

Hormone	<i>secreted from</i>	in response to	to act on	to cause
Gonadotropin-releasing hormone (GnRH)	<i>Hypothalamus</i>	puberty	Anterior Pituitary	secretion of FSH and LH
Growth Hormone-releasing hormone (GHRH)	<i>Hypothalamus</i>		Anterior Pituitary	secretion of GH
Thyroid-releasing hormone (TRH)	<i>Hypothalamus</i>		Anterior Pituitary	secretion of TSH
Corticotropin-releasing factor (CRF)	<i>Hypothalamus</i>		Anterior Pituitary	secretion of ACTH
Prolactin-inhibiting factor (PIF) aka dopamine	<i>Hypothalamus</i>	Always	Anterior Pituitary	inhibition of prolactin secretion
Follicle Stimulating Hormone (FSH)	<i>Anterior Pituitary</i>	GnRH	Gonads	
Luteinizing Hormone (LH)	<i>Anterior Pituitary</i>	GnRH	Gonads	
Growth Hormone (GH)	<i>Anterior Pituitary</i>	GHRH	Muscles and Bones	Growth, raises blood glucose
Thyroid-stimulating hormone (TSH)	<i>Anterior Pituitary</i>	TRH	Thyroid	secretion of T3 and T4
Adrenocorticotrophic Hormone (ACTH)	<i>Anterior Pituitary</i>	CRF	Adrenal Cortex	secretion of cortisol
Prolactin	<i>Anterior Pituitary</i>	Decreased PIF or Dopamine	breasts	milk production and secretion
Endorphins	<i>Anterior Pituitary</i>			Decrease sensation of pain, euphoria
Antidiuretic hormone (ADH, vasopressin)	<i>Posterior pituitary</i>	High Blood Osmolarity	Kidneys	increased water reabsorption by increasing permeability of collecting duct. Lowers blood osmolarity by increasing blood volume. Often increases blood pressure. Release is inhibited by alcohol and caffeine.
Oxytocin	<i>Posterior pituitary</i>		Uterus	Uteral Contractions, Pleasure feelings
Calcitonin	<i>Thyroid C cells (parafollicular cells)</i>			Decrease blood calcium concentration
Parathyroid Hormone (PTH)	<i>Parathyroids</i>			Increases blood calcium concentration by promoting resorbtion of calcium into blood from the bones. Activates Vitamin D and Osteoclasts.
Glucagon	<i>Pancreas α-cells</i>	Low Blood Sugar	Blood	Breaking down glycogen and inhibiting protein production to increase blood sugar. Causes feeling of hunger. Promotes glyconeogenesis. Releases fatty acids from Adipose cells into the blood stream.
Insulin	<i>Pancreas β-cells</i>	High Blood Sugar	Blood	Facilitate storage of glucose into glycogen to lower blood sugar.
Somatostatin	<i>Pancreas δ-cells</i>			Inhibits both Insulin and Glucagon
Aldosterone	<i>Adrenal Cortex</i>	Angiotensin II	Distal Convolved Tubule, Collecting Duct	Increased sodium reabsorption in the distal convoluted tubule and collecting duct, also pulling water into the blood stream, increasing blood volume/blood pressure. Also increase potassium and H ⁺ excretion. Does not change blood osmolality, unlike ADH.
Estrogen	<i>Adrenal Cortex</i>			

Progesterone	<i>Adrenal Cortex</i>			
Testosterone	<i>Adrenal Cortex</i>			
Epinephrine	<i>Adrenal Medulla</i>		Liver, Muscle	Promotes glycogenolysis in liver to increase blood sugar, and glycogenolysis in muscles to increase muscle glucose. Increases basal metabolism in target organs like the heart
Norepinephrine	<i>Adrenal Medulla</i>		Liver, Muscle	Promotes glycogenolysis in liver to increase blood sugar, and glycogenolysis in muscles to increase muscle glucose. Excess is thought to lead to Mania. Not enough leads to depression.
Thyroxine (T4)	<i>Thyroid</i>	TSH	Small Intestine, Blood	Slower, longer lasting effects on metabolism. Clear cholesterol from plasma and increase glucose absorption from small intestine.
Glucocorticoids	<i>Adrenal Cortex</i>	Stress (exercise, cold, emotional)	Blood	Stimulates fight or flight response by rapidly mobilizing glucose from the liver into the blood stream
Triiodothyronine (T3)	<i>Thyroid</i>	TSH	Small Intestine, Blood	Rapid, shorter duration effects on metabolism. Derived from T4 via deiodonases. Clear cholesterol from plasma and increase glucose absorption from small intestine.
Ghrelin	<i>Stomach</i>	Knowing a meal is coming		Increases appetite. Stimulates release of Orexin
Orexin		Ghrelin, hypoglycemia		Increases appetite and alertness
Leptin	<i>Fat Cells</i>		Orexin	Decrease appetite by suppressing orexin production
Secretin	<i>Duodenum</i>		Pancreous	Pancreatic Enzyme Release into Duodenum. Regulates pH by inhibiting HCl secretion from parietal cells and increasing bicarbonate secretion from pancreas. Slows motility through digestive tract to allow digestive enzymes to act on chyme.
Cholecystokinin (CCK)	<i>Duodenum</i>	Amino Acids and Fat in Chyme as it enters duodenum	Pancreous, Brain	Stimulates release of bile and pancreatic juices. Promotes satiety in brain.

Dissociative Disorders	depersonalization	Individuals feel detached from their own mind and body. E.g. out of body experience.
Dissociative Disorders	derealization	Individuals feel detached from their surroundings. E.g. world is dreamlike or insubstantial
Dissociative Disorders	Dissociative Amnesia	Amnesia not due to a neurological disorder. Inability to recall past experiences
Dissociative Disorders	Dissociative Identity Disorder	Multiple personality disorder, where 2+ personalities recurrently take control of a person's behavior. Usually results from severe abuse as a child
Trauma and Stressor Disorders	Posttraumatic stress disorder (PTSD)	Occurs after experiencing or witnessing traumatic event. Consists of following symptoms for at least one month (else called Acute Stress Disorder)

