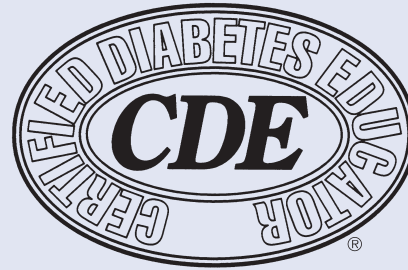




# National Certification Board for Diabetes Educators



## HANDBOOK

# 2010 Renewal of Certification by Continuing Education

<u>Type of Application</u>	<u>Application Deadline</u>	<u>Application Fee</u>
Regular Deadline	September 15	\$250
Extended Deadline	October 15	\$300
Late Deadline	December 15	\$400



# Table of Contents

## General

Important General Information . . . . .	ii
Dates and Fees Overview . . . . .	1
Introduction . . . . .	2
Mission . . . . .	2
Purpose . . . . .	2
Objectives . . . . .	2
Responsibility for Certification . . . . .	2
Definition of Diabetes Education . . . . .	2
Statement of Nondiscrimination Policy . . . . .	3
Disciplinary Policy . . . . .	3

## Renewal

Renewal of Certification . . . . .	4
Eligibility Requirements . . . . .	4
Renewal by Continuing Education . . . . .	4
Renewal Practice Requirement . . . . .	4
Definition of Professional Practice . . . . .	4
What is Included in the Definition . . . . .	4
What is NOT Included in the Definition . . . . .	4
For Those Unable to Meet the Practice Requirement . . . . .	5

## Application Process

General . . . . .	6
Applying for Renewal by Continuing Education . . . . .	6
Fees . . . . .	6
Adherence to Published Policies . . . . .	6
Changes after the Application is Submitted . . . . .	6
Audit Policy . . . . .	6
Rejected Applications . . . . .	7
Appeals . . . . .	7
Withdrawals and Refunds . . . . .	7
Application Status . . . . .	7
Receipt of Application . . . . .	7
Review of Application . . . . .	7
Certificates and Wallet Cards . . . . .	8
Use of Certification Marks . . . . .	8

## Appendices

Appendix I: Guidelines for Reporting Continuing Education Activities . . . . .	9
Appendix II: Examination Content Outline . . . . .	11

## Forms

Application Instructions . . . . .	13
Instructions for Completing Part II of the Application . . . . .	14
Application - Part I: Renewal of Certification as a Diabetes Educator by Continuing Education . . . . .	15
Application - Part II: Summary of Continuing Education Activities Form . . . . .	19



## 2010 Renewal by Continuing Education

### Important General Information

The Certification Program for Diabetes Educators is owned by the National Certification Board for Diabetes Educators (NCBDE). NCBDE is an autonomous specialty board responsible for the development and administration of the certification program for diabetes educators. NCBDE is independent and separate from any other organization or association. The Certified Diabetes Educator® (CDE®) credential is conferred only by NCBDE, a national, nongovernmental, not-for-profit certification organization. Certification is valid for a period of five (5) years. A registry of CDEs is maintained by NCBDE.

This *Renewal of Certification by Continuing Education Handbook* (Handbook) contains information about NCBDE's renewal of certification by continuing education option for CDEs. Individuals who elect to participate in the certification program are responsible for utilizing the most current Handbook and knowing its contents. This publication and application replace all previous editions of the Handbook.

NCBDE updates the information, fees and requirements in this Handbook on a regular basis and makes every effort to present all policies and directions clearly. Questions regarding policies or clarification of information should be directed to the NCBDE national office. NCBDE is not responsible for information that is not understood by the reader or obtained from any source other than NCBDE.

### National Office

National Certification Board for Diabetes Educators  
330 E. Algonquin Road, Suite 4  
Arlington Heights, IL 60005  
(847) 228-9795  
Fax: (847) 228-8469  
Web: [www.ncbde.org](http://www.ncbde.org)  
E-mail: [info@ncbde.org](mailto:info@ncbde.org)

**NCBDE endeavors to process all applications promptly and professionally. Nevertheless, in the event an application is improperly accepted or rejected, or action on it is delayed due to an inadvertent processing error, NCBDE liability to the applicant is limited to a complete refund of the application fee.**



## 2010 Renewal by Continuing Education

### Renewal of Certification by Continuing Education - 2010

Deadline	Continuing Education Activities Accrual Window*	Application Fee	Application Window**	Receipt Notification
<b>Standard Deadline</b>		<b>\$250</b>	<b>July 1, 2010 to September 15, 2010</b>	<p>If more than 5 weeks have passed since the application was mailed and you have <u>not</u> received an e-mail notice of receipt, please contact the NCBDE national office.</p>
<b>First renewal</b>	<b>January 1, 2006 through Date of Application</b>			
<b>Renewed Previously by Continuing Education</b>	<b>September 16, 2005 through Date of Application</b>			
<b>Extended Deadline Option</b>		<b>\$300</b>	<b>September 16, 2010 to October 15, 2010</b>	
<b>First renewal</b>	<b>See above</b>			
<b>Renewed Previously by Continuing Education</b>				
<b>Late Deadline*** Option</b>		<b>\$400</b>	<b>October 16, 2010 to December 15, 2010</b>	
<b>First renewal</b>	<b>See above</b>			
<b>Renewed Previously by Continuing Education</b>				

\*Activities must be completed prior to the date of application, regardless of the closing date of the window.

\*\*Applications will be accepted beginning July 1, 2010 and will be accepted through the last date of each appropriate window. The closing date of each window is a postmark deadline. Applications received with a postmark date after a window has closed will be processed in the next available window. Processing will require payment of any increase in the application fee. NOTE: Applications received with a postmark after December 15, 2010 will not be processed and will be returned.

\*\*\*Late deadline option requires verification of all continuing education activities reported. Applications will need to be submitted with certificates of completion, verifications of attendance issued by a recognized provider on NCBDE's list or other relevant proof of completion or attendance issued by the recognized provider for each continuing education activity submitted. Each document must include the name of the attendee/participant, title of the activity, date(s) the program was attended or completed, the recognized provider(s), and the total number of credits or contact hours awarded.



