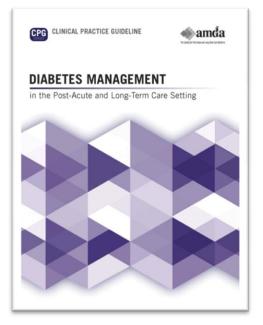
Diabetes Management in the Post-Acute & Long-Term Care Setting Clinical Practice Guideline



Continuing Professional Education Program Self-Study Course for Registered Dietitian Nutritionists, Nutrition and Dietetics Technicians, Registered, and Certified Dietary Managers

Written by Liz Friedrich, MPH, RD, CSG, LDN, FAND Edited by Becky Dorner, RDN, LD, FAND



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Acknowledgements

Continuing Professional Education Program Self-Study Course

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Accreditation Information

Becky Dorner & Associates is a Continuing Professional Education (CPE) Accredited Provider (NU004) with the Commission on Dietetic Registration (CDR).

We maintain records of course completions for a period of 7 years.

Registered Dietitian Nutritionists (RDN), Registered Dietitians (RD), Dietetic Technicians, Registered (DTR); Nutrition and Dietetic Technicians Registered (NDTR): After successfully completing the self-testing portion of this continuing education package, a certificate of completion is provided for your portfolio. Place the certificate in your portfolio for your records. It is the individual's responsibility to update personal CDR portfolio records, keep all documentation including program description/syllabus, and certificates of completion in case of an audit to prove that every CPE program submitted is valid, appropriate or worthy of CPE for an RDN and/or NDTR.

Certified Dietary Managers (CDMs): CDMs may complete a program and self-report it in their Certifying Board for Dietary Managers (CBDM) record. It is the individual's responsibility to keep all documentation including proof of attendance, program description/syllabus, and certificates of completion in case of an audit to prove that every CE program submitted is valid, appropriate or worthy of CE for a CDM.

Course Expiration Date: June 11, 2020 Continuing Professional Education Hours: 2

This course and test must be completed prior to this date. You will receive your certificate upon successful completion of the online test (see *Instructions for Obtaining Continuing Professional Education Certificate* on the following pages).

Diabetes Management in the Post-Acute and Long-Term Care Setting Clinical Practice Guideline

by The American Medical Directors Association, 2015.

You should have received the copy of this material. It is your responsibility to review the material thoroughly prior to taking the continuing professional education self-assessment test.

Course Description

The AMDA Diabetes Management in the Post-Acute and Long-Term Care Setting Clinical *Practice Guidelines* outlines information for providers on the recognition, assessment, and treatment of patients with diabetes.

Diabetes is prevalent among patients in the post-acute/long term care setting. In this setting, goals for glycemic control and risk-factor management should be based on each patient's overall health goals, goals of care, patient preferences and values, and life expectancy. Nutrition assessment can help identify potential interventions for diabetes patients in the post-acute and/or long-term care setting.

Objectives:

After completion of this CPE program, participants will be able to:

- 1. Understand lifestyle modifications that can help manage/treat diabetes in the postacute/long-term care setting.
- 2. State treatment goals for older adults with diabetes.
- 3. Understand the consequences of hypoglycemia in older adults.

CDR Learning Level: Level: 2

CDR Learning Needs Codes and Practice Competencies/Performance Indicators: 3040 Food consumption, fluid balance

8. Uses current knowledge and skills to convey the specific application of food and nutrition sciences and physical activity in the dietetics profession.

8.1.4 Demonstrates knowledge of nutrient requirements throughout the life span and their role in health promotion and disease management

8.1.5 Applies medical nutrition therapy in disease prevention and management.

5040 Long-term care, intermediate, assisted living

8. Uses current knowledge and skills to convey the specific application of food and nutrition sciences and physical activity in the dietetics profession.

8.1.4 Demonstrates knowledge of nutrient requirements throughout the life span and their role in health promotion and disease management

8.1.5 Applies medical nutrition therapy in disease prevention and management.

8.2 Recognizes and respects the physical, social, cultural, institutional and economic environments of the individual, group, community and population in practice.

8.2.3 Implements individualized services to reflect customer-centered approach as it pertains to the customer's physical, social, cultural, institutional and economic environment.

10 Provides safe, effective and ethical medical nutrition therapy to assist the client in establishing and achieving individual health and nutrition goals tailored to prevent and/or manage disease, injury or condition.

10.2 Implements the Nutrition Care Process to ensure individual health goals are established, monitored and achieved while adhering to the Standards of Practice in Nutrition Care for RDNs

10.2.8 Establishes the plan of care, directly addressing the nutrition diagnosis in collaboration with the patient in defining the time, frequency and duration of the intervention.

5100 Elderly

8. Uses current knowledge and skills to convey the specific application of food and nutrition sciences and physical activity in the dietetics profession.

8.1.4 Demonstrates knowledge of nutrient requirements throughout the life span and their role in health promotion and disease management

8.1.5 Applies medical nutrition therapy in disease prevention and management.

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5190 Diabetes Mellitus

8. Uses current knowledge and skills to convey the specific application of food and nutrition sciences and physical activity in the dietetics profession.

