

15. Huser V, Kahn MG, Brown JS, Gouripeddi R. Methods for examining data quality in healthcare integrated data repositories. *Pac Symp Biocomput Pac Symp Biocomput*. 2018;23:628–33.
16. Lund A, Gouripeddi R, Burnett N, Tran L-T, Mo P, Madsen R, Cummins M, Sward K, Facelli J. Enabling Reproducible Computational Modeling: The Utah PRISMS Ecosystem. In Salt Lake City, Utah, USA; 2018 [cited 2018 Oct 30]. Available from: [//campusguides.lib.utah.edu/UtahRR18/abstracts](http://campusguides.lib.utah.edu/UtahRR18/abstracts)
17. Pflieger LT, Mason CC, Facelli JC. Uncertainty quantification in breast cancer risk prediction models using self-reported family health history. *J Clin Transl Sci*. 2017 Feb;1(1):53–9.
18. Shao J, Gouripeddi R, Facelli J. Improving Clinical Trial Research Reproducibility using Reproducible Informatics Methods. In Salt Lake City, Utah, USA; 2018 [cited 2018 Oct 30]. Available from: [//campusguides.lib.utah.edu/UtahRR18/abstracts](http://campusguides.lib.utah.edu/UtahRR18/abstracts)
19. Shao J, Gouripeddi R, Facelli JC. Semantic characterization of clinical trial descriptions from [ClinicalTrials.gov](http://ClinicalTrials.gov) and patient notes from MIMIC-III. *J Clin Transl Sci*. 2017 Sep;1(S1):12–12.
20. Tiase V, Gouripeddi R, Burnett N, Butcher R, Mo P, Cummins M, Sward K. Advancing Study Metadata Models to Support an Exposomic Informatics Infrastructure. In Ottawa, Canada; 2018 [cited 2018 Oct 30]. Available from: <http://www.eiseverywhere.com/ehome/294696/638649/?t=8c531cecd4bb0a5efc6a0045f5bec0c3>
21. Wen J, Gouripeddi R, Facelli JC. Metadata Discovery of Heterogeneous Biomedical Datasets Using Token-Based Features. In: *IT Convergence and Security 2017* [Internet]. Springer, Singapore; 2017 [cited 2017 Sep 6]. p. 60–7. (Lecture Notes in Electrical Engineering). Available from: [https://link.springer.com/chapter/10.1007/978-981-10-6451-7\\_8](https://link.springer.com/chapter/10.1007/978-981-10-6451-7_8)
22. Wilkinson MD, Dumontier M, Aalbersberg IJ, Appleton G, Axton M, Baak A, Blomberg N, Boiten J-W, da Silva Santos LB, Bourne PE, Bouwman J, Brookes AJ, Clark T, Crosas M, Dillo I, Dumon O, Edmunds S, Evelo CT, Finkers R, Gonzalez-Beltran A, Gray AJG, Groth P, Goble C, Grethe JS, Heringa J, 't Hoen PAC, Hooft R, Kuhn T, Kok R, Kok J, Lusher SJ, Martone ME, Mons A, Packer AL, Persson B, Rocca-Serra P, Roos M, van Schaik R, Sansone S-A, Schultes E, Sengstag T, Slater T, Strawn G, Swertz MA, Thompson M, van der Lei J, van Mulligen E, Velterop J, Waagmeester A, Wittenburg P, Wolstencroft K, Zhao J, Mons B. The FAIR Guiding Principles for scientific data management and stewardship. *Sci Data*. 2016 Mar 15;3:160018.
23. Ioannidis JPA. Meta-research: Why research on research matters. *PLOS Biol*. 2018 Mar 13;16(3):e2005468.
24. Stodden V, Borwein J, Bailey DH. Setting the default to reproducible. *Comput Sci Res SIAM News*. 2013;46(5):4–6.
25. Stodden V, McNutt M, Bailey DH, Deelman E, Gil Y, Hanson B, Heroux MA, Ioannidis JPA, Taufer M. Enhancing reproducibility for computational methods. *Science*. 2016 Dec 9;354(6317):1240–1.
26. Stodden V, McNutt M, Bailey DH, Deelman E, Gil Y, Hanson B, Heroux MA, Ioannidis JPA, Taufer M. Enhancing reproducibility for computational methods. *Science*. 2016 Dec 9;354(6317):1240–1.
27. Stodden V. Reproducible Research for Scientific Computing: Tools and Strategies for Changing the Culture. *Comput Sci Eng*. 2012 Jul 1;14(4):13–7.
28. Baker M. Muddled meanings hamper efforts to fix reproducibility crisis. *Nat News* Available from: <http://www.nature.com/news/muddled-meanings-hamper-efforts-to-fix-reproducibility-crisis-1.20076>
29. Barba LA. Terminologies for Reproducible Research. *ArXiv180203311 Cs* 2018 Feb 9; Available from: <http://arxiv.org/abs/1802.03311>