### Introduction

The purpose of this *Renewal of Certification by Continuing Education Handbook* (Handbook) is to provide information and guidance to individuals who are interested in renewing their Certified Diabetes Educator® (CDE®) credential through continuing education. This renewal option is only available to current CDEs. Any individual who has let their credential lapse will need to apply and pass the Certification Examination for Diabetes Educators (Examination) in order to reinstate their certification. The *Handbook for the 2010 Certification Examination for Diabetes Educators* includes information on the Examination and the required Application to pursue this process. Visit the NCBDE web site for information on obtaining this document.

### Mission

Through the development, maintenance and protection of the certification process and the Certified Diabetes Educator® credential, the National Certification Board for Diabetes Educators (NCBDE) recognizes and advances the specialty practice of diabetes education.

### Purpose

The purpose of the NCBDE certification program is to conduct certification activities in a manner that upholds standards for competent practice in diabetes self-management education. The CDE® credential demonstrates that the certified health care professional possesses distinct and specialized knowledge, thereby promoting quality care for persons with diabetes. Certification is a voluntary process used to assess and validate qualified health care professionals' knowledge in diabetes education. It is an evaluative process that demonstrates that rigorous eligibility requirements have been met. Certification is not required by law for employment in the field, although some agencies may use board certification as a basis for employment, job promotions, salary increases, or other considerations.

### Objectives

Objectives of the certification program are to

- provide a mechanism to demonstrate professional accomplishment and growth
- provide formal recognition of specialty practice and knowledge at a mastery level
- provide validation of demonstrated dedication to diabetes education to consumers and employers
- promote continuing commitment to best practices, current standards and knowledge

### Responsibility for Certification

This certification program is owned by NCBDE and all decisions made by NCBDE with respect to the certification program are final.

### Definition of Diabetes Education

Diabetes education, also referred to as diabetes self-management education or diabetes self-management training is performed by health care professionals who have appropriate credentials and experience consistent with the particular profession's scope of practice. For purposes of this Handbook, diabetes self-management education (DSME) is used.

DSME± involves the person with pre-diabetes or diabetes and/or the caregivers and the educator(s) and is defined as the ongoing process of facilitating the knowledge, skill, and ability necessary for self-care. It is a component of a comprehensive plan of diabetes care. The process incorporates the needs, goals and life experiences of the person with pre-diabetes or diabetes and is guided by evidence-based standards. The overall objectives of DSME are to support informed decision-making, self-care behaviors, problem-solving and active collaboration with the health care team and to improve clinical outcomes, health status, and quality of life. The process includes:

- An individual assessment and education plan developed collaboratively by the individual and educator(s) to direct the selection of appropriate educational interventions and self-management support strategies.
- Educational interventions directed toward helping the individual achieve self-management goals.
- Periodic evaluations to determine attainment of educational objectives or need for additional interventions and future reassessments.
- A personalized follow-up plan developed collaboratively by the individual and educator(s) for ongoing self-management support.
- Documentation in the education record of the assessment and education plan and the intervention and outcomes.

±Adapted from *National Standards for Diabetes Self-Management Education*, American Diabetes Association Clinical Practice Recommendations. Diabetes Care, Vol. 32, Supplement 1, January, 2009.



### **Statement of Nondiscrimination Policy**

NCBDE does not discriminate among applicants on the basis of age, gender, race, religion, national origin, disability, or marital status. All applications submitted for certification are individually reviewed on the basis of information submitted.

### **Disciplinary Policy**

NCBDE may deny, revoke, or otherwise act on any application for certification or on any CDE credential when an individual is not in compliance with NCBDE requirements. NCBDE has the right to suspend, withhold, revoke, censure, or take other appropriate action with regard to certification status for validated cause and to make such actions public. Certification may be withheld, denied or revoked, or applications rejected for reasons including, but not limited to, the following:

1. Falsification of application information
2. Noncompliance with review and audit procedures
3. Revocation or suspension of current license or other credential, or other disciplinary action by a licensing or regulatory board or registration commission/agency
4. Validated unethical practice of diabetes education
5. Giving or receiving assistance during the Examination
6. Removing or attempting to remove Examination information or materials from the test center
7. Representing oneself falsely as a Certified Diabetes Educator
8. Obtaining or attempting to obtain certification, whether initial or renewal, by fraud or deception
9. Unauthorized possession and/or distribution of any official NCBDE testing or Examination materials
10. Ineligibility for certification, as determined by NCBDE
11. Misrepresentation or fraud in any statement on the certification Application made to assist individual to apply for, obtain, or renew certification.



### Renewal of Certification

Renewal of certification must be completed during the calendar year in which an individual's CDE credential expires and may be done either by continuing education or by taking the Examination. Certification renewal demonstrates that professionals previously certified have maintained a level of contemporary knowledge in diabetes education. NCBDE requires all CDEs to recertify every five (5) years to maintain certification status. It is the responsibility of each CDE to stay abreast of changes in certification and/or renewal requirements and to recertify in a timely manner. Valid dates of the credential should be monitored and application for renewal submitted by published deadlines. Extensions of certification are not granted.

### Eligibility Requirements for Renewal of Certification by Continuing Education

For CDEs whose credentials will expire 12/31/2010:

1. Individuals must continue to hold the license or registration for the same discipline held at the time of initial certification. This license or registration must be current, active, and unrestricted at the time of renewal.
2. A minimum of 1,000 hours of professional practice experience during the five-year certification cycle.  
NOTE: Refer to the Renewal Practice Requirement section, page 4, for additional information on the practice requirement.
3. Application Fee(s) Payment

### Renewal by Continuing Education

Renewal of certification by continuing education requires that CDEs complete 75 clock hours of continuing education in content areas applicable to diabetes during the certification cycle. For 2010, continuing education activities completed between January 1, 2006 for CDEs renewing for the first time - or September 16, 2005 for CDEs who have renewed previously - and the appropriate application window deadline date may be counted, provided they are completed at the time of application and the application is postmarked by the published application window deadline date.

### Renewal Practice Requirement

For CDEs renewing in 2010, it will be necessary to attest (and document upon audit) that a minimum of 1,000 hours of professional practice experience was accrued between January 1, 2006 through the date of application. The professional practice requirement for renewal of certification, however, is NOT the same as that required for initial certification. NCBDE recognizes that diabetes education is an evolving specialty and that experienced CDEs often assume roles other than the practice of diabetes self-management education required for initial certification.

