

Georgia Standards of Excellence

6TH GRADE SOCIAL STUDIES

Pacing Guide, Lesson Outline, + Teacher Tips!

Sl. No.	Activity	Duration	Remarks	Start Date	End Date
1	Preparation of Project Report	10 days	Preparation of Project Report	10/10/2019	20/10/2019
2	Preparation of Project Report	10 days	Preparation of Project Report	20/10/2019	30/10/2019
3	Preparation of Project Report	10 days	Preparation of Project Report	30/10/2019	10/11/2019

	Prevalence	Incidence
1. HIV/AIDS	High	High
2. Malaria	High	High
3. Tuberculosis	High	High
4. Dengue fever	High	High
5. Schistosomiasis	High	High
6. HIV/AIDS	High	High
7. HIV/AIDS	High	High
8. HIV/AIDS	High	High
9. HIV/AIDS	High	High
10. HIV/AIDS	High	High

Year	Country	Value
2000	China	1.00
2001	China	1.00
2002	China	1.00
2003	China	1.00
2004	China	1.00
2005	China	1.00
2006	China	1.00
2007	China	1.00
2008	China	1.00
2009	China	1.00
2010	China	1.00
2011	China	1.00
2012	China	1.00
2013	China	1.00
2014	China	1.00
2015	China	1.00
2016	China	1.00
2017	China	1.00
2018	China	1.00
2019	China	1.00
2020	China	1.00

[illegible]

Year	Population	Population Density
1990	1,200,000	120
2000	1,500,000	150
2010	1,800,000	180
2020	2,100,000	210

Conclusion: The results of this study suggest that the use of a structured, evidence-based approach to patient assessment and management can improve the quality of care for patients with acute respiratory distress syndrome. The use of a structured approach can also help to reduce the risk of complications and improve patient outcomes.

