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



Diabetes Education SERVICES

BC-ADM* Cert Book 2025



2025

Certification Examination

Board Certified-
Advanced Diabetes Management
(BC-ADM®)

Handbook



BC-ADM exam now owned by
same organization that
constructs CDCES Exam.

www.CBDCE.org



*Board Certification – Advanced
Diabetes Management

Definition of BC-ADM

- ▶ Skillfully manages complex needs and assists people at risk for and with diabetes and other cardiometabolic conditions with therapeutic problem solving.
- ▶ Within their discipline's scope of practice and licensure, those with BC-ADM® certification may adjust (and in some cases, prescribe) medications, treat, and monitor acute and chronic complications and other comorbidities, counsel people living with diabetes on lifestyle modifications, address psychosocial issues, and participate in research and mentoring.

Handbook



Holding the BC-ADM® credential does not confer a change in scope beyond current licensure or registration.

Why Take the BC-ADM Exam?

- ▶ Validates a healthcare professional's specialized knowledge and expertise in the management of people with diabetes.
- ▶ May be used by a hiring manager as “shorthand” for qualifications and resume
- ▶ May lead to increased compensation or the ability to leverage higher salary or promotion



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Potential Benefits of BC-ADM

- ▶ Available to multiple disciplines (nurses, dietitians, pharmacists, physician/DO's, and PAs)
- ▶ Increases marketability in job search
- ▶ Increases the visibility of the profession and organization
- ▶ Helps to fulfill increased need for advanced clinicians to manage the growing population of individuals with diabetes
- ▶ Personal satisfaction



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2025 – Qualifications

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



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Initial Qualifications to take BC-ADM-

Eligibility Requirements

Candidates must MEET the following requirements before applying for the examination. Refer to the eligibility Criteria chart below:

Eligibility Criteria	Nurse	Dietitian	Pharmacist	PA (Physician Assistant/Physician Associate)	Physician
License/Registration	Current, active RN and/or advanced practice nursing license	Current, active dietitian nutrition registration	Current, active pharmacist license	Current active physician assistant license	Current active MD/DO license
Advanced Degree	Master's or higher degree in a relevant clinical, educational, or management area	Master's or higher degree in a clinically relevant area	Master's or higher degree in Pharmacy	Master's or higher degree in a relevant clinical, educational, or management area	MD/DO degree
Experience	500 clinical practice hours within 48 months prior to applying for certification examination. (Clinical hours must be earned after relevant licensure/registration and advanced degree was obtained)				
Level of Practice	Skillfully manages complex patient needs and assists patients with therapeutic problem-solving. Within their discipline's scope of practice, healthcare professionals may adjust (and in some cases prescribe) medications, treat, and monitor acute and chronic complications and other comorbidities, counsel on lifestyle modifications, address psychosocial issues, and participate in research and mentoring.				

Your questions



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

Activities That Count Toward Hours

Activities that count towards practice hour requirement:


- Managing complex patient needs
 - Monitoring, interpreting, and applying results generated from complex patient data sets
 - Formulating and prioritizing a problem list
 - Educating individuals about medical nutrition therapy
 - Incorporating technologies into practice for maintenance and/or management of diabetes and cardiometabolic conditions
 - Managing and adapting interventions for special populations
- Assisting patients with therapeutic problem-solving
 - Conducting therapeutic interviews using a systematic approach
 - Counseling patients on lifestyle modifications
 - Incorporating appropriate behavior change models and techniques to improve health outcomes through problem solving and teamwork
 - Collaborating with individuals to individualize and prioritize their care
 - Establishing and implementing measurable self-care goals to improve health outcomes
 - Utilizing technology enhanced devices to collect, analyze, and inform judgements for individual and/or aggregated health data
- Adjusting medications if within their discipline's scope of practice
 - Managing pharmacologic therapy options and interventions for diabetes, cardiometabolic, and related conditions