### Definition of Professional Practice

For purposes of renewal of certification, practice means actively employed for compensation, providing a direct or indirect professional contribution to the care and self-management education of people with diabetes.

For those renewing in 2010, the 1,000 hours of professional practice experience requirement must have:

- Taken place in the United States or its territories.
- Been completed during the five year certification cycle between January 1, 2006 and date of application for renewal in 2010.

NOTE: There is no requirement for how or when this must be accomplished, e.g., to complete 200 hours per year each of the five years, or to be practicing at the time of application.

### What is Included in the Definition

This definition is intended to be as inclusive as possible of positions currently held by CDEs, including program development, program management, public health/ community surveillance, diabetes related research, clinical roles in diabetes industry, case management, professional education, consultant roles to industry or other providers, or others.

### What is NOT Included in the Definition

Employment in the manufacture, direct sales, or distribution of diabetes-related products or services in pharmaceutical or other diabetes-related industries, public health screenings, jobs unrelated to diabetes, and participation in diabetes camp will not meet the practice requirement, nor will preceptorship/mentor or other volunteer hours of any kind.



### For Those Unable to Meet the Practice Requirement

For CDEs who wish to maintain certification status but do not or cannot meet the practice requirement, there is only one renewal option. That method requires successful completion of both the Examination and the accrual of 75 clock hours of acceptable continuing education. During the accrual period that certification is valid, if a CDE has practiced less than the required 1,000 hours, has taken employment unrelated to diabetes care and education, is on leave from employment or has retired, but still wishes to maintain certification as a diabetes educator, the requirements to hold a current, active unrestricted license or registration for the same discipline held at the time of initial certification and to demonstrate knowledge of current standards and practices by passing the Examination and documenting relevant continuing education activities are required. No exceptions will be available. Refer to the *Handbook for the 2010 Certification Examination for Diabetes Educators* for information on how to apply for renewal under this situation.



## General

Renewal by continuing education in 2010 is available only to CDEs whose credentials expire 12/31/2010. Applicants must apply by the published deadline date and submit applicable fee(s).

## Applying for Renewal by Continuing Education

Submit completed current Application\* (Part I and Part II) and pay the applicable fee(s), postmarked by the published application deadline date.

\*Notes: 1) Be sure to review the Continuing Education Guidelines, Appendix I, page 9, on the renewal process before completing the Application; 2) an online application process is not yet available for renewal by continuing education. All applications must be submitted on paper; and 3) if an individual applies using the late deadline date, verification of completion of all activities must be included with the application materials.

All applications submitted become the property of NCBDE. Those who apply are advised to retain a copy for personal reference. Under no circumstances are applications, including copies, returned to applicants.

## Renewal of Certification by Continuing Education Fees

### Standard deadline

(application postmarked no later than 9/15/2010) . . . \$250

### Extended deadline

(application postmarked no later than 10/15/2010) . . . \$300

### Late deadline

(application postmarked no later than 12/15/2010) . . . \$400

### Fee payments may be made by credit card (VISA, MasterCard, or American Express), or by check. Do not send cash.

Please allow up to six weeks after the application deadline for the processing of checks. Declined credit cards and/or insufficient fund checks returned to NCBDE are subject to a penalty. Repayment of a declined credit card or payment for an insufficient fund check and the penalty must be made with a cashier's or certified check or money order. Unless and until all fees have been paid in full, application processing will not be completed.

Processing of payment does not confirm renewal by continuing education has been approved. In the event an application for renewal of certification by continuing education is not accepted by NCBDE, a \$100 nonrefundable processing fee and any applicable extended

and penalty fees will be retained and the remainder of the application fee refunded.

## Adherence to Published Policies

Eligibility requirements, application deadlines, and fee payment policies are strictly enforced by NCBDE. Applications must be submitted by the specified deadline dates. Applications submitted after published deadline dates cannot be processed and applications will be returned. Absolutely no exceptions will be made. If requested, applicants must respond with additional information to verify eligibility.

### Applicants who apply for renewal by continuing education are advised to send applications to NCBDE using certified mail or traceable courier services.

NCBDE is not responsible for lost, misdirected, late or undelivered mail. A certified mail, certificate of mailing, or other courier receipt can serve as proof that the application was mailed by the deadline. For mailed applications, deadlines are postmark dates on the mailing envelope when sent by U.S. mail. Private metered postmarks and mail receipts not dated by the U.S. Postal Service are not acceptable as proof of timely mailing.

## Changes after the Application is Submitted

NCBDE must be notified in writing of any change in name or address that occurs after the application has been submitted.

## Audit Policy

NCBDE reserves the right to verify and/or audit at any time any application submitted for certification.

For renewal of certification by continuing education, a random audit process is also in place. CDEs whose applications are selected for audit must submit

- 1) proof of meeting the renewal practice requirement by providing a verification statement from a supervisor or, for self-employment, other qualified health care professional; and
- 2) proof of meeting the continuing education requirements by providing copies of certificates of completion, verifications of attendance issued by a recognized provider on NCBDE's list, or other relevant proof of completion or attendance issued by the recognized provider for each continuing education activity submitted. Each document must include the name of the attendee, title of the activity, date(s) the program was attended or completed, the recognized provider(s), and the total number of credits or contact hours awarded.



### Rejected Applications

1. Applications may be rejected under the following circumstances:
  - A. NCBDE determines that the applicant did not meet eligibility requirements.
  - B. The application is incomplete in any way or improperly completed.
  - C. The application and/or fee are not submitted by the published deadline date.
  - D. The applicant, if selected for audit, does not submit required documentation by the deadline date.

When an application is rejected for any of these reasons, the application fee, minus a \$100 processing fee and any applicable late and penalty fee(s), will be refunded.

2. Applications may be rejected if the payment for the application fee(s) is not honored by the card issuer or bank and is not resubmitted on a timely basis. In addition to payment of application fee, applicant will owe a \$100 processing fee and any applicable late and penalty fee(s).

### Appeals

Appeals are available only to individuals whose applications are rejected because of failure to meet eligibility requirements. The procedure for filing an appeal is sent with the notice of ineligibility. If an individual elects to file an appeal, the expiration date of the individual's CDE credential will be extended until the appeal process has been completed. If an individual chooses not to file an appeal, their credential will lapse at the end of the 30 day period following receipt of the denial notice.