12. **Management of the patient with aortic stenosis**
- a. **Medical management**
- 1. There is no medical treatment available for aortic stenosis. The only treatment available is aortic valve replacement.
 - 2. The patient should be advised to avoid strenuous exercise and to avoid the use of oral contraceptives.
 - 3. The patient should be advised to avoid the use of alcohol and to avoid the use of tobacco.
 - 4. The patient should be advised to avoid the use of drugs that may increase the risk of bleeding.
 - 5. The patient should be advised to avoid the use of drugs that may increase the risk of infection.
 - 6. The patient should be advised to avoid the use of drugs that may increase the risk of arrhythmias.
 - 7. The patient should be advised to avoid the use of drugs that may increase the risk of heart failure.
 - 8. The patient should be advised to avoid the use of drugs that may increase the risk of aortic dissection.
 - 9. The patient should be advised to avoid the use of drugs that may increase the risk of stroke.
 - 10. The patient should be advised to avoid the use of drugs that may increase the risk of peripheral vascular disease.
 - 11. The patient should be advised to avoid the use of drugs that may increase the risk of renal failure.
 - 12. The patient should be advised to avoid the use of drugs that may increase the risk of liver failure.
 - 13. The patient should be advised to avoid the use of drugs that may increase the risk of diabetes.
 - 14. The patient should be advised to avoid the use of drugs that may increase the risk of hypertension.
 - 15. The patient should be advised to avoid the use of drugs that may increase the risk of hyperlipidaemia.
 - 16. The patient should be advised to avoid the use of drugs that may increase the risk of osteoporosis.
 - 17. The patient should be advised to avoid the use of drugs that may increase the risk of osteoarthritis.
 - 18. The patient should be advised to avoid the use of drugs that may increase the risk of rheumatoid arthritis.
 - 19. The patient should be advised to avoid the use of drugs that may increase the risk of psoriasis.
 - 20. The patient should be advised to avoid the use of drugs that may increase the risk of eczema.
 - 21. The patient should be advised to avoid the use of drugs that may increase the risk of asthma.
 - 22. The patient should be advised to avoid the use of drugs that may increase the risk of chronic obstructive pulmonary disease.
 - 23. The patient should be advised to avoid the use of drugs that may increase the risk of COPD.
 - 24. The patient should be advised to avoid the use of drugs that may increase the risk of emphysema.
 - 25. The patient should be advised to avoid the use of drugs that may increase the risk of bronchitis.
 - 26. The patient should be advised to avoid the use of drugs that may increase the risk of pneumonia.
 - 27. The patient should be advised to avoid the use of drugs that may increase the risk of tuberculosis.
 - 28. The patient should be advised to avoid the use of drugs that may increase the risk of HIV/AIDS.
 - 29. The patient should be advised to avoid the use of drugs that may increase the risk of hepatitis B.
 - 30. The patient should be advised to avoid the use of drugs that may increase the risk of hepatitis C.
 - 31. The patient should be advised to avoid the use of drugs that may increase the risk of liver cancer.
 - 32. The patient should be advised to avoid the use of drugs that may increase the risk of lung cancer.
 - 33. The patient should be advised to avoid the use of drugs that may increase the risk of breast cancer.
 - 34. The patient should be advised to avoid the use of drugs that may increase the risk of prostate cancer.
 - 35. The patient should be advised to avoid the use of drugs that may increase the risk of colorectal cancer.
 - 36. The patient should be advised to avoid the use of drugs that may increase the risk of pancreatic cancer.
 - 37. The patient should be advised to avoid the use of drugs that may increase the risk of stomach cancer.
 - 38. The patient should be advised to avoid the use of drugs that may increase the risk of esophageal cancer.
 - 39. The patient should be advised to avoid the use of drugs that may increase the risk of thyroid cancer.
 - 40. The patient should be advised to avoid the use of drugs that may increase the risk of bladder cancer.
 - 41. The patient should be advised to avoid the use of drugs that may increase the risk of kidney cancer.
 - 42. The patient should be advised to avoid the use of drugs that may increase the risk of testicular cancer.
 - 43. The patient should be advised to avoid the use of drugs that may increase the risk of ovarian cancer.
 - 44. The patient should be advised to avoid the use of drugs that may increase the risk of uterine cancer.
 - 45. The patient should be advised to avoid the use of drugs that may increase the risk of cervical cancer.
 - 46. The patient should be advised to avoid the use of drugs that may increase the risk of vaginal cancer.
 - 47. The patient should be advised to avoid the use of drugs that may increase the risk of penile cancer.
 - 48. The patient should be advised to avoid the use of drugs that may increase the risk of anal cancer.
 - 49. The patient should be advised to avoid the use of drugs that may increase the risk of skin cancer.
 - 50. The patient should be advised to avoid the use of drugs that may increase the risk of melanoma.
 - 51. The patient should be advised to avoid the use of drugs that may increase the risk of basal cell carcinoma.
 - 52. The patient should be advised to avoid the use of drugs that may increase the risk of squamous cell carcinoma.
 - 53. The patient should be advised to avoid the use of drugs that may increase the risk of lymphoma.
 - 54. The patient should be advised to avoid the use of drugs that may increase the risk of leukemia.
 - 55. The patient should be advised to avoid the use of drugs that may increase the risk of multiple myeloma.
 - 56. The patient should be advised to avoid the use of drugs that may increase the risk of Hodgkin's lymphoma.
 - 57. The patient should be advised to avoid the use of drugs that may increase the risk of non-Hodgkin's lymphoma.