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8.1.5 Applies medical nutrition therapy in disease prevention and management.

8.2 Recognizes and respects the physical, social, cultural, institutional and economic environments of the individual, group, community and population in practice.

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Other CDR learning needs codes that may apply:

- (2070) Macronutrients: carbohydrates, fat, protein, fiber, water
- (3000) Nutrition assessment and diagnosis
- (5410) Client protocols, clinical guidelines
- (6020) Counseling, therapy, and facilitation skills

Additional Learning Needs Codes and Performance Indicators/Practice Competencies may also apply.

Instructions for Obtaining Continuing Professional Education (CPE) Certificate

Each participant must review the material provided, take and pass an online test (a grade of 70% is required), and complete a simple evaluation.

To obtain your CPE certificate for this course, please follow these instructions:

- 1. Review the course description, objectives, CDR Learning Needs Codes and Practice Competencies/Performance Indicators.
- 2. Carefully review the contents of this program. Keep in mind the practical applications it has for you in your individual setting. The focus is to increase your knowledge and application of the subject matter.
 - a. Click on "Test and CEU Certificate", and fill in your name, facility name, and state.
 - b. Take the test. For multiple choice questions select the one best answer from the choices given. A passing grade of 70% or more is required. You may re-take the test as many times as needed. If you are interrupted and cannot finish the test, you can save the test and come back later to finish it.

Note: The test questions are also included at the end of this document if you would like to review them in advance of taking the test online.

- 3. Upon successfully completing the test, you will automatically be directed to the evaluation.
 - a. Simply enter your email address and complete the evaluation.
 - b. When finished, click "Submit Survey."
- 4. Click on either "print" or "download your certificate" to generate the CPE Certificate with all of the course information including your name.
- 5. Remember to input the information on this course into your CDR (or CBDM) portfolio.

Continuing Professional Education Self-Assessment Test

You are a registered dietitian nutritionist at a skilled nursing facility. At your suggestion, the facility has decided to individualize diets for all patients, including those with diabetes. You have been asked to develop staff, patient, and family education materials that describe the basics of diabetes management and the upcoming changes in the facility. What are some of the key points that are the basis for the facility's new policies?

- 1. The current standard of nutrition care for patients in long-term care facilities is:
 - a. A low concentrated sweets (LCS) diet will help control blood sugars.
 - b. A low concentrated sweets (LCS) diet is considered outdated.
 - c. A low concentrated sweets (LCS) diet with extra portions of protein will help control blood sugars.
 - d. Food preferences can't be honored if a patient enjoys dessert.
- 2. One key component of a healthy eating patterns for long-term care patients with diabetes is:
 - a. Avoiding fruit juice.
 - b. Reducing carbohydrates, including dietary fiber.
 - c. Controlling portion sizes.
 - d. Restricting fat.
- 3. In frail older adults, blood sugar should be controlled by:
 - a. Adjusting oral agents and/or insulin to balance food consumption
 - b. Adjusting food consumption to balance dose of insulin.
 - c. Adjusting food consumption to balance dose of oral agents.
 - d. Adjusting meal times for patients with diabetes to correspond with medication passes.
- 4. Avoiding hypoglycemia (low blood sugar) in older adults is important because:
 - a. Hypoglycemia can result in weight loss.
 - b. Hypoglycemia can be caused by acute infections.
 - c. Hypoglycemia is associated with falls.
 - d. Hypoglycemia is associated with heart disease.
- 5. Healthy older adults have different treatment goals than older adults with very complex/poor health. Suggested A1c and fasting glucose levels older adults with very complex/poor health are:
 - a. A1c of < 8.5% and fasting glucose of 100-180 mg/dL.
 - b. A1c of < 8.0% and fasting glucose of 100-180 mg/dL.
 - c. A1c of < 8.0% and fasting glucose of 90-130 mg/dL.
 - d. A1c of < 7.5% and fasting glucose of 9-=130 mg/dL.

- 6. Which of the following is a patient-specific issue that can affect diabetes management in the post-acute and long-term care setting?
 - a. Family history of diabetes
 - b. Food preferences
 - c. Exercise history
 - d. Insulin dosages
- 7. Although many people think sugar intake is a primary cause of hyperglycemia, it can also be caused by
 - a. Hypertension
 - b. Chronic kidney disease
 - c. Acute infection
 - d. Cirrhosis of the liver
- 8. Studies have shown that use of sliding scale insulin is associated with _____.
 - a. Hypoglycemia
 - b. Peripheral neuropathy
 - c. Increased difficulty controlling blood sugars
 - d. Hyperglycemia
- 9. In the LTC setting, goals of diabetes care should be based on a patient's overall health, goals of care, patient preferences and values, life expectancy, and _____.
 - a. Carbohydrate intake
 - b. Anticipated clinical benefits
 - c. Risks of treatment
 - d. Body mass index
- 10. Patients and families who have become accustomed to dietary restrictions at home may need to be educated about the role of meal planning in diabetes management
 - a. True
 - b. False