Appeals are not available to individuals whose applications are rejected for any other reason, including being incomplete or improperly completed, or when for other reasons evaluation of the application cannot be completed.

### Withdrawals and Refunds

Once submitted, applications for renewal of certification by continuing education may not be withdrawn and fees are not refunded.

### Application Status

#### Receipt of Application

NCBDE processes applications approximately three weeks after receipt. Notices verifying receipt are sent by e-mail at that time. See Adherence to Published Policies section, page 6, for recommended mailing method. If the e-mail receipt notification is not received within 5 weeks after application is mailed, contact NCBDE at (847) 228-9795 or via email at [info@ncbde.org](mailto:info@ncbde.org).

#### Review of Application

Review of applications for renewal of continuing education is completed as quickly as possible. However, depending upon submission date, the review process can be conducted as late as November or December\*. With completion of the review process, notices are sent to individuals as soon as possible. Decisions regarding renewal by continuing education are communicated in writing via mail. *The NCBDE national office does not provide the status of an application via telephone, fax or electronically.*

\*NOTE: Though all possible efforts will be made to prevent any individual applying for renewal by continuing education from receiving their letter of notification after December 31, 2010, CDEs using the late application deadline should be aware that it is possible that they may not receive their letters of notification until after that date. *An individual should NOT use the CDE credential after December 31, 2010 until notification that certification has been renewed is received.*



## **Certificates and Wallet Cards**

Approximately three months after letters of successful completion of renewal of certification by continuing education are mailed, complimentary certificates and wallet cards are provided by NCBDE.

## **Use of Certification Marks**

Certification is a process by which recognition is granted to an individual who has satisfactorily met all requirements. Only after receiving official written notice of either passing the Examination or renewing certification may an individual use the mark "CDE®" following his/her name. The marks CDE®, CERTIFIED DIABETES EDUCATOR®, and CDE in the design form(s) approved by NCBDE are also used on certificates, lapel pins, cards, and promotional materials in accordance with NCBDE policies. CDE CERTIFIED DIABETES EDUCATOR (and Design)® and CDE® are federally registered certification marks.

The CDE designation is not punctuated with periods. An example of proper use of the CDE credential is as follows:  
Joan M. Smith, RN, MSN, CDE®.



## Appendix I

### Guidelines for Reporting Continuing Education Activities

#### 1. Self-Assessment

It is expected that health care professionals specializing in diabetes self-management education will want to demonstrate through renewal of certification that their knowledge and skills are up-to-date and that they are able to practice proficiently and safely. It is hoped that all CDEs who select renewal of certification by continuing education will engage in a personal assessment to identify professional needs and participate in appropriate activities.

#### 2. Renewal by Continuing Education Cycles

After initial certification, all continuing education must be completed between the following January 1 and the application deadline date for renewal, i.e., September 15, five years later. (e.g., first certified in 2005, January 1, 2006 is start of accrual period).

For subsequent certification periods, all continuing education must be completed between the day after the application deadline date (i.e., September 16) and the application deadline date for renewal, i.e., September 15, five years later (e.g., renewed in 2005, September 16, 2005 is start of accrual period).

#### 3. Continuing Education:

- must be approved by a provider on the NCBDE List of Recognized Providers.
- must be applicable to diabetes. All subject matter on the Certification Examination Content Outline published in the current Handbook (See Appendix II, page 11) is considered applicable to diabetes.
- must be completed as defined by the renewal of continuing education cycles policy. (All continuing education activities must be completed prior to the application deadline and before submitting the application.)
- must be at a professional level that enhances the quality and effectiveness of diabetes self-management education practice.
- does not have to be discipline specific nor does it have to be in any specific area of concentration, e.g., social workers may attend a diabetes related nursing program and use those clock hours for renewal of certification.

#### Activities acceptable for renewal of certification by continuing education

- Continuing education courses
- Independent study
- Seminars
- Online programs
- Workshops
- Telephonic or video conference programs
- Conferences

#### Activities NOT acceptable for renewal of certification by continuing education

- Academic courses
- Other certification/credentials awarded
- Elected office or serving on Boards and/or Committees
- Articles or books written by the certificant
- Journal clubs or professional reading
- Presentations or lectures by the certificant
- Posters or poster sessions and exhibits
- Preceptorships or mentor hours
- Research
- Volunteer activities

#### 4. Continuing Education Hour

- A. When the continuing education option is selected for recertification, all continuing education activities must be reported in clock hours, i.e., the actual time spent on the continuing education activity, not contact hours, credits, or units awarded by the recognized provider. One clock hour equals 60 minutes. In many professions, a 60-minute hour is equivalent to 1 contact hour, i.e., 60 minutes equals 1 contact hour. In nursing prior to 2007, however, a 50-minute hour was equivalent to one contact hour, i.e., 50 minutes equaled 1 contact hour. To provide a common measure for continuing education activities, NCBDE requires that activities be reported in clock hours. If a recognized provider awarded 2 contact hours for a continuing education activity that was two hours in length, 2 clock hours would be reported to NCBDE for that activity. For that same two-hour program prior to 2007, if the provider awarded 2.4 contact hours for nurses on the basis of a 50 minute hour, it would be necessary to convert those contact hours to clock hours. This would be done by multiplying 2.4 contact hours by 50 minutes, which is 120 minutes or 2 hours.



- B. Presentations – Participants may include in the time to be counted as clock hours the course overview, introductions, the educational presentation, and questions and answers. Time may not be counted for general announcements, breaks, lunch, exhibits, or poster sessions.
- C. Self study programs (online or written booklets) – Participants may count the actual time spent on completing the activity. Clock hours submitted cannot be more than the number of contact hours/credits/units awarded by the recognized provider.

