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NEW YORK (TheStreet) -- As gold has halted its run to an all-time high of 1,070.37 and activated corrective pullbacks, all eyes are now on the 1,030.85 level, its 2008 high where a reversal of roles is expected. This present decline is coming on the back of a loss of momentum at the 1,070.37 level on Oct. 14. Since then two failed retests were seen on Oct. 20 and Oct. 23 before the current weakness. Though gold remains biased to the upside medium to longer term, its present corrective down move is expected following its recent rally. The proof of whether a top is now place will be determined by how it reacts at the 1,030 level and its long-term rising trendline currently at 991.50 drawn from the 681.72 level. We believe the first defense at the 1,030 level should turn off the commodity if tested as a role reversal rule (a broken support turns to resistance) should play out here. However, if gold snaps below that level, its minor support sitting at the 1,024 level will be targeted where a negation and penetration there will create scope for further downside pressure towards the 991.50 level. The commodity remains supported by its daily statistics and RSI which are both bearish and pointing lower. On the other hand, to invalidate its current downside weakness, gold must break and hold above its all-time high at 1,070.37. Beyond that level there is the big psycho level at 1,100 ahead of the 1,150 and then the 1,200 level. The latter level falls within our three months forecast. Overall, Gold has triggered its longer term uptrend and should head further higher on completing its current corrective pullbacks. Mohammed Isah is a technical strategist and head of research at FXTechstrategy.com, a technical-research Web site. He has been trading and analyzing the foreign exchange market for the past seven years. He formerly traded stocks before crossing over to the forex market, where he worked for FXInstructor LLC as a technical analyst and head of research before joining FXTechstrategy.com. He has written extensively on the forex market and technical analysis and his articles have been featured in The Technical Analyst Magazine, The Forex Journal Magazine, The International Business Times and FXstreet.com. At FXTechstrategy.com, he writes daily, weekly and long-term technical commentaries on currencies and commodities, which are offered to its clients. He provides full coverage of the forex market with specific focus on G10 currencies as well as the commodities markets, with focus on five key commodities. The figure skating test structure may be confusing to those new to ice skating. This article outlines and explains figure skating tests and levels. Most ice rinks offer group ice skating lessons, and part of most standard group figure skating lesson courses include the chance to take achievement basic figure skating skills tests. Some ice arenas use the U.S. Figure Skating Basic Skills Test Program; other skating rinks offer Ice Skating Institute (ISI) tests. Skaters receive stickers, certificates, and badges after passing these skating tests. Some of these test levels are Basic 1--8, Freestyle 1--8, Dance, Pairs, Hockey, and Alpha, Beta, Gamma, and Delta badge tests. Those new to figure skating need to know that U.S. Figure Skating has an entire test structure that is beyond Basic Skills ice skating tests. This "advanced" test structure makes it possible for figure skaters to be eligible to compete in certain competitions. These standard figure skating tests are the ones that count and are the ones that "mean something" on an ice skater's resume. Full U.S. Figure Skating membership is required in order to take skating tests beyond the basic skills. These official skating tests usually take place during special club test sessions and are judged by a qualified judging panel. To master the positions, edges, and turns necessary for figure skating, ice skaters do Moves in the Field. Moves in the Field tests must be passed before taking the corresponding free skating or pair skating tests. For example, the Juvenile Moves in the Field test must be passed before being eligible to take the Juvenile free skating test or the Juvenile pairs test. Figure skating tests begin at the Pre-Preliminary level and end with the Senior level tests. In order to compete at a certain level, skaters must pass the test that is at the level the skater wishes to compete at. For example, in order to compete in Intermediate Pairs, skaters must pass the Intermediate Moves in the Field and Intermediate Pairs tests. Pre-PreliminaryPreliminaryPre-JuvenileJuvenileIntermediateNoviceJuniorSenior Once a skater passes a test for a specific level, he or she cannot compete below that level. Test requirements are usually easier than what is required for competition. The structure of ice dance tests and levels is slightly different since there are compulsory ice dance tests and free dance tests. There are at least three different compulsory dances in each dance test. In order to compete in ice dance competitions, skaters must pass Moves in the Field, compulsory ice dances, and free dance tests. Adults only have to pass compulsory dances. The compulsory