		Intrusion: Reliving events including flashbacks or nightmares Avoidance: Deliberate attempt to avoid people, places, objects, or actions associated with trauma Negative Cognitive: Inability to recall key features of the event, moody, distant, negative view of world Arousal: Easily startled, irritable, anxious, reckless behavior, insomnia
Somatic Symptom Disorders	Somatic Symptom Disorder	Individual is experiencing symptoms and is disproportionately concerned about it, devotes a ton of time and energy to it, or is overly anxious about it. Symptoms may or may not be related to underlying medical condition
Somatic Symptom Disorders	Illness Anxiety Disorder	Like Somatic Symptom Disorder, but without the symptoms. Individuals are consumed with the idea of having or developing a serious medical condition. Can obsessively check themselves for illness, or avoid medical appointments altogether.
Somatic Symptom Disorders	Conversion Disorder	Unexplained symptoms affecting voluntary motor or sensory functions, usually after traumatic event. E.g. sudden blindness or paralysis with no evidence of neurological damage
Personality Disorders	ego-syntonic	Individual perceives behavior as correct, normal, or in harmony with goals. E.g. thinking everyone else is wrong when they say you have a problem
Personality Disorders	Cluster A personality disorders	Paranoid, schizotypal, and schizoid disorders. Considered odd or eccentric behavior. Weird.
Personality Disorders	Cluster B personality disorders	Antisocial, borderline, histrionic, and narcissistic. Overly dramatic and emotional behavior. Wild.
Personality Disorders	Cluster C personality disorders	Avoidant, dependent, and obsessive-compulsive. Anxious or fearful behavior. Worried
Personality Disorders	Antisocial Personality Disorder	Disregard for rights of others. Repeated illegal acts, deceitfulness, aggressiveness, or lack of remorse for bad actions. More common in males than females. E.g. show no guilt for serious crime such as murder
Personality Disorders	Borderline Personality Disorder	Unstable behavior, mood, and self image. Often intense and unstable relationships. Intense fear of abandonment. Use "splitting" as a defense mechanism where others are either pure good or evil. Suicide attempts and self-mutilation are common. Twice as common in females.
Personality Disorders	Histrionic Personality Disorder	Attention seeker. Drama queen. May use seductive behavior to gain attention.
Personality Disorders	Narcissistic Personality Disorder	Sense of grandeur, preoccupied with fantasies of own success, need for constant attention and admiration. Entitled. Very fragile self esteem and concerned with how others view them.
Personality Disorders	Paranoid Personality Disorder	Constant distrust of others. Constantly suspicious of other's motives. May be in prodromal phase of schizophrenia.
Personality Disorders	Schizotypal Personality Disorder	Odd or eccentric thinking. Have ideas of reference (everything is directed towards them...everything has a meaning in their own life somehow. There are no coincidences) as well as magical thinking
Personality Disorders	Schizoid Personality Disorder	Detachment from social relationships, restricted emotional expression. Little desire for socializing. Don't have close friends, poor social skills.
Personality Disorders	Avoidant Personality Disorder	Extreme shyness and fear of rejection. See oneself as socially inept and isolated. Intense desire for social affection and acceptance. Tend to stay in the same job, life situation, and relationships despite wanting to change
Personality Disorders	Dependent Personality Disorder	Need continuous reassurance. Emotionally dependent on one specific person, such as parent or significant other
Personality Disorders	Obsessive Compulsive Personality Disorder	Perfectionistic and inflexible. Likes rules and order. Stubborn, routine, no desire to change. NOT OCD. OCD is ego-dystonic (Must wash hands because of germs) while OCPD is ego-syntonic (I like rules and order). OCPD is lifelong.
Schizophrenia	Schizophrenia	Suffer from delusions, hallucinations, disorganized thought, disorganized behavior, catatonia, and/or negative symptoms for more than 6 months. Thought to be related to excess dopamine in the brain. Active symptoms generally preceded by Prodromal Phase, or phase of clearly deteriorating behavior with passive symptoms. Partially genetically inherited.

Nervous System Disorders	Alzheimer's Disease	<p>Dementia characterized by gradual memory loss, disorientation to time and place, problems with abstract thought, and tendency to misplace things. Late stages include changes in mood, personality, poor judgement, loss of initiative, loss of procedural memory. Genetically linked.</p> <p>Biological Markers:</p> <ul style="list-style-type: none"> - Diffuse Atrophy in brain CT/MRI - Flattened Sulci in cerebral cortex - Enlarged cerebral ventricles - Deficient blood flow in parietal lobes - Low Acetylcholine levels - Low choline acetyltransferase enzyme - Low metabolism in temporal and parietal lobes - B-amyloid plaques (senile plaques) - Neurofibrillar Tangles or hyperphosphorylated tau protein
Nervous System Disorders	Parkinson's Disease	<p>Damage to dopaminergic neurons in substantia nigra for proper stimulation of the basal ganglia.</p> <p>Symptoms:</p> <ul style="list-style-type: none"> - Slow Movement - Resting Tremor - Pill-rolling tremor (rolling fingers and thumbs together like you're making a tiny ball of clay) - mask-like facial expressions - Shuffling gait - Cogwheel rigidity (muscle tension that intermittently halts movement)
Depressive Disorders	Major Depressive Disorder	<p>At least one major depressive episode which causes significant distress or impairment of functioning.</p> <p>Biological Markers:</p> <ul style="list-style-type: none"> - High glucose metabolism in amygdala - hippocampal atrophy - high levels of glucocorticoids (cortisol) - decreased norepinephrine, serotonin, and dopamine (monoamine theory of depression)
Depressive Disorders	Major depressive Episode	<p>APES & CIGS. At least 5 of the following symptoms must be met for at least two weeks</p> <ul style="list-style-type: none"> - Appetite disturbances, massive weight gain or loss - Psychomotor Symptoms, feeling "slowed down" - Energy, low energy, always feeling tired - Sleep disturbances - Concentration difficulty - Interest loss. Anhedonia: formerly enjoyable things are no longer interesting - Guilty and worthless feelings - Suicidal thoughts or actions
Depressive Disorders	Seasonal Affective Disorder (SAD)	<p>Major Depressive Disorder with a seasonal onset (winter months). May be related to abnormal melatonin metabolism and is often treated with bright light therapy, where patient is exposed to a bright light for a period of time each day.</p>
Depressive Disorders	Dysthymia	<p>Depressed mood that isn't severe enough to meet criteria for a Major Depressive Episode.</p>