- Treating and monitoring acute and chronic complications and other comorbidities
 - Performing comprehensive assessments of diabetes, complications, and related chronic and cardiometabolic conditions across the lifespan (e.g., functional status, sensory/foot, eye exam, medication, and complementary alternative medication review)
 - Implementing standards of diabetes care and clinical practice guidelines pertaining to assessment
 - Interpreting and applying results generated from assessment and diagnostic tests
 - Performing screenings and understanding diagnostic criteria for diabetes, cardiometabolic and related conditions
 - Implementing interventions that reflect standards of diabetes care and clinical practice guidelines
 - Discussing surgical options for diabetes management including eligibility, risks, benefits, and long-term outcomes
 - Collaborating with healthcare providers to coordinate care for individuals and populations
 - Managing diabetes in the hospital and during transitions of care
 - Engaging in telehealth services for diabetes management
 - Performing interventions pertaining to follow-up care, reflecting standards of diabetes care and clinical practice guidelines
- Addressing psychosocial issues
 - Evaluating self-care behavior and perform behavioral health assessment
 - Assessing social determinants of health
 - Collaborating with mental health providers to adjust interventions for psychosocial conditions
- Participating in research
 - Utilizing QI infrastructure to gauge population level diabetes measures
- Mentoring other clinicians in diabetes care
 - Reviewing treatments and outcomes, comparing, and explaining results
 - Evaluating and adjusting diabetes and cardiometabolic treatment care plans accordingly

Handbook 


Bev's Perspective – CDCES since 1992

- ▶ First took BC-ADM exam in 2001 (before kids)
- ▶ Strong background in inpt management
- ▶ Passed test – but opened another professional door – expanded my perspective, encouraged learning
- ▶ Created Critical Assessment Course as result
- ▶ Member of ANCC team, provided "Review Course"
- ▶ Retook exam in 2006
- ▶ Renewed by completing a bunch of stuff - 2011
- ▶ Declined to participate in committee to update exam in 2011 (although I really wanted to)
- ▶ Renewed again in 2016 and 2021



Recent Roles

<ul style="list-style-type: none"> ▶ Diabetes Program Manager <ul style="list-style-type: none"> • Inpatient diabetes management • ADA Recognized Outpt Program • Outcome Measurement • Training of Staff • Policies and Procedures • Teach Classes • Write articles 	<ul style="list-style-type: none"> ▶ Diabetes Specialist <ul style="list-style-type: none"> • Consultant to providers • CV Risk Management • Work on process improvement • Starting support group • Staff training • Medication Adjustments
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CDCES Vs BC - ADM

CDCES

- ▶ Educates and supports people affected by diabetes to understand and manage the condition.
- ▶ Promotes self-management to achieve individualized behavioral and treatment goals that optimize health outcomes.

BC-ADM

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

Board Certification –Advanced Diabetes Management (BC-ADM)

Description

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



• Excerpted from AADE website

Becoming a BC-ADM



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

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



Diabetes Education SERVICES

Applying to take the BC-ADM Exam

PROGRAM ADMINISTRATION

CBCE has contracted with Measure Learning to process applications and payments, schedule testing sessions and sites, and oversee the entire process. If you need assistance with anything related to the application, testing or payment process, please contact Measure Learning at candidate-support@measurelearning.com or 919.572.6880.

If you have any questions for CBCE related to the BC-ADM credential, please contact us at info@cbce.org.



EXAMINATION APPLICATION FEES AND DEADLINES

Testing Window	Application Fee* (Standard Rate)	Discounted* Application fee for ADCES members*	Application Deadline*	Notes
June 1-30	\$900 (equivalent to \$30/year for 5 years)	\$600 (equivalent to \$20/year for 5 years)	May 1 Late: up to May 15 +\$50 late fee	Includes the processing of the exam registration and one testing appointment. A second testing appointment in the next test window will incur retest fees. [†]
December 1-31	\$900 (equivalent to \$30/year for 5 years)	\$600 (equivalent to \$20/year for 5 years)	November 1 Late: up to November 15 +\$50 late fee	Includes the processing of the exam registration and one testing appointment. A second testing appointment in the next test window will incur retest fees. [†]

†The fee must be paid in U.S. Funds to Measure Learning by Visa or MasterCard.

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RETAKE FEES (NONREFUNDABLE)

Candidates who do not pass the certification examination may retake the exam in the next consecutive testing window (second testing appointment to retake exam can only occur once per year). For 2025, the examination retake fee is \$340; discounted to \$220 for ADCES members.



What application materials do I need to submit if audited? (10% random)

- ▶ Completed application including
 - ▶ Proof of Licensure
 - ▶ Documentation of 500 Advanced Practice Clinical Hours (within last 48 months) with attestation
 - ▶ Diploma of Master’s level (or higher)
 - ▶ Payment
 - ▶ ADCES (AADE) Members = \$600
 - ▶ Non ADCES Members = \$900
 - ▶ Recertification \$500 / \$800 + 1000 practice hours + professional development



Test Site or Live Online Proctoring (LOP)

Testing Modalities

The examination is computer-based and offered only through Measure Learning’s approved in-person proctored testing centers across the United States and internationally or via their live remote proctoring (LRP) program. For a list of testing sites around the world, go to <https://www.measurelearning.com/candidate-services>.