### 5. Recognized Continuing Education Providers

Continuing education activities must be provided by or approved by one of the following:

- American Association of Diabetes Educators (AADE)
- American Diabetes Association (ADA)
- American Dietetic Association (ADA)
- Accreditation Council for Pharmacy Education (ACPE)  
Accredited or Approved Providers
- Accreditation Council for Continuing Medical Education (ACCME-AMA) Accredited or Approved Providers
- American Nurses Credentialing Center (ANCC) Accredited or Approved Providers
- American Academy of Family Physicians (AAFP)
- American Academy of Nurse Practitioners (AANP)
- American Academy of Optometry (AAO)
- American Academy of Physician Assistants (AAPA)
- American Association of Clinical Endocrinologists (AACE)
- American College of Endocrinology (ACE)
- American College of Sports Medicine (ACSM)
- American Medical Association (AMA)
- American Nurses Association (ANA)
- American Occupational Therapy Association (AOTA)
- American Osteopathic Association (AOA)
- American Physical Therapy Association (APTA)
- American Psychological Association (APA)
- American Podiatric Medical Association (APMA)
- Commission on Dietetic Registration (CDR) Accredited or Approved Providers
- Council on Continuing Medical Education (CCME-AOA) Approved Sponsors
- Council on Podiatric Medical Education (CPME-APMA) Approved Sponsors
- International Diabetes Federation (IDF)
- National Association of Clinical Nurse Specialists (NACNS)
- National Association of Social Workers (NASW)

Continuing education activities provided through accredited academic institutions within the United States or its territories granting degrees related to professional practice are also accepted (e.g., continuing education activity provided by an accredited academic institution's School of Nursing, Nutrition, Social Work, Medicine, etc.).

### 6. Sample Continuing Education Activities Form

A sample 2010 Summary of Continuing Education Activities form providing important notes and identifying possible errors is available via download from NCBDE's web site ([http://www.ncbde.org/sample\\_form.cfm](http://www.ncbde.org/sample_form.cfm)). To obtain the sample document via mail, submit your request, including your mailing address, to the NCBDE's national office via phone (847) 228-9795, fax (847) 228-8469, or email at [info@ncbde.org](mailto:info@ncbde.org).

‡Important Note: This sample document is not to be used to apply for renewal of certification by continuing education. The Handbook/Application is needed to complete the renewal process.



## Appendix II

### Examination Content Outline

#### I. Assessment (45)

- A. Assess Learning/Self-Care Behaviors (15)
  - 1. Goals and learning needs
  - 2. Learning readiness (attitudes, developmental level, perceived learning needs, etc.)
  - 3. Learning style
  - 4. Barriers to learning (literacy level, language, cultural values, religious beliefs, health beliefs, psychosocioeconomic, family dynamics, etc.)
  - 5. Physical capabilities/limitations (visual acuity, hearing, functional ability, etc.)
  - 6. Readiness to change behavior (confidence in ability to change, value in change, etc.)
- B. Assess Medical/Health/Psycho-Socioeconomic Status (10)
  - 1. Collect diabetes-specific health history (duration, symptoms, complications, adherence to standards of care, treatment, etc.)
  - 2. Collect general health history (family history, allergies, medical history, nutrition history, etc.)
  - 3. Assess previous and current medication regimen (prescription and nonprescription drugs, herbals, alternative remedies, adverse reactions, etc.)
  - 4. Assess treatment fears (hypoglycemia, hyperglycemia, needles, weight gain, etc.)
  - 5. Assess family/caregiver dynamics and social supports
  - 6. Assess substance use (alcohol, tobacco, caffeine, etc.)
  - 7. Assess psychosocial/ developmental/mental health status (adjustment to diagnosis, etc.)
  - 8. Identify specific barriers to diabetes self-care regimen (cognitive ability, language, cultural, psychosocial, physical, economic, etc.)
  - 9. Conduct diabetes-specific physical assessment (lower extremities, injection and blood glucose monitoring sites, blood pressure, weight, height, body mass index, acanthosis nigricans, etc.)
  - 10. Assess laboratory and patient collected data (blood glucose, A1C, lipid profile, renal/liver function, trends, meter, pump, sensor, etc.)
- C. Assess Current Knowledge and Practices Related to Diabetes Care (20)
  - 1. Diabetes knowledge and self-management skills
  - 2. Nutritional habits (food and beverage choices, portion sizes, timing of meals and snacks, eating environment, etc.)
  - 3. Exercise/physical activity history and/or level
  - 4. Monitoring techniques and equipment (blood glucose and ketones, etc.)
  - 5. Record keeping activities (blood glucose, food, activity, etc.)
  - 6. Medication administration (oral and injectable medications administration technique, use of delivery systems, timing and dosage of medication, adherence, etc.)
  - 7. Use of health care resources (health care professionals, insurance, etc.)

#### II. Intervention (112)

- A. Collaborate with Patient/Family/Caregiver/Healthcare Team to Develop: (14)
  - 1. Individualized diabetes education plan based on assessment (learning objectives, sequence of information, selection of content, communication, etc.)
  - 2. Instructional methods (discussion, demonstration, role playing, simulation, electronic media, etc.)
  - 3. Behavioral goals
- B. Teach/Counsel Regarding Principles of Diabetes Care (70)
  - 1. General issues
    - a) Classifications and diagnosis (ADA Guidelines)
    - b) Modifiable risk factors (lifestyle behaviors, etc.)
    - c) Pathophysiology (auto-immunity, MODY, insulin resistance, fuel metabolism, etc.)
    - d) Interaction of physical activity, food, medication, and stress
    - e) Treatment options (choices, availability, cost, risk/benefit, etc.)
    - f) Goals of treatment (blood glucose, A1C, blood pressure, lipids, quality of life, prevention, etc.)
    - g) Purpose of laboratory tests (A1C, lipids, kidney and liver function tests, etc.)
  - 2. Living with diabetes
    - a) Psychosocial adaptation (coping skills, depression, anxiety, etc.)
    - b) Role/responsibilities of care (patient, family members, team, etc.)
    - c) Decision making/behavior change skills
    - d) Safety (sharps disposal, medical ID, driving, etc.)
    - e) Hygiene (dental/skin/feet, etc.)
    - f) Social/Financial issues (employment, insurance, disability, etc.)
  - 3. Metabolic monitoring
    - a) Glucose (testing sites, meter selection, sensor, etc.)
    - b) A1C
    - c) Blood pressure
    - d) Regimen and record keeping (pattern management, etc.)
    - e) Lipids/cholesterol
    - f) Liver/Renal monitoring (liver function studies, microalbuminuria, creatinine, etc.)
  - 4. Nutrition principles and guidelines
    - a) American Diabetes Association nutrition recommendations (meal planning, macro/micronutrients, etc.)
    - b) Carbohydrates in blood glucose control (postprandial blood glucose, food source, sugar substitutes, fiber, carbohydrate counting, etc.)
    - c) Lipid management (total fat, saturated fat, monounsaturated fat, etc.)
    - d) Protein intake (renal disease, wound care, etc.)
    - e) Food and medication integration
    - f) Food label interpretation (nutrition facts, ingredients, health claims, etc.)



