




## Preparing for CDE Exam

Handouts – [DiabetesEd.Net >> Resources >> Live Webcasts >> Prep for CDE](#)

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President, Diabetes Education Services




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## Preparing For the CDE Exam

- Eligibility requirements
- Test Updates
- Get ready for success






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## Topics

- ▶ Eligibility requirements
- ▶ Definition of a Diabetes Educator
- ▶ Exam content
- ▶ Study strategies
- ▶ Test taking tips
- ▶ [Resources](#)






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## Some Notes of Clarification

- ▶ Diabetes Ed Services has no relationship with National Credentialing Board of Diabetes Educators (NCBDE).
- ▶ For more info visit [www.ncbde.org](http://www.ncbde.org)

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## Why Take the CDE Exam®



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



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## What is a CDE®?

- ▶ A health care professional with comprehensive knowledge and experience in diabetes management, pre-diabetes, and diabetes prevention.
- ▶ Educates and supports people w/ diabetes to understand and manage the condition.
- ▶ Promotes self-management to achieve individualized behavioral and treatment goals that optimize health outcomes.



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## Professional Qualifications to take CDE - excerpted from NCBDE

- ▶ RN, clinical psychologist, OT, optometrist, pharmacist, PT, (M.D. or D.O.), or podiatrist w/ current license from U.S. or its territories.
- ▶ RD w/ CDR registration, PA w/ active registration with NCCPA, or exercise physiologist w/ active certification and Registered CEP® (master's degree).
- ▶ HCP w/ at least a master's degree in social work from accredited U.S. College



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## 2015 - Professional Practice Experience – Must meet all

- ▶ A minimum of two years (to the day) of professional practice experience in the discipline under which one is applying for certification
- AND
- ▶ Minimum of 1,000 hours of professional practice experience within the past 4 years in diabetes self-management education with a minimum of 40% (400 hours = about 8 hrs a week) accrued in the most recent year preceding application.
- AND
- ▶ Minimum of 15 clock hours of continuing diabetes education within 2 years prior to applying for certification.



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## From NCBDE Handbook

Yes No

☐ ☐

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

OR

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

OR

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

☐ ☐

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

☐ ☐

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

☐ ☐

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

☐ ☐

5. Have you accrued 1,000 hours of practice experience in diabetes self-management education (DSME) within the last 4 years?

☐ ☐

6. Has a minimum of 40% (or 400 hours) of the 1,000 hours of DSME practice experience been accrued within the past year?

☐ ☐

7. Have you completed a minimum of 15 hours of continuing education activities\*\* applicable to diabetes within the past 2 years?

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



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## New- Health Educators



- ▶ Individuals holding the Master Certified Health Education Specialist (MCHES) credential,
- ▶ Plus meet all of the NCBDE eligibility requirements
- ▶ See [www.ncbde.org](http://www.ncbde.org) for info.



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## New- Unique Qualifications Pathway –

- ▶ Designed for health professionals holding an advanced degree in a health related area/concentration
- ▶ This pathway has different eligibility requirements and involves a “pre-application” process plus 2000 hrs DSME.
- ▶ For more: [info@ncbde.org](mailto:info@ncbde.org) or call 877 -239- 3233



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## 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



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### Practice hours through Volunteering

- ▶ 1000 of the needed professional practice hours can be gained through providing DSME as a volunteer
- ▶ Supervisor must attest that DSME provided meets criteria



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### On the Other Hand



- ▶ These are some activities that don't count toward practice hours.



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### Professional practice experiences NOT considered diabetes education



- ▶ Demonstration of a skill that does not include some or all of the components of the DSME Process
- ▶ supervising and managing other professionals
- ▶ Providing medical assessment, diagnosis or treatment
- ▶ Conducting/ participating in research activities in which the individual is not involved in DSME
- ▶ Dispensing/ prescribing meds, unless part of DSME process



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### Not Considered diabetes education experience cont'd

- ▶ Promoting or selling medications, diabetes supplies or products
- ▶ Providing continuing education to professionals
- ▶ Membership and committee work in professional organizations
- ▶ Having diabetes or caring for family member w/diabetes
- ▶ Diabetes-related volunteer activities that do not include some or all of the components of the DSME Process



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### Definition of Diabetes Self- Management Education (DSME)

- Health professionals who have appropriate credentials and experience
- It involves person with prediabetes or diabetes, caregivers and educator
- Defined as ongoing process of facilitating the knowledge, skill, and ability necessary for self-care.



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### Definition of DSME (cont'd)

- ▶ Is a component of a comprehensive plan of diabetes care.
- ▶ Incorporates needs, goals and life experiences and is guided by evidence-based standards.
- ▶ Goal is to support
  - ▶ informed decision-making,
  - ▶ self-care behaviors,
  - ▶ problem-solving and
  - ▶ active collaboration with health care team to improve clinical outcomes, health status, and quality of life.