Depressive Disorders	Persistent Depressive Disorder	Suffering from Dysthymia for a long period of time, generally for at least two years. May have occasional major depressive episodes.
Schizophrenia	Avolition	Decreased engagement in purposeful, goal directed actions. A possible negative symptom of schizophrenia. E.g. Laziness
Bipolar Disorder	Bipolar I Disorder	Manic Episodes with or without Major Depressive Episodes
Bipolar Disorder	Bipolar II Disorder	Hypomania with Major Depressive Episodes
Bipolar Disorder	Hypomania	Energetic and optimistic, but typically doesn't impair functioning or have psychotic features
Bipolar Disorder	Cyclothymic Disorder	Cycling between hypomania and dysthymia
Bipolar Disorder	Manic Episodes	DIG FAST. At least 3 of the following symptoms must be met for at least one week along with a persistently elevated mood. <ul style="list-style-type: none"> - Distracted easily - Insomnia - Grandiosity - Flight of Ideas (racing thoughts, fast thinkings) - Agitated easily - Speech (Pressured, increased talkativeness) - Thoughtlessness, or high risk behavior
Group Psychology	Michelangelo Phenomenon	Interdependent individuals influence and "sculpt" each other to become closer to their ideal selves. Opposite of Blueberry Phenomenon.
Group Psychology	Blueberry Phenomenon	Interdependent individuals bring out the worst in each other.
Social Action	Social Action	Actions and behaviors of an individual who is conscious of performing the action because others are around. Eg. Behavior based on environment
Social Action	Social Facilitation	Person performing better on simple tasks when in the presence of others.
Social Action	Yerks-Dodson Law of Social Facilitation	Performance of simple tasks is enhanced with increased arousal (e.g. being in the presence of others) and complex tasks are hindered with increased arousal.
Social Action	Deindividuation	Being in the presence of a large group provides anonymity and causes a loss of individual identity, which can dramatically change behavior. May lead to antinormative behavior such as violence during a riot.
Social Action	Antinormative Behavior	Behavior against the norm.
Social Action	Bystander Effect	Individuals do not intervene to help victims when others are present. The more people who are standing by, the less likely someone is to help. This is attributed to social cues. If no one seems alarmed of emergency, then individual is less likely to think that there is an emergency. <p>In low danger scenarios, bystanders less likely to intervene. In high danger scenarios, bystanders are more likely to intervene.</p> <p>A group made up of strangers has a slower response to emergency than a group of friends or well acquainted individuals</p>
Social Action	Social Loafing	Tendency of individual to put in less effort when in a group setting than they would individually.
Social Action	Peer Pressure	Social influence placed on an individual by others to modify or continue certain behavior, attitudes, or beliefs.
Social Action	Identity Shift Effect	When an individual is threatened by social rejection, individual conforms to norms of the group. This causes internal conflict within the individual, so he/she will undergo an identity shift where he/she adopts the standards of the group as his/her own.

Social Action	Cognitive Dissonance	Simultaneous presence of two opposing thoughts or opinions. Usually leads to internal discomfort which may manifest as anxiety, fear, anger, or confusion.
Social Action	Asch Conformity Experiment	Performed by Solomon Asch. Participants were given a card with a line on it along with a reference card with three lines of different sizes. They had to unanimously decide which line matched the length of the first card, and participants were told to team up against one group member with the wrong answer. Peer pressure to choose an incorrectly sized line caused individuals to provide an answer they knew to be untrue because it avoided going against the group.
Group Process	Social Interaction	Explores the ways in which 2+ individuals can both shape each other's behavior.
Group Process	Group Polarization	Tendency for groups to make decisions that are more extreme than the individual ideas and inclinations of the members within the group. Also called "Choice Shift".
Group Process	Groupthink	Phenomenon where desire for harmony or conformity results in a group coming to an incorrect or poor decision. Desire to agree with group causes a loss of independent critical thinking.
Group Process	Irving Janis	Studied effects of extreme stress on group cohesiveness including disastrous American foreign policy decisions. Examined 8 factors indicative of groupthink: <ul style="list-style-type: none"> - Illusion of invulnerability, optimistic and encouraging risk taking - Collective Rationalization, ignoring warnings against idea of the group - Illusion of morality, belief the group's decisions are morally correct - Excessive stereotyping, construction of stereotypes against outside opinions - Pressure for conformity, viewing opposing arguments as disloyal to the group - Self-censorship, the withholding of opposing views - Illusion of unanimity, false sense of agreement within the group - Mindguards, appointment of members to the role of protecting against opposing views
Culture	Culture	Beliefs, behaviors, actions, and characteristics of a group or society of people. Learned by living within a society, observing behaviors and traits, then adopting them.
Culture	Assimilation	Process by which an individual's or group's behavior and culture begin to resemble that of another group. In terms of migrant assimilation, there are four primary factors to assess completeness of assimilation: socioeconomic status, geographic distribution, language attainment, and intermarriage
Culture	Ethnic Enclaves	Slow assimilation. Locations with high concentrations of a specific ethnicity (Chinatown, Little Italy)
Culture	Multiculturalism	Communities or societies containing multiple cultures. "Cultural Mosaic" compared to assimilation being a "melting pot".
Culture	Subcultures	Groups of people within a culture that distinguish themselves from the primary culture from which they belong. Can be formed based off of race, gender, ethnicity, sexuality, etc. Subcultures can be perceived as negative if they begin to disagree with the primary culture, which can lead to counterculture.
Culture	Counterculture	A subculture that directly opposes the majority culture and deliberately opposes primary cultural norms.
Socialization	Socialization	Process of developing, inheriting, and spreading norms, customs, and beliefs. <ul style="list-style-type: none"> - Primary Socialization: During childhood, when we initially learn norms, primarily through parents. - Secondary Socialization: Learning appropriate behavior within smaller sections of the larger society, outside the home. E.g. learning how to act at school.
Socialization	Cultural Diffusion	The spread of cultural norms, customs, and beliefs throughout the culture
Socialization	Cultural Learning	AKA Cultural Transmission: the manner in which society socializes its members