Candidates may choose to take the exam by either testing at a Measure Testing 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.

It is recommended that candidates schedule their testing appointment as soon as possible as appointment times are available on a first come, first-served basis.

Candidates will receive a notice to schedule email that includes information about rescheduling, cancelling and/or transferring test windows from Measure Learning.

For online testing, face must be visible during the entire test = no breaks.



Exam Details 2025

- ▶ 175 questions - 25 are pretest questions and are **not** counted in the determination of individual examination scores.
- ▶ Candidates score is based solely on the 150 scored questions
- ▶ Testing time is 3.5 hours.
- ▶ Minimum passing standard on the BC-ADM® examination is set using a method called the Modified Angoff technique.
- ▶ A diverse panel of professionals who possess the BC-ADM certification are involved in the process of setting the passing standard.
- ▶ CBDCE does not offer the option of having BC-ADM® exams rescored or to appeal the pass/fail result

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Diabetes Education Services

BC-ADM Exam Details



Steps to Becoming a BC-ADM



What are the steps to become Board Certified in Advanced Diabetes Management (BC-ADM)?

Step 1. Review the qualifications to achieve your BC-ADM

- Visit the [ADCES BC-ADM Certification](#) page to review eligibility and to schedule your exam.
- Download the [BC-ADM Handbook](#) for complete information about eligibility. This handbook published by the ADCES (formerly AADE) provides the complete and official listing of all of the requirements for the BC-ADM. Instructions on how to apply, study resources, and the application are also included.
- Download the [Practice Hours Spreadsheet](#) to easily track your practice hours.

Practice Hours Spreadsheet Tracker

DiabetesEd > FREE > BC-ADM Page

Results will be mailed within 6 weeks after the CLOSE of the testing window

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Can retake test for fee 2xs in yr for a discounted rate of \$340 or \$220, for ADCES members.



BC-ADM Exam Content - 2025

Of the 175 questions, 150 are scored questions and 25 are pre-test questions. Inclusion of these pre-test 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. A candidate's score, however, is based solely on the 150 scored questions.

Areas that are included on the examination as well as the percentage and number of questions in each of the major categories of the scored portion of the examination are shown in the chart below.

Category	Domains of Practice	Percent	No. of Questions
I	Assessment and Diagnosis	30%	45
II	Planning and Intervention	33%	50
III	Evaluation and Follow-up	23%	34
IV	Population Health, Advocacy, and Professional Development	14%	21

I - Assessment & Diagnosis – 45 questions
 Subdomains listed below



1. Therapeutic interviews – 4
2. Comprehensive assessment of PWD – 5
3. Physiology and pathophysiology relating to prediabetes, diabetes and comorbidities – 5
4. Self-care behavior, mental health assessment - 4
5. **Social determinants of health - 4**
6. Standards of diabetes care – ADA /AACE – 5
7. Analysis of complex data sets – 5
8. Synthesis of information from test/assess – 5
9. Perform Screening and diagnostic criteria – 4
10. Formulate and prioritize problem list – 4

Helpful FREE Webinars

Behavior Change Theories Made Easy
 For all health care professionals who are coaching individuals to support healthier self-management or taking the Diabetes Certification Exams.
 Discover Advanced Specialty Topics
 More info. at www.DiabetesEd.net

What We Say Matters
 Language that Respects the Individual & Imparts Hope
 FREE Webinar (No CEs) or Earn 0.5 CE for \$19
 More info. at www.DiabetesEd.net

II. Planning and Intervention - 50



1. Standards of Care re: intervention – 4
2. Incorp behavior change models - 4
3. Medical Nut Therapy Knowledge – 4
4. Pharmacologic therapy – 5
5. Surgical Options for DM Management – 3
6. Technology Options (Pump, CGM, etc) – 4
7. Individualization/ Priority of Care – 4
8. Collaboration, Referral and Coordination – 4
9. Establish self-care goal, improve outcomes – 4
10. **Refer to mental health for psychosocial – 4**
11. **Interventions for special pops – 4**
12. **Manage diabetes in hospital/transitions – 4**
13. **Engage in telehealth services (CMS) - 3**