## 2010 Renewal by Continuing Education

- g) Alcohol
  - h) Principles of weight management
  - i) Changes in daily schedules (problem-solving)
  - j) Special considerations (gastroparesis, celiac, etc.)
  - 5. Physical activity
    - a) Benefits, barriers, and precautions
    - b) Exercise/activity plan
    - c) Post exercise delayed onset hypoglycemia
    - d) Food/medication/monitoring adjustment
  - 6. Pharmacologic management of diabetes
    - a) Medications (insulin, oral and injectable medication administration, side effects, etc.)
    - b) Delivery systems (pump therapy, devices, etc.)
    - c) Medication adjustment
    - d) Drug interactions
    - e) Non-prescription preparations (over the counter drugs, supplements, vitamins, minerals, herbals, etc.)
  - 7. Acute complications: prevention and treatment
    - a) Hypoglycemia (glucose tablets, glucagon, etc.)
    - b) Hyperglycemia (inpatient, outpatient, etc.)
    - c) Diabetic ketoacidosis (DKA)
    - d) Hyperglycemic hyperosmolar nonketotic syndrome (HHNS)
  - 8. Chronic complications: prevention and treatment
    - a) Screening and prevention of complications (smoking, hypertension, etc.)
    - b) Eye disease (retinopathy, cataracts, glaucoma, etc.)
    - c) Sexual dysfunction
    - d) Neuropathy (autonomic, peripheral, etc.)
    - e) Nephropathy
    - f) Vascular disease (cerebral, cardiovascular, peripheral, etc.)
    - g) Lower extremity problems (foot ulcers, Charcot foot, etc.)
  - 9. Special management issues
    - a) Honeymoon period, dawn phenomenon, Somogyi effect
    - b) Hypoglycemia unawareness
    - c) Sick days
    - d) Surgery and special procedures
    - e) Travel
    - f) Geriatrics populations
    - g) Pre-conception planning, pregnancy, and gestational diabetes
    - h) Co-morbidities (hypertension, depression, thyroid disease, celiac, obesity, etc.)
    - i) Dental and gum disease
    - j) Skin problems (wound care, yeast infection, ulcers, etc.)
    - k) Changes in usual schedules (shift, religious and cultural customs, etc.)
    - l) Assistive and adaptive devices (talking meter, magnifier, etc.)
    - m) Sleep apnea
  - 10. Interpret current diabetes research and translate findings into practical applications
  - C. Review, Evaluation, Revision, and Documentation (14)
    - 1. Interpret weight changes, blood glucose, food, medication, and physical activity records
    - 2. Evaluate effectiveness of teaching in the following:
      - a) Achievement of objectives
      - b) Progress towards behavioral goals
      - c) Self-management skills
      - d) Psychosocial adaptation
    - 3. Document results of assessment, intervention, and outcomes
    - 4. Establish an ongoing plan for achieving and evaluating objectives and behavioral goals
  - D. Follow-up and Referral Recommendations (14)
    - 1. Identify problems requiring intervention by other health care professionals
      - a) Medical nutrition therapy
      - b) Exercise prescription
      - c) Mental health
      - d) Medical care (foot care, dilated eye exam, preconception counseling, etc.)
      - e) Financial and social services
      - f) Risk reduction (smoking cessation, obesity, preventative services, etc.)
      - g) Medication consult
      - h) Discharge planning, home care, community resources (visual, hearing, language, etc.)
    - 2. Facilitate communication between patient, providers, and referral source to ensure health care and education needs are addressed
    - 3. Facilitate access for diabetes support: groups, camps, community resources, etc.
- ### III. Program Development and Administration (18)
- A. Diabetes Patient Education Program (8)
    - 1. Perform needs assessment (target population, etc.)
    - 2. Develop curriculum (identify program goals, content outline, lesson plan, teaching materials, etc.)
    - 3. Choose teaching methods and materials for target populations
    - 4. Market and promote diabetes patient education program
    - 5. Maintain patient information/demographic database
    - 6. Ensure patient confidentiality (HIPAA, etc.)
    - 7. Promote standards of care
    - 8. Implement infection control principles
  - B. Evaluate Outcomes and Quality (6)
    - 1. Program outcomes (number of people served, provider satisfaction, patient satisfaction, effectiveness of diabetes education materials, etc.)
    - 2. Patient outcomes (behavior changes, A1C, lipids, weight, quality of life, ER visits, decreased work absences, etc.)
    - 3. Continuous quality improvement activities
  - C. Promote Diabetes Advocacy (4)
    - 1. Health fairs
    - 2. Workplace (identify and eliminate discrimination)

# Application Instructions

## Applying to renew by continuing education?

1. Review the Renewal Practice Requirement, page 4, to verify you meet the practice requirement.
2. Review both the Guidelines for Reporting Continuing Education Activities, Appendix I, page 9, and Instructions for Completing Part II, page 14, regarding completion of the application documents.
3. Submit the following:
  - Part I
  - Part II (completed per the Guidelines) and if using late deadline, all verification documentation
  - Application fee(s) (Refer to Fees, page 6)

## Send the application to:

Attn: Renewal by Continuing Education  
NCBDE  
330 E Algonquin Rd, Suite 4  
Arlington Heights, IL 60005

### Checklist – Renewal of Certification by Continuing Education

Use this checklist to ensure that you have completed all required procedures before submitting your application.

#### Part I of the Application

- Have you completed all required sections of Part I of the application, including your signature in ink?

#### Part II of the Application – Summary of Continuing Education Activities

- Have you reported your activities in clock hours?
- Have you completed all required sections of Part II of the application, including your signature in ink?
- Have you completed all continuing education activities? Do not submit the application before all continuing education activities have been completed.
- If using a print out of activities maintained in the NCBDE “My Continuing Education” tracking area on the NCBDE web site, have you included that document?
- If content applicable to diabetes is not evident from the title of the particular activity, have you included a brief description?
- If applying using late deadline, have you included verification documentation for all activities?

#### Fees

- Have you completed all necessary information in Part I, Section 17 and included a check or money order, payable to NCBDE, if necessary? Refer to Fees, page 6, for fee schedule.