Socialization	Anticipatory Socialization	Process by which a person prepares for future changes (occupations, living situations, relationships)
Socialization	Resocialization	Where one discards old behaviors in favor of new ones to make a life change. E.g. Training military personnel to obey orders
Norms	Mores	Widely observed social norms
Norms	Taboo	Socially unacceptable, disgusting, or reprehensible
Norms	Folkways	Social behavior that is considered polite in particular social interactions, e.g. shaking hands after a sports match.
Socialization	Agent of Socialization	Influencing factor that affects socialization. Includes family, peers, religion, ethnicity, workplace, mass media, school, government, geographical location, etc.
Deviance and Stigma	Stigma	Extreme disapproval or dislike of a person or group based on perceived differences from the rest of society. E.g. stigma against fat people or dwarfs.
Deviance and Stigma	Labeling Theory	Theory that labels given to people affect how others respond to that person as well as their own self-image. This can lead to behavior conforming with society, or deviating from it.
Deviance and Stigma	Differential Association Theory	The degree to which one is surrounded by ideals that adhere to social norms vs ideals that go against them. Says that spending time with a lot of people engaging in antinormative behavior leads to the individual being more likely to engage in said behaviors.
Deviance and Stigma	Strain Theory	Says that deviance is a natural reaction to the inability to achieve a normative social goal while staying within a limiting social structure. Therefore, deviance is a behavior that aims at achieving a socially desirable goal using antinormative behavior.
Deviance and Stigma	Deviance	Violation of the norms, rules, or expectations within a society. Functionalists believe that deviance is necessary in a society in order to establish clear perception of social norms and acceptable boundaries, encourage unity within a society, and promote social change.
Conformity	Normative Conformity	Desire to fit into a group because of fear of rejection
Conformity	Internalization	Outwardly agreeing to conform while also inwardly agreeing with the ideas of the group
Conformity	Identification	Outwardly agreeing to conform while not personally accepting the ideas.
Conformity	Philip Zimbardo	Directed the Stanford Prison Experiment to study conformity. Prisoners and Guards both conformed to roles of being submissive and abusive respectively. When interviewed afterwards, they were shocked at their behavior.
Obedience	Stanley Milgram	Obedience experiment with the teacher and learner, and electricuting the learner. The teachers would increasingly shock the patients and hurt them, even at their screams in agony and requests to stop the experiment, because the person running the experiment told them to with demanding language. Milgram was surprised at the level of obedience that was shown. Were able to get 65% of participants to administer maximum shocks of 450 V. Repeated tests have shown at least 60% of people will obey even if they do not wish to continue.
Attitudes and Behavior	Social Cognition	Ways in which people think about others and how these ideas impact behavior.
Attitudes and Behavior	Affective Component of Attitude	The way a person feels towards something. Emotional component of attitude.
Attitudes and Behavior	Behavioral Component of Attitude	The way a person acts with respect to something.
Attitudes and Behavior	Cognitive Component of Attitude	The way a person thinks about something. Often a justification for the other two components. E.g. Knowing that snakes can be dangerous provides reason for a person to be afraid (affective component) and avoids them (behavioral component)
Attitudes and Behavior	Functional Attitudes Theory	States that attitudes serve four functions: Knowledge, ego expression, adaptation, and ego defense.

		<p>Knowledge: Knowing attitudes of others helps predict their behavior</p> <p>Ego Expression: Allows one to communicate and express feelings to solidify self-identity</p> <p>Adaptive: To be accepted socially, one must have the right attitudes about the right things</p> <p>Ego-defensive: Allow one to justify actions that we know are wrong (e.g. developing bad attitude towards math because you aren't good at it)</p>
Attitudes and Behavior	Learning Theory	Attitudes are developed through different forms of learning (observational, classical conditioning, operant conditioning, etc). E.g. attitude towards candy after tasting it and learning its sweet.
Attitudes and Behavior	Elaboration Likelihood Model	Separates individuals on a continuum based on their processing of persuasive information from those that think deeply about a situation (Central Route Processing) to those who focus on superficial details such as appearance or catchphrases (peripheral route processing). Where they fall on the continuum dictates how they will approach new information and the possibility of it to cause an attitude change. Going through Central Route Processing leads to greater solidification of attitude, if accepted.
Attitudes and Behavior	Social Cognitive Theory	People learn how to behave and shape attitudes by observing the behavior of others, influences of personal factors, and the environment. These three factors are related and constantly affecting each other. Supported by Albert Bandura
Elements of Social Interaction	Ascribed Status	Status that is given involuntarily such as race, ethnicity, gender, background, etc.
Elements of Social Interaction	Achieved Status	Status gained as a result of one's efforts or choices such as being a doctor.
Elements of Social Interaction	Master Status	Status by which a person is most identified. Typically the most important status one holds and affects all aspects of that person's life. This may lead to pigeonholing, where outsiders only view person through lens of master status without regard to other characteristics.
Elements of Social Interaction	Role Conflict vs Role Strain	<p>Role Conflict is difficulty in satisfying requirements and expectations of multiple roles (Being a doctor, a father, and a husband)</p> <p>Role strain is difficulty to satisfy multiple requirements for the same role (Buy diapers, change diapers, potty train, feed, stop from crying)</p>
Elements of Social Interaction	Role Exit	Dropping of one role in favor of another, usually due to role conflict.
Elements of Social Interaction	Primary Groups vs Secondary Groups	<p>Primary Groups: Direct interactions with close bonds that tend to last long periods of time, such as family or close group of friends.</p> <p>Secondary Groups: Interactions are superficial with few emotional bonds. Form and dissolve with out any special significance, e.g. classmates working on a group project.</p>
Elements of Social Interaction	Gemeinschaft	Means Community: Groups that are unified by feelings of togetherness due to shared beliefs, ancestry, or geography, like families or neighborhoods.
Elements of Social Interaction	Gesellschaft	Means Society: groups formed due to mutual self-interests working together towards the same goal, such as a company
Elements of Social Interaction	System for Multiple Level Observation of Groups (SYMLOG)	<p>Developed in the 1970s from the technique "Interaction Process Analysis". It believes that there are three dimensions of interactions:</p> <p>Dominance vs Submission</p> <p>Friendliness vs Unfriendliness</p> <p>Instrumentally Controlled vs Emotionally Expressive</p>
Elements of Social Interaction	Group conformity	Individuals are compliant with the group's goals, even when the group's goals may be in direct contrast to the individual's goal. Conform in an attempt to fit in and be accepted by the group.