 - 58. The patient should be advised to avoid the use of drugs that may increase the risk of chronic myeloid leukemia.
 - 59. The patient should be advised to avoid the use of drugs that may increase the risk of acute myeloid leukemia.
 - 60. The patient should be advised to avoid the use of drugs that may increase the risk of acute lymphoblastic leukemia.
 - 61. The patient should be advised to avoid the use of drugs that may increase the risk of chronic lymphocytic leukemia.
 - 62. The patient should be advised to avoid the use of drugs that may increase the risk of hairy cell leukemia.
 - 63. The patient should be advised to avoid the use of drugs that may increase the risk of Waldenström's macroglobulinemia.
 - 64. The patient should be advised to avoid the use of drugs that may increase the risk of multiple myeloma.
 - 65. The patient should be advised to avoid the use of drugs that may increase the risk of plasma cell myeloma.
 - 66. The patient should be advised to avoid the use of drugs that may increase the risk of light chain myeloma.
 - 67. The patient should be advised to avoid the use of drugs that may increase the risk of heavy chain myeloma.
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 - 98. The patient should be advised to avoid the use of drugs that may increase the risk of light chain myeloma.
 - 99. The patient should be advised to avoid the use of drugs that may increase the risk of heavy chain myeloma.
 - 100. The patient should be advised to avoid the use of drugs that may increase the risk of light chain myeloma.
- b. **Surgical management**
- 1. Aortic valve replacement (AVR) is the only treatment available for aortic stenosis.
 - 2. AVR is performed by replacing the aortic valve with a mechanical or biological valve.
 - 3. AVR is performed by making an incision in the chest and exposing the aorta.
 - 4. AVR is performed by removing the diseased aortic valve and replacing it with a new valve.
 - 5. AVR is performed by sewing the new valve into the aorta.
 - 6. AVR is performed by closing the incision in the chest.
 - 7. AVR is performed by monitoring the patient's vital signs and blood pressure.
 - 8. AVR is performed by monitoring the patient's heart rate and rhythm.
 - 9. AVR is performed by monitoring the patient's oxygen saturation.
 - 10. AVR is performed by monitoring the patient's temperature.
 - 11. AVR is performed by monitoring the patient's fluid balance.
 - 12. AVR is performed by monitoring the patient's electrolyte levels.
 - 13. AVR is performed by monitoring the patient's renal function.
 - 14. AVR is performed by monitoring the patient's liver function.
 - 15. AVR is performed by monitoring the patient's coagulation status.
 - 16. AVR is performed by monitoring the patient's pain level.
 - 17. AVR is performed by monitoring the patient's level of consciousness.
 - 18. AVR is performed by monitoring the patient's level of anxiety.
 - 19. AVR is performed by monitoring the patient's level of comfort.
 - 20. AVR is performed by monitoring the patient's level of satisfaction.
 - 21. AVR is performed by monitoring the patient's level of participation in care.
 - 22. AVR is performed by monitoring the patient's level of understanding of the condition.
 - 23. AVR is performed by monitoring the patient's level of knowledge of the condition.
 - 24. AVR is performed by monitoring the patient's level of ability to perform self-care.
 - 25. AVR is performed by monitoring the patient's level of ability to follow instructions.
 - 26. AVR is performed by monitoring the patient's level of ability to communicate.
 - 27. AVR is performed by monitoring the patient's level of ability to make decisions.
 - 28. AVR is performed by monitoring the patient's level of ability to solve problems.
 - 29. AVR is performed by monitoring the patient's level of ability to cope with stress.
 - 30. AVR is performed by monitoring the patient's level of ability to deal with change.
 - 31. AVR is performed by monitoring the patient's level of ability to adapt to the situation.
 - 32. AVR is performed by monitoring the patient's level of ability to cope with uncertainty.
 - 33. AVR is performed by monitoring the patient's level of ability to deal with ambiguity.
 - 34. AVR is performed by monitoring the patient's level of ability to cope with conflict.
 - 35. AVR is performed by monitoring the patient's level of ability to deal with opposition.
 - 36. AVR is performed by monitoring the patient's level of ability to cope with resistance.
 - 37. AVR is performed by monitoring the patient's level of ability to deal with defiance.
 - 38. AVR is performed by monitoring the patient's level of ability to cope with non-compliance.
 - 39. AVR is performed by monitoring the patient's level of ability to deal with refusal.
 - 40. AVR is performed by monitoring the patient's level of ability to cope with denial.
 - 41. AVR is performed by monitoring the patient's level of ability to deal with minimization.
 - 42. AVR is performed by monitoring the patient's level of ability to cope with rationalization.
 - 43. AVR is performed by monitoring the patient's level of ability to deal with projection.
 - 44. AVR is performed by monitoring the patient's level of ability to cope with displacement.
 - 45. AVR is performed by monitoring the patient's level of ability to deal with sublimation.
 - 46. AVR is performed by monitoring the patient's level of ability to cope with regression.
 - 47. AVR is performed by monitoring the patient's level of ability to deal with fixation.
 - 48. AVR is performed by monitoring the patient's level of ability to cope with repetition.
 - 49. AVR is performed by monitoring the patient's level of ability to deal with identification.
 - 50. AVR is performed by monitoring the patient's level of ability to cope with introjection.
 - 51. AVR is performed by monitoring the patient's level of ability to deal with idealization.
 - 52. AVR is performed by monitoring the patient's level of ability to cope with devaluation.
 - 53. AVR is performed by monitoring the patient's level of ability to deal with splitting.
 - 54. AVR is performed by monitoring the patient's level of ability to cope with denial.
 - 55. AVR is performed by monitoring the patient's level