III. Evaluation and Follow-Up - 34

1. Standards of Care ADCES, ADA, AACE, ACOG, Endocrine Society – 9
2. Use technology devices to collect, analyze and inform judgements - 7
3. Review treatments and outcomes, explain results – 9
4. Evaluate and adjust treatment plan accordingly - 9



IV. Population Health, Advocacy, Professional Development - 20



1. Regulatory, accreditation/recognition disease management, reimbursement and standards (JACHO, HEDIS, ERP, DEAP, CMS, OSHA, CLIA, HIPPA)- 3
2. Program development and CQI – 2
3. Community needs - 2
4. Public health initiatives – 2
5. Engage in scholarly activities -2
6. Incorporate tech to individualize care - 4
7. Advocate for person first language – 3
8. Display leadership qualities -3

Stretch Break – Half Way There



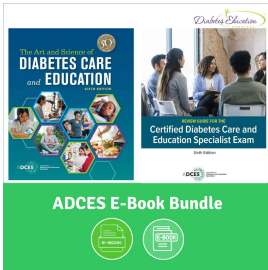
Your questions

- ▶ What standards are used? ADA, AACE and from which year?
- ▶ What are the most important study tools?
 - ▶ ADA and AACE Stds / Clinical Guidelines
 - ▶ ADCES Review Guide
 - ▶ BP/Lipid Med Cheat Sheets
 - ▶ Desk Reference
 - ▶ DiabetesEd Virtual Conference
- ▶ What is best source of info on newer diabetes medications?
 - ▶ Meds/Insulin PocketCards



NEW Accordion 2-sided PocketCards

Resources – DiabetesEd.net



- ▶ [Links to Summary Pages](#)
 - ▶ Medications for Lipid Management
 - ▶ Medications for Hypertension
 - ▶ Management of Neuropathy
- ▶ Diabetes Medication PocketCards
- ▶ Online Courses

BC-ADM Resource Page

What are the steps to become Board Certified in Advanced Diabetes Management (BC-ADM)?

Step 1. Review the qualifications to achieve your BC-ADM

- Download the [BC-ADM Handbook](#) for complete information about eligibility. This handbook published by the ADCES provides the complete and official listing of all of the requirements for the BC-ADM. Instructions on how to apply, study resources, and the application are also included.
- The exam includes the following four exam domains. These self-assessment pages will help you identify knowledge gaps and reaffirm content you are familiar with.
 - Domain 1: Assessment and Diagnosis
 - Domain 2: Planning and Intervention
 - Domain 3: Evaluation and Follow-Up
 - Domain 4: Leadership and Advanced Professional Practice

- Download the [Practice Hours Spreadsheet](#) to easily track your practice hours.

Practice Hours Spreadsheet Tracker

Steps to become Board Certified in Advanced Diabetes Management

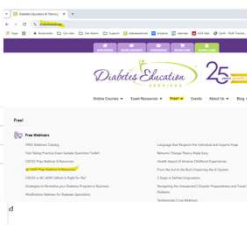
Step 1. Review the qualifications to achieve your BC-ADM

Step 2. Review the qualifications to achieve your BC-ADM

Step 3. Steps to Succeed and Pass the BC-ADM Exam page

- Attend our [Live or Virtual DiabetesEd® Specialist Course](#). This course will provide you with critical information and clinical pearls for your practice.
- Enroll in our [Online University courses](#). If you can't attend our live seminars, we invite you to enroll in our [BC-ADM Prep Bundle](#) or our [Dual Certification Bundle](#) benefiting from our extensive library of on-demand diabetes presentations, and more. You'll be ahead on live seminars. These online courses are an excellent review and reinforce key points.
- Visit [ADCES.org](#) to learn BC-ADM. Contribute and to schedule your exam.

[Click here to 10 Steps to Succeed page](#)



www.DiabetesEd.net > FREE >
BC-ADM

BC-ADM Resources on DiabetesEd.net

Articles to Read to Prepare for BC-ADM Exam

Articles to Read to Prepare for BC-ADM Exam

ADA Standards of Care 2025 – 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 2025 – The 2025 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.

Pharmacologic Approaches to Glycemic Treatment in 2025. This ADA/EASD hyperglycemia road map details strategies to improve glucose management for both Type 1 and Type 2 Diabetes. Section 9 of Standards of Care, 2025.