dance tests are named differently: Preliminary Dance TestPre-Bronze Dance TestBronze Dance TestPre-Silver Dance TestSilver Dance TestPre-Gold Dance TestGold Dance TestInternational Dance Tests Pattern Dance tests must be passed before taking certain Free Dance tests. There is a different figure skating test structure for adult ice skaters. There are Adult Moves in the Field tests, Adult freeskiing tests, Adult pair skating tests, and Adult free dance tests. Adults may choose to take standard figure skating tests if they wish. For compulsory ice dance tests, there is an option to test as an Adult or as a Master. To qualify for an Adult test, the skater must be 21 years of age or older, and to qualify for Masters tests, the skater must be 50 years of age or older. The adult freeskiing test structure is as follows: Adult Pre-BronzeAdult BronzeAdult SilverAdult Gold The first tests a skater may take may not take long to pass and prepare for. Some skaters may take six months to prepare for a test, while it can take others a year or more. As time passes, ice skating tests become more and more difficult. The passing standard is very high. Many skaters do not pass figure skating tests. If a skater does not pass a figure skating test, after waiting 28 days, the test may be attempted again. Figure skating tests are not administered in a casual manner. They are usually taken at official test sessions where the skater is the only skater on the ice surface, and are judged by a highly qualified panel of judges. Fees are involved. Skaters do the required test moves to an original and individually planned program set to music. Moves in the Field tests are done in a certain order, but without music. Those testing compulsory ice dances may choose to take only one, two, or all of the dances in a test. There is a solo track option available for those who wish to take ice dance tests without a partner. Figure skaters that pass the Senior Freeskiing, Senior Moves in the Field, Gold Dance, Senior Free Dance, Senior Pairs, and Adult Gold tests become U.S. Figure Skating Gold Medalists. Earning a U.S. Figure Skating test gold medal is a major achievement. Every American figure skater that the public sees competing at the World Figure Skating Championships and at the Olympics is a "Gold Medalist." U.S. Figure Skating issues figure skaters certificates and badges after passing tests. These certificates and badges are usually given to a skater through his or her figure skating club. The names of all skaters who have passed tests are listed on U.S. Figure Skating's website. Skaters may also purchase test medals and pins after passing U.S. Figure Skating tests. Ketones, or keto acids, are compounds produced by the liver as an alternative form of energy when the body is low on glucose (sugar). Three ketones—acetoacetate (AcAc), beta-hydroxybutyric acid (BB), and acetone—are produced in the liver from free fatty acids (FFAs). The body is constantly producing small amounts of ketones to use for energy when fasting or sleeping and during long periods of exercise. Ketosis occurs when ketone production is increased because of decreased carbohydrates and increased fatty acids. For example, people following a strict ketogenic diet (a very low carb diet) rely on ketones for energy. Verywell / Danie Drankwalter However, in people with certain health conditions, such as type 1 diabetes, high levels of ketones can result in diabetic ketoacidosis (DKA), a life-threatening condition if not treated right away. Learn more about ketone formation, testing for ketones, and what these levels mean. After fasting or following a very low carbohydrate diet for some time, the body is deprived of glucose and insulin levels are lowered, which forces the body to burn fat for fuel from ketones. As a result, an abundance of the molecule acetyl-CoA leads to the formation ketones—beta-hydroxybutyric acid, acetoacetate, and acetone—in a process known as ketogenesis. When the body is provided with enough carbohydrates or can utilize stored carbohydrates (from glycogen), it uses them to create glucose, the body's preferred energy source. This process is referred to as glycolysis and glycogenolysis. Glucose can also be created by a process called gluconeogenesis, which produces glucose from noncarbohydrate sources such as lactate. However, when the body is low on carbohydrates or glucose and does not have any in storage, it forms ketones to use as energy. Strictly limiting carbohydrate intake to less than 50 grams or even 20 to 30 grams per day and increasing fat intake to about 70% to 80% of total calories can cause ketone formation. The body is able to use ketones as fuel because ketones cross the blood-brain barrier (part of the central nervous system) and fatty acids do not. Ketones can also be created in people with diabetes for a variety of reasons. For example, ketones can form in people when blood sugars are elevated and they are lacking insulin (as in times of illness or missed insulin doses) or in people with normal blood sugars who are ill and take SGLT-2 inhibitors (prescription medications used to help lower blood sugar). People with diabetes are often prescribed ketone testing strips. Testing for ketones