#### Copy

- Have you kept copies of the application including continuing education documentation materials for your files? Retain this checklist and a copy of your application for your records. Under no circumstances are applications, including copies, returned to applicants.

#### Mail/Send Application

- Make sure that your application is postmarked no earlier than July 1, 2010 and no later than September 15, 2010 (unless making use of the Extended or Late Application Option – see important information applicable to this option under Applying for Renewal by Continuing Education section, page 6).
- (Optional:)** Send application by certified mail or traceable courier service. (See Adherence to Published Policies section, page 6).

Email acknowledgement of receipt of your application should be sent by NCBDE no later than 5 weeks after the application has been mailed.

# Instructions for Completing Part II of the Application

Renewal of certification by continuing education requires that CDEs complete 75 clock hours of continuing education in content areas applicable to diabetes during the certification cycle. For 2010, continuing education activities completed between January 1, 2006 for CDEs renewing for the first time - or September 16, 2005 for CDEs who have renewed previously - and the appropriate application window deadline date may be counted, provided they are completed at the time of application and the application is postmarked by the published application window deadline date.

## Instructions

1. Review the Guidelines for Reporting Continuing Education Activities, Appendix I, page 9.
2. In addition to Part I, Part II, Summary of Continuing Education Activities, must be completed by CDEs who are applying for renewal of certification by continuing education.
3. Complete\* and sign page 1 of Part II and complete as many of the other pages of Part II as needed to document continuing education activities. Photocopy Part II if necessary.  

\*If you have been using the "My Continuing Education" Tracking area on NCBDE's web site: In addition to completing Part I of the current year's Application, read and sign the attestation on Page 1 of the Summary of Continuing Education Activities Form and include a notation of "See Attached" across the area on the form where activities are reported. Print out your list of tracked activities and include it with the Application materials.
4. Do not use abbreviations or acronyms.
5. Print or type all information legibly.
6. The number of hours counted for each activity must be reported as the number of clock hours spent by the participant completing the continuing education activity applicable to diabetes. Do not report contact hours.
7. If content applicable to diabetes is not evident from the title, include on a separate sheet of paper a brief description of how the activity is applicable to diabetes.
8. Unless you are applying using the late deadline date (postmark date of December 15), do **NOT** submit certificates of completion or other evidence of attendance. You will be requested to submit a copy of supporting documentation verifying completion of each activity only if your application is selected for audit. **Those applying using the late deadline date, must submit certificates of completion or other evidence of attendance.**
9. Keep a copy of your application as well as copies of all certificates of completion, verification of attendance, brochures or other relevant material.

Any CDE who does not or cannot provide required information, or who does not meet eligibility requirements based on the documentation submitted, will be declared ineligible.



# Renewal of Certification as a Diabetes Educator by Continuing Education

## SUBMISSION OF APPLICATION

When completed, mail the application and documentation (if required), along with appropriate fee(s) to: Attn: Renewal by Continuing Education, NCBDE, 330 East Algonquin Road, Suite 4, Arlington Heights, IL 60005. Applications for renewal by continuing education MUST be sent ONLY to the NCBDE national office.

**Please print or type ONLY.**

1. First Name \_\_\_\_\_ 2. Middle Initial(s) \_\_\_\_\_ (2 characters maximum)

3. Last Name \_\_\_\_\_

4. Certification Information

4a. CDE Certificate Number\*\* \_\_\_\_\_ - \_\_\_\_\_ (XXXX-XXXX)

\*\*Can be found on your certificate, wallet card, or 1st line of *NCBDE News* address area. May also contact the NCBDE national office.

4b. Expiration year \_\_\_\_\_ (yyyy)

4c. If your name has changed, under what name did you previously certify? \_\_\_\_\_

5. Gender (circle one)    Male    Female

6. Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

7. Social Security Number\* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (XXX-XX-XXXX)

\*For security reasons, you may report last 4 digits only

8. Home Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (XXX-XXX-XXXX, including area code)

9. Work Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (XXX-XXX-XXXX, including area code)

10. I can be reached during the day at (circle one)    Home Number    Work Number

11. E-mail Address **(required)** \_\_\_\_\_

12. **Mailing** Address (Be sure to include Apt or Unit number and PO Box, Etc.)

\_\_\_\_\_  
\_\_\_\_\_

13. City \_\_\_\_\_ 14. State \_\_\_\_\_ 15. Zip Code \_\_\_\_\_  
(XXXXXX or XXXXX-XXXX)

16. Country, only if outside U.S./Territories \_\_\_\_\_



17. **Application Fee** – Refer to Fees, page 6 for fee schedule.

Indicate total payment amount: \_\_\_\_\_

Indicate payment method:

- Check (payable to NCBDE, personal, corporate, or cashier's check)
- Money order (payable to NCBDE)
- Credit card - If payment is by credit card, complete the following:

Type of card (circle one)      VISA              Mastercard              American Express

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Billing address if different from mailing address, including city, state and zip code

\_\_\_\_\_

\_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_

18. **Professional Discipline Information - Check one category.**

NOTE: If initial certification was obtained under an applicable license/registration, you must continue to hold an active, unrestricted license/registration in that discipline.

- Clinical Exercise Physiologist (RCEP)
- Clinical Nurse Specialist (CNS)
- Clinical Psychologist (LP)
- Doctor of Medicine (MD)
- Doctor of Optometry (OD)
- Doctor of Osteopathy (DO)
- Doctor of Podiatric Medicine (DPM)
- Nurse Practitioner (NP)
- Occupational Therapist – Registered (OTR)
- Physician Assistant Certified (PA-C)
- Registered Dietitian (RD)
- Registered Nurse (RN)
- Registered Pharmacist (RPh w/ baccalaureate degree)
- Registered Pharmacist (RPh w/ Doctor of Pharmacy degree)
- Registered Physical Therapist (RPT)
- Advanced degree in social work (renewal only)
- Advanced degree in nutrition (renewal only)
- Advanced degree in health education (renewal only)
- Advanced degree in public health (renewal only)

**19. Professional Information - Please complete each section.**

## A.1. Primary Practice Setting

- Hospital Inpatient Only  
 Hospital Outpatient Only  
 Both Hospital Inpatient/Outpatient  
 Physician's Office  
 Community Health Agency  
 Private Practice  
 Home Health Agency  
 Other \_\_\_\_\_