Elements of Social Interaction	Characteristic Institution	The basic organization of society, today is found in Bureaucracy.
Elements of Social Interaction	Bureaucracy	Rational system of political organization, administration, discipline, and control. Usually slow to change and less efficient than other organizations. Setup is basically like every corporation in America.
Elements of Social Interaction	Iron Law of Oligarchy	States that democratic and bureaucratic systems naturally shift to being ruled by an elite group.
Elements of Social Interaction	McDonaldization	Refers to a shift in focus towards efficiency, predictability, calculability, and control in societies.
Expressing and Detecting Emotions	Basic Model of Emotional Expression	Established by Charles Darwin. States that emotional expression is universal, thus it is an evolutionary trait.
Expressing and Detecting Emotions	Appraisal Model	Says there are biologically predetermined expressions once an emotion is experienced, but there is a cognitive precursor to emotional expression.
Expressing and Detecting Emotions	Social Construction Model	Assumes there is no biological basis for emotions, but emotions are based on experiences and situational context alone. One must be familiar with social norms for a certain emotion to perform the corresponding emotional behaviors in a given social situation.
Expressing and Detecting Emotions	Display Rules	Cultural expectations of emotions.
Expressing and Detecting Emotions	Cultural Syndrome	Shared set of beliefs, attitudes, norms, values, and behaviors among members of the same culture that are organized around a central theme. Influence display rules.
Impression Management	Impression Management	Attempt to influence how others perceive us. Also called Self-Presentation.
Impression Management	Authentic Self	Who we actually are, both positive and negative.
Impression Management	Ideal Self	Who we would like to be under ideal circumstances.
Impression Management	Tactical Self	Who we market ourselves to be when we adhere to others' expectations of us. Similar to the ought self.
Impression Management	Self-Disclosure	Impression management strategy. Giving information about oneself to establish an identity
Impression Management	Managing Appearances	Impression management strategy. Using props, appearance, emotional expression, or associations with others to create a positive image.
Impression Management	Ingratiation	Impression management strategy. Using flattery or conforming to expectations to win someone over.
Impression Management	Aligning Actions	Impression management strategy. Making questionable behavior acceptable through excuses.
Impression Management	Alter-casting	Impression management strategy. Imposing an identity onto another person. E.g. "As a good person, you need to ____" where one assigns you the identity of being a good person.
Impression Management	Dramaturgical Approach	Erving Goffman's description of impression management through the use of the metaphor that individuals are actors in a theatrical performance and creating images for themselves in various situations.
Impression Management	Front Stage Self	Actor is in front of the audience, performing according to the setting, role, and script in order to conform to the image he wants others to see.
Impression Management	Back Stage Self	Actor is not being observed and he is free to act in ways that may not be congruent with his desired public image.

People	Theory	Language	Of Behavior	Of Personality	Of Attitudes	of Society
	Functional Theory				Attitudes serve four functions: Knowledge, ego expression, adaptation, and ego defense.	Deviance from norms is necessary to establish firm boundaries within a society, promote unity, or even social change.
B.F. Skinner	Behavioral Theory	AKA "Learning Theory". Children aren't born with anything, they only acquire language through operant conditioning. Reinforcement comes from parent's smiling and excitement when baby says "Mama"		Personality is learned through Operant Conditioning. The environment influences behavior. Token economies act as a good therapy to change personality.		
Noam Chomsky	Biological Theory	Language is innate. Born with Language Acquisition Device (LAD) that is active during the "critical period" from birth to age 8-9 years old. LAD specializes for your language once you start using it. States that all languages share a universal grammar with basic elements like nouns, verbs, etc.		Personality traits are related to genes and genetics.		
Vygotsky	Social Cognitive Theory/Interactionist Approach	Biological and social factors have to interact. Children's desire to communicate with others, such as adults in their life, motivates them to learn language.		Interactions with environment dictate personality. Locus of control is considered very influential: does a person feel in control of his or her environment or not? Past behavior in similar situations is a strong predictor of future behavior.	People learn how to behave and shape attitudes by observing the behaviors of others. Three factors: Behavioral, environmental, and personal. All reciprocate and affect one another to develop attitude. For example: Work ethic (behavior) is affected by colleagues work ethic and their previous attitudes towards work (personal) as well as the systems and infrastructure	

					of the company (environmental). Reciprically, this behavior may change the employee's attitude towards work (personal) and the systems within the company (environment)	
Sigmund Freud, Carl Jung, Karen Horney, Myers-Briggs	Psychoanalytic Theory				Subconscious dominates personality with the id, ego, and superego (according to Freud).	
Gesalt, Maslow, George Kelly, Carl Rogers	Humanistic Theory				Holistic View of personality. A person is not broken down into traits or specific parts, but should be approached from a holisting perspective. Look at past experiences of person, the sum of multiple influences such as environment.	

<i>Respiratory</i>	Mast Cells	Immune cells in lungs covered with antibodies. Release inflammatory chemicals upon antigen binding to promote immune response. Responsible for respiratory allergic reactions due to reactions with things like pollen and molds.
<i>Immune</i>	Lysozyme	Enzyme able to attack petidoglycan walls of gram positive bacteria. Found in nasal cavity, tears, and saliva
<i>Respiratory</i>	Bicarbonate Buffer System	Mechanism where respiratory system controls blood pH via controlling carbondioxide concentrations. Less CO2 in blood = More Basic = Body responds with slower breathing to retain CO2. More CO2 in blood = More Acidic = Body increases breathing rate to remove CO2. Hyperventilation decreases CO2 levels in blood, making blood more basic. Body responds with trying to slow breathing rate.
<i>Respiratory</i>	Intercostal Muscles	Layers of muscles between ribs. External Intercostal Muscles contract upon inhalation to pull ribcage up and expand intrathoracic volume (chest cavity volume). Internal Intercostal Muscles contract upon forced exhalation only.
<i>Respiratory</i>	Surfactant	Detergeny covering alveoli to reduce surface tension and prevent alveolus from collapsing on itself. Premature babies do not have surfactant.
<i>Cardiovascular</i>	LAB RAT	Left Atrium = Bicuspid Valve (Mitral Valve), Right Atrium, Tricuspid Valve. Could also remember LAMB RAT to associate the mitral valve = bicuspid valve.
<i>Cardiovascular</i>	Intercalated Discs	Connect muscle cells in the myocardium of the heart. Contain many gap junctions to connect the cytoplasm of adjacent cells and allowing for quicker signal propogation and coordinated ventricular contraction.
	Vagus Nerve	Mostly Parasympathetic Nerve that slows down heart rate when activated. Originates in Medulla Oblongata.
<i>Nervous</i>	Medulla Oblongata	Below the pons. Connects brain to spinal chord.

