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Self-Assessment Tests

Assessment of the Diabetes Continuum

1. A diabetes educator is consulted to provide discharge education for an 18-year-old woman diagnosed with type 1 diabetes. Upon entering the hospital room, the educator finds the her quietly sobbing. She states that she is sad and anxious about her new diagnosis. Before she leaves for home today, which of the following should the educator review with the patient young woman?
 - A. Signs and symptoms of hypoglycemia and appropriate treatment
 - B. Epidemiology of diabetes and the incidence of depression
 - C. Incidence of birth defects associated with hyperglycemia
 - D. Lifestyle modifications and carbohydrate counting
2. A 22-year-old man with type 1 diabetes comes to the diabetes educator for additional education prior to starting on an insulin pump. During the visit, his cell phone rings, indicating a text message. Later, when trying to schedule a follow-up visit, he lays several other electronic devices on the counter while looking for his tablet device. Which of the following is the best way to tailor future educational interventions with this man?
 - A. Schedule education sessions in the morning to avoid text message interruptions.
 - B. Offer him online education to practice carbohydrate counting.
 - C. Politely ask him to leave his cell phone at home.
 - D. Enroll him in a group education class of people with type 1 diabetes.

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Answer Key

In the answer rationales below, a capital A, B, C, or D within parentheses references answer choices.

Section 2: Self-Assessment Tests

Assessment of the Diabetes Continuum

1. **A.** Initial teaching should focus on survival level skills that the newly diagnosed young woman would need to safely manage her disease upon discharge, i.e., the signs and symptoms as well as the appropriate treatment of hypoglycemia. Information on the epidemiology of diabetes (B), the association between hyperglycemia and defects (C), and carbohydrate counting (D), although important, is not information/skills that are needed immediately.
2. **B.** Diabetes education should be tailored to the young man's preferences with regard to timing, delivery method, and use of technology. This man is very comfortable with technology and is likely very busy based on the number of interruptions during the session. Scheduling education sessions in the morning (A) may be convenient for the educator but not the man. Text messaging and constant contact with friends are considered appropriate for young people, so educators should not expect them to leave their cell phones at home (C). Social networking with peers is important for people with diabetes; however, young people often prefer online networking forums over face-to-face meetings (D).
3. **D.** Many adults who are illiterate are able to successfully hide their literacy deficit. The other three choices (A, B, and C) are all commonly held misconceptions regarding low literacy and are not accurate.