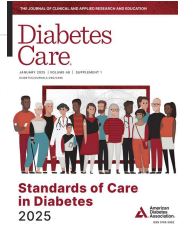
Screening and Diagnosis of Diabetes Mellitus 2025 – One-page cheat sheet that summarizes screening, risk, status, and diagnostic criteria for diabetes. Great for your office and as a study tool.

Med Cheat Sheets | Cholesterol and Hypertension Medications 2025 – 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.

An Introduction to Medical Statistics for Health Care Professionals – This classic chapter, recommended by the ADCEES to review for BC-ADM, provides a review of helpful statistical terms and concepts.

American Association of Clinical Endocrinology Consensus Statement: Comprehensive Type 2 Diabetes Management Algorithm – 2023 Update – This and provides the complete executive and table set summary by an American Association of Clinical Endocrinologists/American College of Endocrinology Consensus Panel on Type 2 Diabetes Mellitus. If you are taking the CDCEES or BC-ADM exam, we encourage students to be familiar with the slide content that reviews diabetes management.

2022 National Standards for Diabetes Self-Management Education and Support – A joint position statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. An important document to review for those providing Diabetes Self-Management Education or those considering taking the certification exam.



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BC-ADM

ADA 2025 Goals

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

Getting Ready for Exam

Filling gaps in Foundational Knowledge

- ▶ Resources for exam prep for the CDCEES exam typically provide foundational information, e.g. national standards, medication use and teaching skills.
- ▶ While they are not the focus of the BC-ADM® exam, foundational knowledge is helpful for meeting some of the content listed in the exam content outline.

Filling gaps in advanced management knowledge

- ▶ Knowing the American Diabetes Association's Standards of Care in Diabetes and other guidelines for management of diabetes and other comorbidities is critical.
- ▶ Regional activities updating primary care providers in diabetes are also good sources for reviewing current practice standards.
- ▶ You can search online to see if any specific continuing education activities are available on topics of interest.



Handbook



Study Tools – Take as many tests as possible Test Taking Tips Free Webinar

Test Taking Practice Exam Toolkit Webinar
20 Sample Practice Questions

The graphic features a woman sitting at a desk with a laptop, a clock showing 11:30 AM PST, and the text: 'Test Taking Practice Exam Toolkit Webinar with 200+ Practice Test Questions. Whether you are taking the CDCES or BC-ADM exam, this Test Taking Toolkit will help set you on the path to success. FREE Webinar (20 Sample Questions) or Webinar + 200+ Practice Questions for \$49 www.DiabetesEd.net'. It also includes a photo of the speaker, Candi Kewey, and her credentials: 'Speaker: Candi Kewey, DNP, BC-ADM, CDCES'.

DiabetesEd.net>FREE > Test Taking

Test Taking Tips

- ▶ Try not overanalyze or “read into” a question. Questions are not written to be tricky.
- ▶ Avoid adding in additional information beyond what is given in the test question. All information necessary to answer the question will be given in the text of the question or scenario.
- ▶ Remember that this is an international test. The questions will be based upon an accepted knowledge base. Choose options that you know to be correct in any setting.
- ▶ When guessing, use the process of elimination. Treat each option as a true or false statement and eliminate those that you would not select.
- ▶ Pay close attention to key words such as “best,” “most,” “primary,” or “usually.” These words indicate that other options may at times be correct but given the wording or situation in the test question, you must judge which option is the best.
- ▶ Skip difficult questions and come back to them later. Questions on the test are not ordered by difficulty (i.e., they do not go from easiest to hardest).
- ▶ Also, content areas (the domains) and topics are addressed randomly in questions throughout the *Handbook*



Managing Test Anxiety

- ▶ Measures to reduce your stress during the examination.
- ▶ Deep-breathing techniques and be sure to stretch your muscles periodically to reduce both physical and mental stress.
- ▶ If necessary, take a few minutes to imagine a calm, pleasant scene, and repeat positive phrases.
- ▶ Eat well, avoid too much alcohol, and maintain a regular sleep pattern for several days before the examination to help you to be physically prepared.
- ▶ Also, on the day before you take the test, collect all the supplies you will need and choose comfortable clothing.

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Suggested Study Steps



1. Do a self-evaluation of current knowledge and skills in advanced diabetes management to identify any gaps.



2. Determine how to best fill those gaps in knowledge.

- ▶ The BC-ADM® exam measures both
- ▶ foundational knowledge such as interviewing and teaching techniques, but the major focus is on
- ▶ clinical management: physical assessment, pharmacology, complications, and comorbidities.