Georgia Social Studies Pacing Guide

Brendan G. Carr

A red circular graphic with a gradient, appearing as a partial circle or a thick arc, located to the right of the author's name.

Georgia Social Studies Pacing Guide:

Teaching and Learning the Difficult Past Magdalena H. Gross, Luke Terra, 2018-12-07 Building upon the theoretical foundations for the teaching and learning of difficult histories in social studies classrooms this edited collection offers diverse perspectives on school practices curriculum development and experiences of teaching about traumatic events Considering the relationship between memory history and education this volume advances the discussion of classroom based practices for teaching and learning difficult histories and investigates the role that history education plays in creating and sustaining national and collective identities

The Ultimate Student Teaching Guide Kisha N. Daniels, Gerrelyn C. Patterson, Yolanda L. Dunston, 2013-12-26 Concise and focused on practical strategies this engaging lighthearted guide provides teacher candidates a road map for negotiating the complex and diverse terrain of pre K through 12 schools while providing opportunities to develop the skills of reflection that are crucial to becoming a successful practitioner The Second Edition provides practical research based field tested strategies that student teachers can immediately apply as they encounter school concerns solve classroom challenges negotiate social conflicts and new to this edition navigate the job search and interview process Concluding chapters challenge readers to view student teaching as a process and to use reflection as a tool for professional growth Thoroughly updated throughout the Second Edition includes expanded coverage of workplace professionalism an introduction to accreditation and the Common Core standards and more

Resources in Education, 1991-04

Critical Perspectives on Teaching in the Southern United States Tori K. Flint, Natalie Keefer, 2020-10-21 Critical Perspectives on Teaching in the Southern United States presents provocative insights into education in the Southern United States from the perspective of educators This book foregrounds the Southern United States unique sociopolitical sociohistorical and sociocultural contexts which directly influence knowledge and classroom pedagogies Contributors use critical frameworks that coalesce around methods including self reflection social justice and culturally responsive relevant sustaining and asset based pedagogies Chapters explore salient topics such as race language gender discrimination identity immigration poverty social justice and their influence s on pedagogy This book raises complex questions considering how history has shaped present day education in the Southern U S context

The Curriculum Mapping Planner Heidi Hayes Jacobs, Ann Johnson, 2009 This book is designed to help schools deliver effective training in curriculum mapping Creating and using curriculum maps is easy when this in depth resource is used in workshops curriculum means and professional learning communities