4531

### Setting the Stage for Research Success: Creation of Standardized Physician-Scientist Training Program Guidelines to Facilitate Research During Clinical Training

Stephanie A. Freel<sup>1</sup>, Katherine Barrett, PhD<sup>1</sup>, Jillian Hurst, PhD<sup>1</sup>, Rasheed Gbadegesin, MD, MBBS<sup>1</sup>, and Sallie Permar MD, PhD<sup>1</sup>Duke University

**OBJECTIVES/GOALS:** To ameliorate the leaky pipeline of physician-scientists, we must address the factors that cause medical trainees to disengage from research. Here we describe the development of standardized Physician-Scientist Training Program guidelines that may be implemented across disciplines to address these challenges. **METHODS/STUDY POPULATION:** Maintenance of a robust pool of physician-scientists is critical to meet the rapidly growing need for novel therapeutics. A variety of factors contribute to the decline of this pool. Key among these are a lengthy training period that segregates research from clinical training, thus impeding research progress and milestones that allow for a successful research career. Through engagement of residency program directors and Vice Chairs of Research, we have created a series of guidelines that promote residency research tracks and enable better integration of research and clinical training time. Guidelines have been piloted in the Departments of Pediatrics, Medicine and Surgery in the context of 2 new R38-supported programs. **RESULTS/ANTICIPATED RESULTS:** Our physician-Scientist Training Program (PSTP) guidelines were developed by our central Office of Physician-Scientist Development (OPSD) after a successful pilot of an integrated research residency program in the Department of Pediatrics [Duke Pediatric Research Scholars (DPRS); Hurst, et al, 2019], which has included 36 resident and fellow scholars over 3 years. To date, eight clinical departments have adopted our PSTP guidelines as part of their R38-supported or pending programs. The OPSD has recently created a tracking database for scholar metrics, which will further promote PSTP development by enabling centralized reporting on scholar success to individual programs. **DISCUSSION/SIGNIFICANCE OF IMPACT:** PSTP guidelines enable effective implementation of new programs by sharing best practices and lessons learned, standardizing expectations, and defining metrics of success. By promoting proven strategies for integrated clinical and research training, PSTP guidelines may aid in retaining trainees pursuing research careers.

4443

### Tailoring Professional Development to CTS Trainees

Megan Maxwell<sup>1</sup>, Elizabeth Hexner<sup>1</sup>, Rachel McGarrigle, MEd<sup>1</sup>, and Emma Meagher, MD<sup>1</sup>

<sup>1</sup>University of Pennsylvania School of Medicine

**OBJECTIVES/GOALS:** Penn instituted a Professional Development Core (PDC) to complement existing CTS education programs. Sessions were designed to advance participant knowledge and skills in key competency areas including communication, expectation setting, implicit bias and organizational structure, self-efficacy and resilience in order to enhance abilities to successfully execute career and research goals. **METHODS/STUDY POPULATION:** The PDC enrolled 4 cohorts totaling 87 trainees and scholars from 2016–2019. This included 35% pre-doctoral trainees (27 MD, 3 PhD), 39% postdoctoral trainees (29 MD, 3 PhD, 2 VMD/DVM), and 26% junior faculty (16 MD, 6