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## DSME Defined for Practice Experience

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



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## What's included in DSME?

1. Assessment and education plan developed by individual and educator(s) to direct
  - ▶ appropriate educational interventions and
  - ▶ self-management support strategies.
2. Educational interventions to help individual
  - ▶ achieve self-management goals.
3. Periodic evaluations to determine if goals met
4. Personalized follow-up plan
5. Documentation
6. Program development and admin provided in support of the diabetes patient education.



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## Applying to take the CDE Exam<sup>®</sup>

At the time of your online application you will receive:

- ▶ On-line notification of either approval
  - ▶ Or that you have been selected for audit
- ▶ If you are submitting a paper application, call AMP if it has been more than 4 weeks since application was mailed and you have not received notice of receipt or audit. Call the AMP at (913) 895-4600



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## What is included in audit if requested?

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



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## Test Now Computerized

- ▶ Window to apply for Spring testing
  - ▶ Jan 15 – March 15: -Take test in June
- ▶ Window to apply for Fall testing
  - ▶ July 15- Sept 15: Take test in December
- ▶ Once you receive confirmation of eligibility
  - ▶ schedule an appointment to take the examination on a first-come, first-served basis through Castle's online scheduling system



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## When will I get my results?

- ▶ You will receive your test results the same day
- ▶ You can retake the test as many times as needed
- ▶ Cost –
  - ▶ 1<sup>st</sup> time \$350
  - ▶ Renewal - \$250



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## 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



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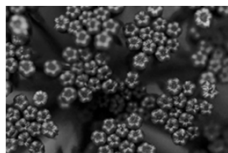
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## CDE Exam<sup>®</sup> Pass rates over time

- ▶ 2006 - 80%
- ▶ 2007 - 81%
- ▶ 2008 - 80%
- ▶ 2009 - 69 % (test changed based on work study analysis and computerized)
- ▶ 2010 - 69%
- ▶ 2011 - 65%
- ▶ 2012 - 63.5%
- ▶ 2013 - 67 and 69%



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## Overview of CDE Exam



- ▶ Composed of 200 multiple-choice, objective questions with a total testing time of four (4) hours.
- ▶ Based on job analysis completed in 2013, which surveyed diabetes educators about the tasks they performed.



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## Exam Details

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



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## Exam Content

- ▶ Assessment (60)
  - ▶ Learning/Self-Care Behaviors (20)
  - ▶ Medical, Psycho-Socioeconomic and Health Status (20)
  - ▶ Current Knowledge and Self-Management Skills (20)



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## Exam Content

- ▶ Intervention (89)
  - ▶ Collaboration with Patient, Family, Caregiver, and Healthcare Team (16)
  - ▶ Teach/Counsel Regarding Principles of Diabetes Care (50)
  - ▶ Evaluate, Revise and Document (17)
  - ▶ Follow-up and Referral Recommendations (6)



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## Exam Content

- ▶ Education and Program Standards (26)
  - ▶ National Standards for Diabetes Self Management Education (8)
  - ▶ Clinical Practice (16)
    - ▶ Inpt and Outpt Standards for ADA, AACE
  - ▶ Promote Diabetes Advocacy (2)



- ▶ For detailed outline look in Testing Handbook



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## Hope you don't mind a post directly from NCBDE posted on Linked In 2015

- ▶ Exam questions are created using any number of resources/references and each question has to be tied directly to a task on the exam content outline.
- ▶ A helpful idea- think outside your area of practice or population when reviewing the exam content outline
  - ▶ work with an adult population - think about pediatrics or gestational –
  - ▶ or mainly Type 1 population - think about Type 2 population.
- ▶ Then look for resources (whether say c.e. activities or hard copy/online resources) that will help you address those areas of weakness.
- ▶ The Exam handbook has information about preparing for the exam, including the exam content outline.
- ▶ Info on preparing for the exam can be found on pg 14; Appendices III-V include the exam content outline, sample questions, and list of potential references (starting on pg 22). Hope that helps and best of luck!



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## What to Study?

### Articles to Review

ADA- Standards of Care PDF- This yearly publication by the American Diabetes Association outlines the goals of care for diabetes management. Since it is evidenced based, it includes a useful summary of the trials and research that the goals are based on. A must read if you are entering the diabetes field or preparing to take the CDE® or BC-ADM Exam.

ADA Standards of Care- Summary of revisions- A summary of key points and updates in the yearly publication by the American Diabetes Association.

AACE Comprehensive Diabetes Management Algorithm 2013. A slide set summary of the ACE/AACE Statement by an American Association of Clinical Endocrinologists/American College of Endocrinology Consensus Panel on Type 2 Diabetes Mellitus. Encourage all those planning to take CDE exam to review this info carefully.