can be done with urine or blood tests. You can detect ketones in the blood before they reach the urine. Early detection and treatment of ketones in people with diabetes can reduce the risk of an emergency, therefore clinicians usually recommend a blood ketone meter, an at-home test kit. However, if you are monitoring your ketones for other reasons, or you cannot afford a blood ketone meter and test strips, you can also test for ketones through the urine. Results range from 0 (not detected) to +4 (high amount detected). If you are using an at-home testing kit, you will dip your test strip into your urine and compare the color to the color on the bottle. Typically, any color other than beige is an indication that there are ketones in your urine. Blood ketone meters are prescribed to people with diabetes to monitor their ketones levels accurately. A normal level of ketones is below 0.6 mmol/L. Any level higher than this indicates ketones are present. Ketone levels vary from person to person. For example, dietary intake, including carbohydrates, protein, and fat intake can influence ketone levels. Experts recommend regular ketone measurements to provide valuable feedback to personalize diets. Low levels of ketones in healthy individuals usually are not a problem, but elevated ketone levels in people with underlying health conditions, such as diabetes, can be very dangerous. High ketone levels are typically not a problem when inducing nutritional ketosis in healthy individuals, because insulin is able to regulate glucose levels and a normal pH level is maintained. However, high ketone levels in people with diabetes is a medical emergency as it can result in DKA. Experts suggest that the range of ketones present in DKA is fivefold to tenfold greater than the levels achieved during nutritional ketosis. DKA can present with symptoms such as increased thirst, fatigue, urination, stomach pain, fruity breath, rapid, shallow breathing, vomiting, and nausea. Nondiabetic ketoacidosis is another risk of having high ketone levels. Although this condition is rarely caused by low-carbohydrate diets, people with other health conditions or those who experience illness such as seasonal flu are at higher risk. The human body produces a small number of ketones after a period of not eating or fasting. This is not an indication that the body is utilizing ketones for fuel. However, in people with diabetes, low levels of ketones or trace amounts of ketones, with high glucose levels, may indicate that a person needs more insulin. For people following a ketogenic diet, levels of ketones can fluctuate depending on their dietary intake. If you are trying to establish a state of nutritional ketosis and are eating too much protein, protein will be metabolized into glucose and reduce ketone production. Discuss with your healthcare provider changes to your diet before starting any diet. People with type 1 diabetes, those with a history of disordered eating (abnormal eating behavior), and people who are pregnant or breastfeeding should avoid ketogenic diets. Ketones are formed as a source of energy when the body is low on glucose. In healthy individuals who do not have any issues with insulin function, nutritional ketosis is usually not a dangerous condition. However, in people with diabetes, the presence of ketones can increase the risk of DKA, which can be life-threatening if not treated. If you are looking to achieve a level of nutritional ketosis, you should know that the long-term effects of this diet are not well understood, and you may need additional nutritional support. If you are following a ketogenic diet to induce nutritional ketosis, you will want to know what your ketone levels are. In addition, if you have a medical condition such as diabetes or a neurological condition in which a ketogenic diet has been prescribed, you can manage your ketone levels by testing them in your urine or blood. Blood ketone meters are typically preferred. People with established diabetes should monitor their levels of ketones when blood sugars are elevated or if they are on an SGLT-2 inhibitor and are experiencing symptoms of DKA. If you have diabetes, make sure you have access to your medical team at any time of day. Frequently Asked Questions What will happen if my ketone levels are too high? If your ketone levels are too high and you have diabetes, you can develop diabetic ketoacidosis. If this condition is left untreated, it can be fatal. If you do not have diabetes and your ketone levels are too high your body will compensate and maintain homeostasis. The long-term effects of high ketone levels are not well understood, and more research is needed. Ketoacidosis occurs because of acidosis, meaning there is too much acid in bodily fluids. Ketoacidosis usually occurs in people with diabetes who rely on insulin to regulate their blood sugars, but it can also occur in periods of starvation. The ketogenic diet is not advised for people who are pregnant, lactating, or have type 1 diabetes. What do ketones smell like? Ketones are often said to smell fruity or like nail polish remover. This is because they contain acetone, which has a sweet odor.





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