Handbook



220 Test Questions – Assess your Knowledge



Test Taking Practice Exam Toolkit Webinar
20 Sample Practice Questions

You are invited to join Coach Beverly for this FREE Webinar. And, if you want to have access to an additional 220+ sample practice online questions, you can purchase the complete Test Taking Toolkit.

For many of us, taking the certification exam is a nerve-racking process.

During this webinar, Coach Beverly will help you transform your nervousness into focused energy that will help you succeed. She will provide test-taking tips based on her experience taking the certification exam six times.



Watch Recorded Webinar for FREE

Purchase Now for Access to 220+ Practice Questions | \$49

Sample Question -1

- ▶ A healthy adolescent with 2 year history of type 1 DM returns for a quarterly appt. For the past month, they have experienced abdominal pain and diarrhea after some high carb meals. An advanced diabetes manager's first intervention is to order a:

- A. Transglutaminase Autoantibody Test
- B. 72-hour fecal fat collection
- C. Colonoscopy
- D. Stool Sample



Diabetes Education Services

Poll Question 2

▶ MS is having trouble sleeping and complains of waking up with frequent nightmares. Insulin dose includes 5-8 units of Novolog at breakfast and dinner and 12 units of NPH bedtime. Complains that before bed blood sugar is often greater than 300, so takes extra insulin before going to bed to bring it down. What is your best response?

- a. Instruct MS to decrease the NPH insulin by 2 units to prevent nocturnal hypoglycemia.
- b. Contact provider and request to discontinue NPH and start Lantus instead.
- c. Assess if MS is having a snack before checking bedtime blood glucose level.
- d. Instruct how to safely adjust dinner time Novolog to prevent hyperglycemia at bedtime.



Poll Question 3

The rates of gestational diabetes (GDM) are increasing in the United States. Which of the following is true?

- A. Children born to people with GDM have lower rates of type 1 diabetes.
- B. Risk of GDM can be decreased by getting to healthy weight pre-pregnancy
- C. GDM is defined as elevated blood glucose levels discovered anytime during pregnancy
- D. People with GDM can control glucose through diet changes only



Poll Question 4

▶ Hyperglycemia during hospitalization is associated with poor outcomes due to

- a. Abnormal co-regulation of nitric oxide
- b. Increased free fatty acids, ketones and lactate
- c. Ketone production associated with alkalosis
- d. Increased insulin resistance and insulin secretion and decreased counterregulatory hormones.



5. JR, 40-year-old has a 10-year history of diabetes

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

The advanced diabetes manager recommends:

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



Sample Question 6

ML takes 16 units glulisine before breakfast and lunch. Takes 16-20 units before dinner depending on BG levels. ML also takes 42 units of glargine at hs. How many vials of glulisine does ML need a month?

- 1.5 vials
- 2 vials
- 2.8 vials
- 3 vials



Sample question 7

- ▶ A 54-yr-old, BMI 32 with type 2 diabetes, A1c 8.3%, history of HTN with a UACR of 38mg/g and GFR of 49. Meds include Glipizide, Metformin and levothyroxine. Given his risk status, which 3 classes of meds should they be taking according to ADA Standards?
 - Insulin, aspirin and ACE Inhibitor.
 - TZD, ARB and bolus insulin.
 - Beta blocker, stop metformin and add statin.
 - ARB, statin, SGLT-2 Inhibitor



CDCES® Coach App – Download Success

The screenshot shows the CDCES Coach App website. At the top, there is a navigation menu with links for HOME, THE APP, HOW IT WORKS, ABOUT US, REVIEWS, and CONTACT. Below the navigation, a quote reads: "It's like having a coach in your pocket!". The main heading is "CDCES Coach App". There are two buttons: "Download on the App Store" and "Download on Google Play". To the right is a large QR code. Below the QR code, text says "Direct camera to QR code to get to CDCES app page". On the left side, there are links for "Standards of Care", "Meds PocketCards", "Question of the Week", and "Online Course Viewing".

Sample question 8

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

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



Diabetes Education SERVICES

Sample question 9

RS observes Ramadan and fasts from sunrise to sunset. RS is 13 years old, has type 1 diabetes, uses an insulin pump and CGM. RS's insulin-to-carb ratio is 1:12 and correction is 1:45. Basal settings range from 0.5 -1.2 units an hour. What would be the best recommendation for RS to keep blood sugars in target range during Ramadan?