## A.2. Secondary Practice Setting

- Not Applicable  
 Hospital Inpatient Only  
 Hospital Outpatient Only  
 Both Hospital Inpatient/Outpatient  
 Physician's Office  
 Community Health Agency  
 Private Practice  
 Home Health Agency  
 Other \_\_\_\_\_

## B. Experience in Diabetes Related Care and Education

- Over 5 years to 10 years  
 More than 10 years

## C. Percent of Time Spent Providing Diabetes Related Care and Education

- Less than 25%  
 26% to 50%  
 51% to 75%  
 More than 75%

## D. Highest Education Level Achieved

- Associate Degree (Nursing)  
 Diploma in Nursing  
 Baccalaureate Degree  
 Master's Degree  
 Doctoral Degree  
 Medical Degree

## E. Delivery Method for DSME

- Not applicable  
 Face to face only  
 Electronic only (e.g., telephone, internet)  
 Face to face and electronic

## F. Do you wish your name and address to be made available on NCBDE mailing lists?

- Yes  
 No

## G. Ethnicity

- Do not wish to answer  
 Native American/Native Alaskan  
 Asian/Asian-American/Pacific Islander  
 African American  
 Hispanic/Latino  
 Caucasian  
 Other (specify) \_\_\_\_\_

## H. Preferred Salutation (check one)

- Ms  
 Miss  
 Mrs  
 Mr  
 Dr

**20. Eligibility Verification - Must be completed.**

Renewal of Certification Eligibility Verification – The eligibility requirements below apply to current CDEs renewing the credentials.

A. Discipline Requirement Verification – I continue to hold the license or registration for the same discipline held at the time of initial certification or I applied initially under an advanced degree.

B. Renewal Practice Requirement – The renewal practice requirement to apply for renewal by continuing education is identified below.

NOTES:

- For purposes of renewal of certification, practice means actively employed for compensation, providing a direct or indirect professional contribution to the care and self-management education of people with diabetes. Refer to Renewal Practice Requirements, page 6, for details.
- The professional practice experience must have taken place in the United States or its territories.

I verify that I meet the following requirement: providing a minimum of 1,000 hours of professional practice experience at the time of application beginning no earlier than January 1, 2006.

**I attest that I have read the above and meet BOTH the discipline and the renewal practice requirements.**  
 \_\_\_\_\_ initials

**21. Confirmation of Audit**

Applications may be chosen for audit at any time; however, NCBDE also identifies applications on a regular basis to verify eligibility requirements. If your application is chosen for audit, you will receive a notice. Individuals chosen for audit must be able to document that they met all of the requirements in place at the time of application. The audit process must be successfully completed in order for the application to move forward in the review process. Instructions and documents for submission of audit materials will be provided and responses must be received by the identified deadline dates.

**I attest that I have read the above and will provide necessary audit materials as requested.** \_\_\_\_\_ initials

**22. SIGNATURE (Sign and date in ink the statement below.)**

I certify that I have read, understand and agree to abide by the contents of the *Renewal of Certification by Continuing Education Handbook*, and that the information provided on my NCBDE Application and any and all documents submitted by me or others in connection herewith are complete and accurate. I authorize NCBDE and its representatives to take any steps they deem necessary to verify the completeness and accuracy of the information provided, including but not limited to contacting education institutions, employers, supervisors and referral sources. I understand and agree that if any of this information is found to be incomplete or inaccurate, or if I otherwise violate any of the NCBDE policies in the Handbook, my application may be rejected or invalidated by NCBDE.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Summary of Continuing Education Activities Form

Refer to the Guidelines for Reporting Continuing Education Activities, Appendix I, page 9, and Instructions for Completing Part II of the Application, page 14, before completing this form.

Applicant's Name: \_\_\_\_\_

Title of Activity	NCBDE Recognized Provider* (Do not use abbreviations or acronyms) *Provider must appear on the NCBDE List of Recognized Providers.	Date(s) Attended or Completed (mm/dd/yyyy)	Hours Being Claimed
1.			
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3.			
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11.			
12.			
13.			
14.			
<b>Subtotal Number of Hours for Page 1</b>			
<b>TOTAL HOURS for all pages</b>			

**ATTESTATION: This statement must be signed and dated in ink by the applicant.**

I hereby certify that I have read, understand and agree to abide by the contents of the *Renewal of Certification by Continuing Education Handbook* and that the information provided on the Summary of Continuing Education Activities form and all other documents submitted by me are complete and accurate. I authorize NCBDE and its representatives to take any steps they deem necessary to verify the completeness and accuracy of the information provided. I understand and agree that if any information is found to be incomplete or inaccurate or if I otherwise violate any of the NCBDE policies in the Handbook, my application may be rejected or denied.

Certificant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Title of Activity	NCBDE Recognized Provider* (Do not use abbreviations or acronyms) *Provider must appear on the NCBDE List of Recognized Providers.	Date(s) Attended or Completed (mm/dd/yyyy)	Hours Being Claimed
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36.			
<b>Subtotal Number of Hours for Page 2</b>			
<b>TOTAL HOURS for all pages</b>			

**FORMS**

Applicant's Name: \_\_\_\_\_

Title of Activity	NCBDE Recognized Provider* (Do not use abbreviations or acronyms) *Provider must appear on the NCBDE List of Recognized Providers.	Date(s) Attended or Completed (mm/dd/yyyy)	Hours Being Claimed
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58.			
<b>Subtotal Number of Hours for Page 3</b>			
<b>TOTAL HOURS for all pages</b>			

**FORMS**

Applicant's Name: \_\_\_\_\_

Title of Activity	NCBDE Recognized Provider* (Do not use abbreviations or acronyms) *Provider must appear on the NCBDE List of Recognized Providers.	Date(s) Attended or Completed (mm/dd/yyyy)	Hours Being Claimed
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79.			
80.			
<b>Subtotal Number of Hours for Page 4</b>			
<b>TOTAL HOURS for all pages</b>			

**FORMS**

**National Certification Board  
for Diabetes Educators  
330 E. Algonquin Road, Suite 4  
Arlington Heights, IL 60005  
(847) 228-9795 Fax (847) 228-8469  
[www.ncbde.org](http://www.ncbde.org)**