<i>Cardiovascular</i>	Portal Systems	Transport systems where blood traveling through these systems goes through two capillary beds in series before returning to the heart. The three portal systems are the Hepatic (Gut -> liver), hypophyseal (Hypothalamus -> anterior pituitary), and renal (glomerulus -> vasa recta).
<i>Cardiovascular</i>	Hematocrit	Measure of how many Red Blood Cells are in blood, given as a percentage of total cells in blood.
<i>Renal System</i>	Kidney	Secretes erythropoietin to stimulate red blood cell development and thrombopoietin which stimulates platelet development.
<i>Cardiovascular</i>	Hematopoietic Stem Cell	Stem cell which can differentiate to create Red Blood Cells, White Blood Cells, and Platelets.
<i>Cardiovascular</i>	Rh Factor	Surface Protein expressed in red blood cells in the presence of allele called D. Leads to (+) or (-) blood type classifications. Dominant allele.
<i>Cardiovascular</i>	Bohr Effect	Shifting of oxyhemoglobin curve to the right. Can be due to decreased pH and increasing the H ⁺ concentration in the blood. H ⁺ binds to hemoglobin allosterically and reduces affinity for oxygen. This allows more oxygen to be delivered to tissues. Decreased pH can be caused by increased CO ₂ and lactic acid in blood. Right shift of curve can also be caused by increased temperature, and 2,3-bisphosphoglycerate (2,3-BPG) in
<i>Cardiovascular</i>	Fetal Hemoglobin	(HbF) has higher affinity for oxygen than adult hemoglobin (HbA) in order to pull oxygen from mother's hemoglobin and onto fetal hemoglobin. Results in left shifted oxyhemoglobin dissociation curve
<i>Immune</i>	Humoral Immunity	Division of adaptive immunity that includes antibodies and B-cells which act within the blood rather than within cells.
<i>Immune</i>	Thymus	Gland that matures T-cells. Located between the lungs, just above the heart.
<i>Immune</i>	Complement	Proteins that nonspecifically will punch holes in the cell membranes of bacteria, making them osmotically unstable. Can use the classical pathway which requires antibody binding, or alternative pathway which doesn't)
<i>Immune</i>	Interferon	Proteins produced by cell upon viral infection to block cellular and viral protein production. Decrease permeability of cell membrane and upregulate MHC class 1 and class 2 molecules on cell surface to signal immune system. Responsible for malaise, tiredness, muscle soreness, and fever during viral infections.
<i>Immune</i>	Major Histocompatibility Complex	(MHC) binds to pathogenic peptides (antigens) and carries it to cell surface where it can be recognized by other immune cells. Produced by virally infected cells via interferons. Also produced by macrophages. MHC-1 is produced by all cells and carries many proteins to cell surface. When foreign proteins are presented, immune cells know that the presenting cell is infected and needs to be destroyed. Called endogenous pathway. MHC-2 mainly displayed by professional antigen presenting cells like macrophages, dendritic cells, and some B-cells. Takes antigens from environment, processes them inside the cell, then displays them. Called exogenous pathway.
<i>Immune</i>	Pattern recognition receptors	(PRR) able to recognize category of invaders (bacteria, virus, fungus, parasite) in order to initiate appropriate cytokine response. These receptors are presented on macrophages and dendritic cells.
<i>Immune</i>	Natural Killer Cells	Detect and destroy cells with downregulated MHC. Includes cancer cells and some virally infected cells
<i>Immune</i>	Neutrophils	Most populous leukocyte in blood. Short lived (5 days). Dead neutrophils are responsible for formation of pus. Follow bacteria via chemotaxis and phagocytize them. Can also destroy opsonized cells.
<i>Immune</i>	Eosinophils	Release large amounts of histamine upon activation for inflammation. Contain bright, red-orange granules.
<i>Immune</i>	Histamine	Released by Eosinophils and Basophils. Cause inflammation by inducing vasodilation and increased leakiness of blood vessels so additional immune cells can enter tissue.
<i>Immune</i>	Basophils	Have large, purple granules. Least populous leukocyte. Produce large amount of histamine in response to allergens. Closely related to mast cells.
<i>Immune</i>		
<i>Endocrine</i>	Islets of Langerhans	Pancreatic bundles of cells that release hormones. Include alpha, beta, and delta cells, which release glucagon, insulin, and somatostatin respectively.
<i>Digestive</i>	Mastication	Chewing: mechanical breakdown of food into smaller particles to increase surface area for enzymatic digestion and lessen risk of obstruction of digestive tract

<i>Digestive</i>	Salivary Amylase (ptyalin)	Enzyme in saliva capable of hydrolyzing starch into smaller sugars.
<i>Digestive</i>	Lipase	Enzyme in saliva that catalyzes the hydrolysis of lipids.
<i>Digestive</i>	Epiglottis	Cartilaginous structure that folds down to cover larynx during swallowing, so food doesn't enter and lead to choking.
<i>Digestive</i>	Peristalsis	Involuntary, rhythmic contraction of smooth muscle that propels food down digestive tract. Can be reversed during emesis (vomiting) to move contents from the stomach, out the mouth.
<i>Digestive</i>	Stomach Anatomy	Consists of the Fundus (top), Body (middle), Pylorus (bottom), and Antrum (exit). Lesser curvature is the inside curve, Greater Curvature is the outside curve. Rugae is the internal, folded lining of the stomach.
<i>Digestive</i>	Gastric Glands	Dominant glands in the Fundus and Body. Stimulated by the Vagus Nerve of the Parasympathetic Nervous System. Contain three main cell types: Mucous Cells, Chief Cells, and Parietal Cells.
<i>Digestive</i>	Mucous Cells	Produce bicarbonate-rich mucous that protects the muscular walls of the stomach from the harshly acidic and proteolytic environment.
<i>Digestive</i>	Chief Cells	Secrete pepsinogen in the stomach, the inactivated form of pepsin.
<i>Digestive</i>	Parietal Cells	Secrete hydrochloric acid into the stomach to lower the pH and cleave pepsinogen into pepsin. Low pH also helps kill most harmful bacteria and denature proteins and break down some intramolecular bonds that hold food together. Parietal cells also secrete intrinsic factor.
<i>Digestive</i>	Pepsin	Enzyme produced from pepsinogen being cleaved by hydrogen ions in the stomach. Cleaves peptide bonds near aromatic amino acids, resulting in short, peptide fragments. Uniquely most active at low pH.
<i>Digestive</i>	Intrinsic Factor	Glycoprotein secreted by the parietal cells in the gastric glands in the stomach. Involved in the proper absorption of vitamin B12
<i>Digestive</i>	Pyloric Glands	Dominant glands in the Antrum and Pylorus sections of the stomach. Contain G-cells that secrete gastrin.
<i>Digestive</i>	G-Cells	Cells in the pyloric glands of the stomach that secrete Gastrin
<i>Digestive</i>	Gastrin	Peptide Hormone that induces the parietal cells in the stomach to secrete more HCl and also signals the stomach to contract. Secreted by G-cells
<i>Digestive</i>	Chyme	Acidic, semifluid mixture in the stomach resulting from the digestion of solid food.
<i>Digestive</i>	Pyloric Sphincter	Sphincter that controls movement of chyme from the stomach to duodenum
<i>Digestive</i>	Small Intestine	Responsible for continued digestion and absorption of nutrients. Approximately 7 meters long. Consists of three segments: Duodenum, Jejunum, and Ileum. The majority of chemical digestion takes place in the duodenum while the majority of absorption takes place in the jejunum and ileum.
<i>Digestive</i>	Duodenum	Site of chemical digestion in the small intestine. Releases tons of enzymes such as brush border enzymes, secretin, and cholecystokinin.
<i>Digestive</i>	Brush Border Enzymes	Enzymes present on the inside surface of cells lining the duodenum that are released in the presence of chyme. These enzymes break down dimers and trimers of biomolecules into absorbable monomers. Include disaccharidases and peptidases
<i>Digestive</i>	Lack of Digestive Enzyme	Intestines can't cleave disaccharide for digestion. This increases osmolarity and pulls water into the intestines to form diarrhea. Bacteria in the small intestine are able to break down disaccharides, but result in methane gas as a byproduct, resulting in farts.
<i>Digestive</i>	Bile	Complex fluid of bile salts, pigments, and cholesterol. Produced by the liver and stored in the gallbladder before secretion into the small intestine.
<i>Digestive</i>	Bile Salts	Have hydrophobic and hydrophilic regions to act as an emulsifier in the duodenum to allow fats and cholesterol to form micelles and giving access to pancreatic lipase digestion (a water soluble enzyme). The creation of micelles increases surface area of fats for aided digestion by lipases. Formation of micelles is a form of mechanical digestion.
<i>Digestive</i>	Pancreatic Juices	Secreted by pancreas into duodenum due to stimulation by cholecystokinin (CCK). Complex mixture of enzymes in bicarbonate-rich solution. This basic solution neutralizes chyme to allow for ideal pH for enzymatic digestion (most active around pH 8.5). Contains enzymes to digest carbohydrates, fats, and proteins.