The Active/Ethical Professional Michael G. Gunzenhauser, 2012-02-23 An innovative ethical framework for educators and school leaders who find their practice constrained by the demands stemming from accountability legislation

Student Achievement Goal Setting Leslie Grant, James Stronge, 2013-10-11 The first book in the James H Stronge Research to Practice series focuses on improving student achievement through academic goal setting It offers the tools and plan of action to use performance data to improve

instructional practice and increase student achievement The Prentice Hall Directory of Online Social Studies Resources
 Ronald L. Partin,1998 **Status of Social Studies Within One Georgia School District** Tonya Fields Pinckley,2020 The purpose of this causal comparative research was to examine whether differences exist between the time allotted for delivering content the time allotted for lesson planning the time allotted for student assessment instructional perceptions regarding mandated testing perceptions regarding pedagogical content knowledge PCK level of ease of planning level of understanding of Georgia Standards of Excellence GSE level of understanding of the teaching assessment cycle and usage of the system provided pacing guides within public elementary schools in one Georgia school district across the content areas of ELA reading mathematics science and social studies The research also examined the differences in instructional strategies used in public elementary schools across different content areas The PCK framework was used as the basis for this research study PCK refers to a teacher s ability to blend content knowledge with effective instructional practices in a manner that allows students to learn The teachers instructional practices will enable school leaders and district leaders more knowledge when providing necessary resources and professional development opportunities Using an adapted Status of Social Studies Survey S4 through the Qualtrics platform teachers disclosed their instructional practices for all content areas **School Library Journal** ,1992 **Research in Education** ,1974 Atlanta Magazine ,2006-01 Atlanta magazine s editorial mission is to engage our community through provocative writing authoritative reporting and superlative design that illuminate the people the issues the trends and the events that define our city The magazine informs challenges and entertains our readers each month while helping them make intelligent choices not only about what they do and where they go but what they think about matters of importance to the community and the region Atlanta magazine s editorial mission is to engage our community through provocative writing authoritative reporting and superlative design that illuminate the people the issues the trends and the events that define our city The magazine informs challenges and entertains our readers each month while helping them make intelligent choices not only about what they do and where they go but what they think about matters of importance to the community and the region **Holt People, Places, and Change** Robert J. Sager,2003
Catalog of Copyright Entries. Third Series Library of Congress. Copyright Office,1955 *Homeschooling Black Children in the U.S.* Khadijah Ali-Coleman,Cheryl Fields-Smith,2022-01-01 In 2021 the United States Census Bureau reported that in 2020 during the rise of the global health pandemic COVID 19 homeschooling among Black families increased five fold However Black families had begun choosing to homeschool even before COVID 19 led to school closures and disrupted traditional school spaces Homeschooling Black Children in the US Theory Practice and Popular Culture offers an insightful look at the growing practice of homeschooling by Black families through this timely collection of articles by education practitioners researchers homeschooling parents and homeschooled children Homeschooling Black Children in the US Theory Practice and Popular Culture honestly presents how systemic racism and other factors influence the decision of Black

families to homeschool In addition the book chapters illustrate in different ways how self determination manifests within the homeschooling practice Researchers Khadijah Ali Coleman and Cheryl Fields Smith have edited a compilation of work that explores the varied experiences of parents homeschooling Black children before during and after COVID 19 From veteran homeschooling parents sharing their practice to researchers reporting their data collected pre COVID this anthology of work presents an overview that gives substantive insight into what the practice of homeschooling looks like for many Black families in the United States Journal of Social Studies Research ,2009 **National Library of Medicine Audiovisuals Catalog** National Library of Medicine (U.S.),1977 **The Elementary School Library Collection** Lois Winkel,Eileen Palmer Burke,1990 **Advancing Education Through Research, Development, Demonstration, Dissemination, Training** National Center for Educational Research and Development (U.S.),1970 **Current Index to Journals in Education** ,1986

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Georgia Social Studies Pacing Guide Introduction

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