

## SELF-ADMINISTRATION QUESTIONNAIRE

As you will remember one of the first steps agreed upon at the meeting in North Carolina was to share information on the results of studies using self-administration substitution procedures.

The enclosed questionnaire is our first attempt to collate information from the various self-administration laboratories who have agreed to cooperate in this project. We are maximally interested at this stage in results obtained with certain "standard" compounds to determine the extent of inter-laboratory variability. Therefore the questionnaire should be filled out only for drugs which are generally available and not for drugs being currently developed by a pharmaceutical firm. Of the highest priority are drugs such as cocaine, amphetamines (and related phenethylamines); barbiturates; morphine and other opioids.

It is absolutely imperative that this material be returned to Professor C. R. Schuster by Sept. 15, 1973 at the address below. If this deadline is met the data will be analyzed by December of 1973. At that time a decision will as well be made as to the next logical step. If a substantial number of laboratories have already investigated enough "standard" compounds and there is little variability in results we will proceed immediately with certain "unknown" drugs. Clearly, nothing can be decided until the data is sent in and it is for this reason we strongly encourage you to fill out the questionnaire as quickly as possible. Please copy the enclosed questionnaire and use 1 copy for each of the compounds you report and/or each of the methods you used.

Mailing address: Dr. C. R. Schuster  
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SELF-ADMINISTRATION QUESTIONNAIRE

Infusion Apparatus

Brand \_\_\_\_\_

Speed \_\_\_\_\_

Infusion Volume \_\_\_\_\_

Infusion Duration \_\_\_\_\_

Stimuli Used

Session ON - Light \_\_\_\_\_

Tone \_\_\_\_\_

Other \_\_\_\_\_

Infusion ON - Light \_\_\_\_\_

Tone \_\_\_\_\_

Other \_\_\_\_\_

Session Description

Duration \_\_\_\_\_

Session frequency

Daily


Week days only

Other \_\_\_\_\_

Time of Day

Light Hours

Dark Hours

Both Light & Dark


Schedule of Reinforcement

Fixed Ratio (specify number) \_\_\_\_\_

Other \_\_\_\_\_

Medical Treatments & Disease Prophylaxis

Penicillin or other antibiotics

Isoniazid

Other


Organismic Variables

Species \_\_\_\_\_

Size \_\_\_\_\_

Sex \_\_\_\_\_

Estimated Age \_\_\_\_\_

Environmental Variables - Please check appropriate box.

Housing:

Cubicle -

Open


Closed

Restraint:

Arm and Harness


Chair

Other (explain) \_\_\_\_\_

Duration of stay in experimental cubicle:

Session only


24 hours/day

Manipulandum

Lever Switch

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(brand \_\_\_\_\_)

Other \_\_\_\_\_

Specify baseline drug (e.g. cocaine) used to train and maintain responding between test drugs

Baseline Drug \_\_\_\_\_

Drugs Tested:

Name \_\_\_\_\_

Dosages Tested \_\_\_\_\_

Number of animals at each dose \_\_\_\_\_

Dosages generating response rates significantly above control rates \_\_\_\_\_

Dosage generating maximal rate \_\_\_\_\_

Rates (responses/unit time) of drug reinforced responding at the various doses tested.

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Mg/kg/unit time of drug intake at the various doses tested.

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Solvent if other than saline \_\_\_\_\_

Is the above data published?

Yes

No

If yes, where? \_\_\_\_\_.