<i>Digestive</i>	Acinar Cells	Cells that make up the bulk of the pancreas and participate in its exocrine functions. Produce pancreatic juices.
<i>Digestive</i>	Pancreatic Enzymes	Secreted by Acinar Cells. Pancreatic Amylase: Digests carbohydrates. Trypsinogen: Activated by Enteropeptidase (produced in Duodenum) to form trypsin, which then activates chymotrypsinogen. Procarboxypeptidases A and B to protein digestion. Pacreatic Lipase: Breaks down fats into free fatty acids and glycerol
<i>Digestive</i>	Duodenal Papillae	Secretion point of pancreatic juices into duodenum from pancreatic ducts. There is a major and a minor duodenal papilla.
<i>Digestive</i>	Liver	<ul style="list-style-type: none"> - Regulates blood sugar via glycogenesis, glycogenolysis, gluconeogenesis, and the storage and release of fats. - Converts Ammonia (waste product of amino acid metabolism) into Urea - Detoxifies chemicals such as drugs and alcohol - Produces Bile - Synthesizes albumin and clotting factors
<i>Digestive</i>	bilirubin	Major pigment in Bile, which is the byproduct of the breakdown of hemoglobin. Inability to process or excrete bilirubin results in Jaundice.
<i>Digestive</i>	Gallbladder	Stores and concentrates bile. CCK stimulates the gallbladder to contract and push bile into the biliary tree, which merges with the pancreatic duct before entering the duodenum via the duodenal papillae. Gallbladder stones made of cholesterol or bilirubin can cause inflammation of the gallbladder and blockage of both the biliary tree and pancreatic ducts.
<i>Digestive</i>	Villi	Small, fingerlike projections from the epithelial lining of the small intestine. Each villus is covered in microvilli. This greatly increases surface area for absorption. Each villus contains a capillary bed for absorption of water soluble nutrients and small fatty acids into the blood and a lacteal to transport fats into the lymphatic system
<i>Digestive</i>	Lacteal	Lymphatic channel that takes up fats for transport into the lymphatic system. Located in the Villi.
<i>Digestive</i>	Hepatic Portal System	Portal system in which blood first travels through capillaries in the villi of the small intestine to absorb nutrients, then again through the capillaries in the liver for nutrients to be processed and for toxins to be removed.
<i>Digestive</i>	Chylomicrons	Packaged triglycerides and esterified cholesterol that gets transferred from the mucosal cells of the villi of the small intestine into the lacteal for insertion into the lymphatic system
<i>Digestive</i>	Fat Soluble Vitamins	Vitamins A, D, E, and K. Easily dissolve into chylomicrons to enter body. Failure to digest or absorb fat may lead to deficiencies in fat soluble vitamins.
<i>Digestive</i>	Water Soluble Vitamins	Vitamin B complex and C. Absorb directly from small intestine into blood plasma.
<i>Digestive</i>	Cecum	Outpocketing of the Large Intestine that accepts fluid exiting the small intestine through the ileocecal valve and is the site of attachment of the appendix. Home to many aerobic bacteria that produce a symbiotic relationship that helps produce vitamin K and biotin (vitamin B7).
<i>Digestive</i>	Appendix	Originally thought to be vestigial, but now thought to aid in warding off bacterial infections and repopulating the large intestine with normal flora after diarrhea.
<i>Digestive</i>	Colon	A part of the large intestine that's main function is to absorb water and salts from indigested material left over from the small intestine. Absorbs less water than the small intestine, but still aids in formation of feces. Too much or too little absorption causes constipation or diarrhea respectively.
<i>Digestive</i>	Internal and External Anal Sphincters	Separate the rectum from the outside. Internal sphincter is involuntary. External is voluntary.
<i>Excretory</i>	Vasa Recta	Capillaries that surround the loop of Henle as the second capillary bed in the renal portal system (the first being the glomeruli)
<i>Excretory</i>	Bowman's Capsule	Cuplike structure around glomerulus that leads to the proximal convoluted tubule.
<i>Excretory</i>	Detrusor Muscle	Muscular lining of the bladder which contracts after stimulation from the parasympathetic nervous system.

