1. **Which of the following is *not* a risk factor for the development of type 2 diabetes?**
    a. Abdominal obesity
    b. Personal history for polycystic ovary syndrome (PCOS)
    c. Caucasian race
    d. Family history of type 2 diabetes

2. **Which of the following statements about diabetes is correct?**
    a. Type 1 diabetes is much more prevalent in the US than type 2 diabetes.
    b. Patients with type 2 diabetes are completely insulin deficient.
    c. Insulin is produced by the β-cells of the liver.
    d. Hyperosmolar hyperglycemic state (HHS) occurs more commonly in patients with type 2 DM compared to those with type 1 DM.

3. **Per the 2016 American Diabetes Association treatment guidelines, which of the following is an appropriate pre-prandial blood sugar goal for a non-pregnant adult with type 2 DM?**
    a. 60 - 100 mg/dL
    b. 80 - 130 mg/dL
    c. 100 - 150 mg/dL
    d. 120 - 180 mg/dL

4. **How often should a patient with type 2 diabetes be screened for retinopathy, neuropathy, and nephropathy?**
    a. Every year
    b. Every 3 years
    c. Every 5 years
    d. Only when symptoms of complications start to occur

5. **About what percentage of HbA_{1c} reduction would you expect from adding an additional noninsulin agent to a current metformin monotherapy?**
    a. 0.3 - 0.5%
    b. 0.6 - 0.9%
    c. 0.9 - 1.1%
    d. 1.1 - 1.5%

6. **What is the initial pharmacologic agent of choice for type 2 diabetes?**
    a. Metformin
    b. Insulin
    c. Liraglutide
    d. Glipizide

7. **When should you consider add-on therapy or maximizing the dose of Metformin for a patient who just started taking Metformin today as their initial therapy?**
    a. 3 months later if their HbA_{1c} is not within goal
    b. 6 months later if their HbA_{1c} is not within goal
    c. 6 months later even if HbA_{1c} is within goal
    d. 12 months later if their HbA_{1c} is not within goal

8. **Which drug class below is associated with weight gain?**
    a. Metformin
    b. DPP-4 inhibitors
    c. SGLT2 inhibitors
    d. Thiazolidinediones

9. **Which scenario would require combination injectable therapy in a newly diagnosed patient with type 2 diabetes?**
    a. A1C greater than or equal to 9%
    b. A1C greater than or equal to 8%
    c. Blood glucose greater than or equal to 300 mg/dL
    d. Blood glucose greater than or equal to 250 mg/dL

10. **Which drug class has the highest efficacy in lowering HbA_{1c}?**
    a. Metformin
    b. Insulin
    c. Sulfonylurea
    d. GLP-1 receptor agonist

11. **Which of the following is NOT one of the four critical time frames to evaluate the need for DSME programs?**
    a. At diagnosis of diabetes
    b. Annually for education assessment
    c. When new complicating factors arise
    d. The first of every month

12. **How many minutes of moderate-intensity activity per week is recommended for a patient with type 2 diabetes?**
    a. 75
    b. 100
    c. 125
    d. 150

13. **Which one of the following statements is correct about lifestyle changes for type 2 DM?**
    a. The DSME programs are meant to help patients with diabetes gain the knowledge and skills needed for optimal care of diabetes.
    b. The DASH diet is the only appropriate diet for patients with diabetes.
    c. Patients with diabetes are recommended to perform 150 minutes of vigorous activity per week whether they are able to or not.
    d. Patients are recommended to use butter instead of olive oil while following the Mediterranean diet.

14. **What of the following is NOT an example of vigorous-intensity activity?**
    a. Jogging
    b. Running
    c. Bicycling at 10 mph
    d. Walking at a brisk pace

15. **With the Idaho Plate Method, what percentage of the plate do the vegetables represent?**
    a. 25%
    b. 50%
    c. 75%
    d. 100%

Participant Information:

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City_____State_____Zip_____

E-mail_____

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How long did it take you to read the article and complete this test?

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My signature certifies that I have independently taken this CE examination.

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CE Assessment Answers Please circle your answers (one answer per question)			
1. A	B	C	D
2. A	B	C	D
3. A	B	C	D
4. A	B	C	D
5. A	B	C	D
6. A	B	C	D
7. A	B	C	D
8. A	B	C	D
9. A	B	C	D
10. A	B	C	D
11. A	B	C	D
12. A	B	C	D
13. A	B	C	D
14. A	B	C	D
15. A	B	C	D

Program Evaluation – Must be completed for credit.

Please rate the following items on a scale from 1 (poor) to 4 (excellent).

1. Overall quality of the article	1	2	3	4
2. Relevance to pharmacy practice	1	2	3	4
3. Value of the content	1	2	3	4

Please answer each question, marking whether you agree or disagree.

4. This course met the learning objectives. ☐ Agree ☐ Disagree

5. The article did not promote a particular product or company. ☐Yes ☐ No

Impact of the Activity

The information presented (check all that apply):

6. ☐ Reinforced my current practice/treatment habits   ☐ Will improve my practice/patient outcomes
    ☐ Provided new ideas or information I expect to use ☐ Adds to my knowledge

7. Will the information presented cause you to make any changes in how you do your job?   ☐ Yes ☐ No

8. How committed are you to making these changes?
   (Not committed) 1   2   3   4 (Very committed).

9. Do you feel future activities on this subject matter are necessary and/or important?   ☐ Yes ☐ No

Follow-Up

As part of our ongoing quality-improvement effort, we would like to be able to contact you in the event we conduct a follow-up survey to assess the impact of our educational interventions on professional practice. Are you willing to participate in such a survey?
☐ Yes ☐ No

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