OT Mastery

Diabetes Management

1. What is the main mechanism that leads someone to develop diabetes?

A. Mood changes and irritability
B. Unstable blood glucose levels resulting from decreased insulin production from the pancreas
C. Aging
D. Insulin that regulates blood glucose levels

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2. What is listed in the course material as one of the reasons diabetes cases are increasing in the United States?

A. Decreased awareness leading to fewer diabetes diagnoses
B. A younger population with fewer chronic health conditions
C. Widespread availability of effective diabetes mitigation strategies
D. Increased consumption of carbonated beverages and high-sugar foods

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3. What less common form of diabetes is often mistaken for types 1 and 2 diabetes mellitus?

A. Maturity-onset diabetes of the young (MODY)
B. Gestational diabetes
C. Latent autoimmune diabetes in adults (LADA)
D. Pancreatogenic diabetes

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4. What A1C range is indicative of diabetes mellitus?

A. 5.7% to 6.4%
B. 6.5% or higher
C. 5.2% to 5.7%
D. 5.7% to 6.2%

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5. What is the chief similiarity across diabetes types?

A. All types of diabetes require someone to receive insulin injections
B. There is no form of diabetes that can be reversed
C. All types of diabetes can be reversed with proper management
D. Most forms of diabetes respond well to lifestyle changes as a form of self-management

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6. Which of the following is a complication of diabetes?

A. Diabetic eye disease
B. Multiple sclerosis
C. Rheumatoid arthritis
D. Parkinson's disease

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7. What are the most common conditions that are comorbid with diabetes?

A. Alzheimer's disease and atherosclerosis
B. Hypertension and ischemic heart disease
C. Hypertension and coronary artery disease
D. Parkinson's disease and coronary artery disease

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8. According to the course material, what is true about exercise tolerance in individuals with type 2 diabetes?

A. Exercise tolerance only declines in the later stages of poorly managed type 2 diabetes
B. Exercise tolerance is unaffected by type 2 diabetes unless cardiac or pulmonary dysfunction is present
C. Impaired exercise tolerance occurs even in early-stage type 2 diabetes, regardless of how well the condition is managed
D. Exercise tolerance improves as A1C levels rise

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9. What is a direct effect of vascular changes in the body that result from diabetes?

A. Difficulty with self-management
B. Postural instability
C. Limited health education
D. Decreased productivity in the home and at work

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10. What is the best summary of assistive devices OTs might recommend to those with diabetes?

A. Mobility aids, glucose monitors, apps to help with self-management, large-print materials, insulin pumps
B. Wheelchairs, walkers, canes, power scooters, rollators
C. Wheelchairs, walkers, glucose monitors
D. Hospital beds, heart monitors, glucose monitors, stair lifts

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11. What physical activities are specifically at the center of diabetes management?

A. Resistance training and yoga
B. Interval training and jogging
C. Aerobic exercise and strength training
D. Flexibility and balance exercises

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12. When educating patients with diabetes on exercise requirements, what threshold should therapists mention?

A. It is recommended that those with diabetes get at least 60 minutes of moderate to vigorous aerobic exercise each week
B. It is recommended that those with diabetes get at least 150 minutes of moderate to vigorous aerobic exercise each week
C. Vigorous aerobic activity is not recommended for those with diabetes, as it can exacerbate frailty. Any amount of moderate aerobic activity is encouraged for those with diabetes
D. Any form of weight-bearing exercise is beneficial for those with diabetes

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13. What foods should OTs educate patients about eating to better manage diabetes, and why?

A. Low glycemic index foods, because they help stabilize blood glucose levels
B. Lean poultry, because this is typically free of antibiotics and moderates hormone levels that control blood glucose
C. High glycemic index foods, because they keep blood glucose levels from getting too high
D. Foods that are high in omega-3 fatty acids, because this helps lubricate the joints for better movement

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14. Which of the following is identified as an important skill area for OTs to address within medication management for people with diabetes?

A. Reporting medication intake to their doctor each week
B. Avoiding all forms of oral medication in favor of insulin
C. Relying on family members to administer medications independently
D. Health literacy, including a patient's knowledge of each medication's purpose and how to take it

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15. What approaches have been proven effective in helping with mood management for people diagnosed with diabetes?

A. Dialectic behavioral therapy, mindfulness-based stress reduction, skills training
B. Cognitive behavioral therapy, skills training, anger management
C. Mindfulness-based stress reduction, acceptance and committment therapy, resilience training
D. Spiritual exploration, acceptance and committment therapy, anger management

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16. What evidence-based tool has been explored to help people with diabetes adjust their daily tasks in an effort to conserve energy?

A. NASA's Task Load Index
B. Sleep Hygiene Checklist
C. MET levels
D. Leisure Checklist

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17. How can sensory interventions help those with diabetes?

A. Using assistive devices to manage sensation loss in all diabetes cases
B. Teaching individuals compensatory strategies to maintain safety in the midst of sensation loss and sensory reeducation/desensitization training to restore some sensory function in others
C. Sensation restoration for all individuals with diabetes who have undergone traumatic amputations of the extremities
D. Requesting help from others in order to avoid activities that may cause injury due to sensation loss

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18. What OT-based intervention type is effective in structuring treatment for patients who have chronic conditions, including diabetes?

A. Motivational interviewing
B. DIRFloortime
C. Acceptance and Committment Therapy
D. Lifestyle Redesign

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19. What are the aims of the REAL Diabetes Program?

A. Acceptance of one's condition as a pathway to improved mood management and more stable blood glucose levels
B. Improved exercise tolerance and diet maintenance to assist with weight loss and mood management
C. Improving glycemic control and quality-of-life through teaching resilience, empowerment, and active living strategies
D. Increased medication adherence and symptom management through a personal accountability framework

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20. What did a 10-week habit formation program for adults with type 2 diabetes find regarding self-care behaviors and habit strength?

A. Habit strength only improved in the area of blood glucose monitoring
B. Self-care behaviors significantly improved for 75% of participants, with the greatest habit strength gains seen in physical activity
C. The program had no measurable effect on self-care behaviors
D. Habit strength improved most in medication management and least in physical activity

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