<i>Excretory</i>	Micturition reflex	When stretch receptors in bladder recognize that it is full, they fire parasympathetic neurons to the detrusor muscle and internal urethral sphincter causing them to contract and relax respectively.
<i>Excretory</i>	Starling Forces	Forces that govern the movement of fluid into the Bowman's Capsule from the Glomerulus. This is a result of the hydrostatic and oncotic forces of the Bowman's Space and Glomerulus capillaries.
<i>Excretory</i>	Countercurrent Multiplier System	The system in which the Vasa Recta and Nephron flow in opposite directions, allowing more hypertonic blood (high osmolarity) to be exposed to the loop of Henle, allowing for maximum water absorption.
<i>Excretory</i>	Loop of Henle	Descending Loop: Only permeable to water. Water leaves the loop, creating an increasingly concentrated solution at the end of the loop. Ascending Loop: Only permeable to salts. This allows the highly concentrated fluid at the end of the loop to be reabsorbed by the vasa recta, decreasing concentration by the time the fluid gets to the distal convoluted tubules.
<i>Excretory</i>	Dump the HUNK	Major waste products excreted in urine are H ⁺ , Urea, NH ₃ , and K ⁺ .
<i>Excretory</i>	Diluting Segment	Thicker portion of the ascending loop of Henle with larger cells due to more mitochondria in these cells to facilitate active transport. These cells are pushing out salts against their concentration gradient, since the fluid inside the loop of Henle has become hypotonic compared to the interstitium. This is the only portion of the nephron that can produce urine more dilute than blood.
<i>Excretory</i>	Proximal Convoluted Tubule	Proceeds the Bowman's Capsule. Amino Acids, Salts, Glucose, Water Soluble Vitamins reabsorbed into the Vasa Recta along with water. About 70% of the filtered sodium is reabsorbed here. H ⁺ , K ⁺ , NH ₃ , Urea are all secreted here.
<i>Excretory</i>	Distal Convoluted Tubule	Responds to Aldosterone, which promotes sodium reabsorption. Water will follow the sodium, concentrating the urine and decreasing its volume. Waste products are also secreted here.
<i>Excretory</i>	Collecting Duct	Final concentration of urine largely dependent on permeability of collecting duct, which is affected by ADH and Aldosterone to increase water absorption and concentrate urine output. Water travels to Vasa Recta, where it reenters blood stream.
<i>Excretory</i>	Osmotic vs Oncotic Pressure	Osmotic Pressure = "Sucking" pressure that draws water into blood Oncotic Pressure = Osmotic Pressure specifically caused by Proteins
<i>Excretory</i>	Renal Bicarbonate Buffer System	When pH is too high, kidneys can selectively excrete more bicarbonate and reabsorb more H ⁺ . When pH is too low, kidneys excrete more H ⁺ and reabsorb more bicarbonate.
<i>Immune</i>	Langerhans cells	Special macrophages that reside within the stratum spinosum of the epidermis. Capable of presenting antigens to T-cells to activate the immune system.
<i>Musculoskeletal</i>	Red Fibers	Slow twitch fibers, high myoglobin content and derive energy aerobically. Lots of Mitochondria
<i>Musculoskeletal</i>	White Fibers	Fast twitch fibers. Less myoglobin. Contract rapidly, but fatigue more quickly.
<i>Musculoskeletal</i>	Myogenic Activity	Both smooth muscles and cardiac muscles can contract without nervous system input.
<i>Musculoskeletal</i>	Tropomyosin	Protein that spirals around actin in muscles, covering the myosin binding sites.
<i>Musculoskeletal</i>	Troponin	Protein on tropomyosin. Has a Ca ²⁺ binding site. When activated by calcium binding, troponin causes tropomyosin to undergo conformational change, exposing myosin binding sites
<i>Musculoskeletal</i>	Myosin	Motor protein in muscles. Binds to Actin filaments in the cocked position, with ADP + Pi bound. This happens only when actin filaments have exposed myosin binding sites after Ca ²⁺ is bound to troponin. After myosin-actin binding, ADP + Pi dissociate from myosin, causing the power stroke. This contracts the sarcomere. ATP then binds to myosin, freeing it from actin. ATP is hydrolyzed to ADP + Pi, recocking the myosin (which is unbound from actin).
<i>Musculoskeletal</i>	Tetanus	When muscle contracts do not get the chance to relax at all due to constant stimulation at a high frequency. E.g. after a tough workout, your muscles are still tense, even though you aren't flexing.

<i>Musculoskeletal</i>	Harversion Systems	Structural Unit of Bone, also called Osteons. Have Harversian and Volkmann's Canals (longitudinal and transverse canals) that allow blood vessels, nerves, and lymph vessels to maintain bone health.
<i>Musculoskeletal</i>	Endochondral Ossification	Process of hardening cartilage into bone. Responsible for formation of most of the long bones of the body.
<i>Musculoskeletal</i>	Synovial Fluid	Lubricates the movements of structures in the joint space. Secreted by soft tissue called the synovium, which is enclosed inside of the joint cavity by the synovial capsule.
<i>Genetics</i>	Penetrance	The proportion of individuals in the populations carrying an allele who actually express the phenotype.
<i>Genetics</i>	Expressivity	Different manifestations of the same genotype across the population. Constant expressivity means all individuals with a given genotype experience same phenotype.
<i>Genetics</i>	Mendel's First Law (Law of Segregation)	Genes exist in alleles, of which each person has two of (one from each parent). Gametes only carry one allele due to separation during meiosis of the alleles. Only one allele will be fully expressed if two alleles are different, while one is silent (except for codominance and incomplete dominance)
<i>Genetics</i>	Mendel's Second Law (Law of Independent Assortment)	Inheriting one gene does not affect the inheritance of another gene. This was later explained by recombination during meiosis. Problematic when linked genes were discovered.
	Hardy-Weinberg Equations	$p + q = 1$, $p^2 + 2pq + q^2 = 1$ Equations show the frequency of alleles in a population and also the frequency of a given genotype or in the population. There will always be twice as many alleles as individuals in a population.
	Inclusive Fitness	Measure of an organism's success in the population. Based on number of offspring, ability to support offspring, and ability of the offspring to support others. Promotes altruism since sacrificing oneself, commonly for offspring, can ensure passing of genes to future generations
	Punctuated Equilibrium	Some species have "Explosions" of evolutionary change that occur in rapid bursts, rather than slowly over a long period of time.
	Polymorphism	Naturally occurring differences in form between members of the same population, such as light and dark coloration in the same species of butterfly.
	Adaptive Radiation	Rapid rise of a number of different species from a common ancestor.