The Scope of Practice, Standards of Practice, and Standards of Professional Performance for Diabetes Educators (2011). Chicago, IL: American Association of Diabetes Educators – a must read for anyone entering the field of diabetes or as a reference for those already in the field.

See CDE Examination Content Outline starting on page 22 of the NCBDE Handbook

Screening and Diagnosis of Diabetes Mellitus 2015 - At a glance summary sheet of the risk factors and diagnostic criteria for diabetes.

Management of Hyperglycemia in Type 2 Diabetes - 2015 Update - A Patient Centered Approach - This hyperglycemia roadmap was developed in collaboration by the American Diabetes Association and the European Association for the Study of Diabetes. See website



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2015 Review Guide:

Includes 400 questions

- ▶ 2 practice exams, New questions
- ▶ Test taking tips
- ▶ Self-Assessment



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- ▶ Our Level 3 Boot Camp CDE is the third step on **your path** to becoming a Certified Diabetes Educator. We designed it to help you pass the CDE Exam. Starts Sept 10, 2015

The results are in! CDE Boot Campers passed the exam! Read Reviews>>



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## Taking the Test

- ▶ Questions
- ▶ Answers
- ▶ Pitfalls



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## Reading too Fast Pitfalls

- ▶ Choosing a “good” answer, but not the right one for the stem
  - ▶ key intent of question
- ▶ Failing to read an important words (always, never, most, probably, usually)
- ▶ Choosing an answer you did not understand because the others seem too easy



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## Empowerment Errors

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



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## 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.



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## 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



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## 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



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## 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



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## Three Types of Questions

- Recall – facts, principles, procedures
- Application – ie – application of knowledge that varies based on pt characteristics
- Analysis – integration or synthesis of a variety of concepts or elements (ie evaluating complex problems with many variables).



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## 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



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application

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## 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 1<sup>st</sup> trimester hyperglycemia?

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



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## Vignette Style Question

► Read the following vignette to answer the next 3 questions.

► A 47 yr old man with newly diagnosed type 2 diabetes. Additional known information.

- Married, with 2 teenagers
- Professor, obese
- Started on Metformin 500mg BID
- Father died of kidney failure secondary to diabetes



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## Vignette Style Question 1

► Given what you know about this patient, what emotions would you expect him to express?

- A. Fear of hypoglycemia
- B. Reluctance to start on insulin
- C. Panic disorder
- D. Fear of complications

► analysis



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## Vignette Style Question 2

► What is most likely to be a potential barrier to lifestyle change?

- A. Difficulty exercising due to obesity
- B. Excessive alcohol intake
- C. Teenage children
- D. Long work hours



► analysis



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## Vignette Style Question 3

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

- A. 1,200 calorie exchange plan
- B. Avoid all concentrated sweets
- C. Eat 3 meals a day with snacks in between
- D. Healthy eating based on the "My Plate" method

► application



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## Sample Question 3

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.

recall



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## Sample question 4

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

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

analysis



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## Study Habits

- ▶ Find your best time of day to study
- ▶ Determine your learning style
  - ▶ Auditory – discussion, study groups, tapes
  - ▶ Visual – books, handouts, notes, videos
  - ▶ Kinesthetic – workshops, demonstration
- ▶ Set up a study space
- ▶ Set up a study plan
  - ▶ Schedule your time
  - ▶ Make an appointment with yourself



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## Study Group

- ▶ Set a location, time and schedule
- ▶ Have an agenda
- ▶ Set the rules
  - ▶ Everyone does their share
  - ▶ Everyone commits to attend
- ▶ Can be a great source of moral support and can help decrease test anxiety



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## Study Time

- ▶ Review of what you know: 30 to 40%
- ▶ Learning new materials: 60 to 70 %
- ▶ CDE prep courses, flash cards & sample tests
- ▶ Teach the content to someone else
- ▶ Use down time/waiting time productively



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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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## Combating Test Anxiety

- ▶ Positive thinking and affirmations
- ▶ Use relaxation techniques we teach pts
- ▶ Take practice exam
- ▶ Rest well night before
- ▶ Know how to get to test site
- ▶ Arrive at exam room early
- ▶ Know your stuff – self-study or courses



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- ▶ Test taking tips
- ▶ Self-Assessment



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- ▶ Our Level 3 Boot Camp CDE is the third step on **your path** to becoming a Certified Diabetes Educator. We designed it to help you pass the CDE Exam. Starts Sept 10, 2015

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## CDE Success Page



***I passed the CDE exam! Yippee!***  
*I'm SO glad I took the CDE Boot Camp class online as the exam was even harder than I expected. Thanks for your tips for passing! I will happily recommend your course to anyone planning to take the CDE. — Alana Busekrus, BSN, RN, CDE*

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## You are Going to Do Great!



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