- a. See if RS can get a note from their doctor to allow eating during the day
- b. Decrease basal insulin rate by 50% during periods of fasting
- c. Take bolus insulin when RS eats a meal or snack
- d. Monitor urine ketones at least twice a day

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Level 1 – Diabetes Fundamentals Ready for Viewing

Class 1: Getting to the Nitty Gritty | 1.5 CEs
 Class 2: Nutrition & Exercise 1.5 | CEs
 Class 3: Meds Overview for Type 2 | 1.5 CEs
 Class 4: Insulin Therapy & Pattern Management | 1.75 CEs
 Class 5: Goals of Care | 1.5 CEs
 Class 6: Hypoglycemia, Sick Days, & Monitoring | 1.5 CEs



Diabetes Fundamentals Level **1**

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Level 2 | Standards of Care Intensive | 20 CEs

- Class 1 | ADA Standards of Care | 2.0 CEs | **Recorded and Ready for Viewing**
- Class 2 | Assessing & Promoting Well-Being: From Populations to Person-Centered Approach | 1.5 CEs
- Class 3 | Cardiovascular Disease & Diabetes Standards | 1.5 CEs
- Class 4 | Critical Assessment of Diabetes Patient Standards | 2.0 CEs
- Class 5 | Hospital & Hyperglycemia Standards | 1.5 CEs
- Class 6 | Hyperglycemic Crises, DKA & HHS Standards | 1.0 CE
- Class 7 | Lower Extremity Assessment Standards | 1.5 CEs
- Class 8 | Meds Management for Type 2 Standards | 1.5 CEs | **Dec 17, 24**
- Class 9 | Microvascular Complications, Eye, Kidney Nerve Disease Standards
- Class 10 | Older Adults & Diabetes Standards | 1.5 CEs
- Class 11 | Pregnancy & Diabetes Standards | 1.5 CEs
- Class 10 | Tots to Teens - Diabetes Standards | 1.5 CEs



Standards of Care Intensive Level **2**

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Level 3 | Diabetes Mastery & Certification Readiness | 12+ Units Feb 6 – March 5, 2025

- Class 1 | Diabetes - Not Just Hyperglycemia | 1.75 CEs
- Class 2 | Standards of Care & Cardiovascular Goals | 1.5 CEs
- Class 3 | Insulin Therapy - From Basal/Bolus to Pattern Mgmt | 1.5 CEs
- Class 4 | Insulin Intensive, Monitoring, Sick Days, Lower Ext | 2.0 CEs
- Class 5 | Meds for Type 2 - What you need to know | 1.5 CEs
- Class 6 | Exercise & Medical Nutrition Therapy | 1.0 CE
- Class 7 | Screening, Prevention, & Treatment of Microvascular Complications | 1.5 CEs
- Class 8 | Coping & Behavior Change| 1.5 CEs
- Class 9 | Test-Taking Coach Session (48 Questions) | No CEs |



Diabetes Mastery & Cert Readiness Level **3**

Level 4 | Advanced Level & Specialty Topics | 20 CE

- Class 1: Type 2 Diabetes Intensive | 2.25 CEs
- Class 2: Cancer & Diabetes | 1.5 CEs -
- Class 3: 3 Steps to DeFeet Amputation; Assess, Screen, & Report | 1.25 CEs
- Class 4: Insulin Calculation Workshop | From Pumps & Beyond | 2.0 CEs -
- Class 5: Solving Glucose Mysteries for Type 1 | 2.0 CEs
- Class 6: Solving Glucose Mysteries for Type 2 | 1.75 CEs
- Class 7: Basal Bolus Therapy in Hospital | 1.75 CEs
- Class 8: From the Gut to the Butt – Exploring the GI System | 1.5 CEs
- Class 9: The Impact of Adverse Childhood Experiences on Health | 1.0 CE
- Class 10: Strategies to Revitalize Your Diabetes Program or Business | 1.5 CEs
- Class 11: What We Say Matters: Language that Respects the Individual and Imparts Hope | 0.75 CEs
- Class 12: Behavior Change Theories Made Easy | 1.0 CE
- Class 13: NON-CPEU Mindfulness & Compassion in the Diabetes Encounter Webinar | No CE



Online Bundles & DiabetesEd Virtual Conference

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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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