

**RESULTS/ANTICIPATED RESULTS:** A total of 134 investigators comprised the overall network. The network are predominantly clinician (49.3%) and basic researchers (25.4%). Preliminary results shows that diversity of disciplines and affiliations in the collaborative relationships increased across time. Findings demonstrated that the number of nodes/actors increased from 16 to 65 comparing 2020 to 2023 and the edges/relationships from 12 to 53. The number of translational research cluster increased from 4 to 13 comparing 2020 to 2023. More extensive collaborative cluster occurred across time with over 15 researchers collaborating. A mentor was the key player connecting these research clusters. **DISCUSSION/SIGNIFICANCE:** This study provides critical data to mapping the IDEa CTR translational research collaboration patterns. Research collaboration increased across time. This innovative approach serves to foster data-driven decision-making to enhance collaboration, diversity, and program outcomes. It offers valuable insights for policy and practice.

## 182 Secondary Use of Electronic Health Record (EHR) Data and Implications for Evaluation

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**OBJECTIVES/GOALS:** An academic medical library evaluated an EHR data abstraction service by assessing uptake and publication metrics, including use by department, purpose of data abstraction requests and publication counts. **METHODS/STUDY POPULATION:** The evaluation included 167 requests for EHR data processed by the institution's clinical research data management unit (CRDMU) and recorded in an intake form hosted on REDCap. These requests originated from various departments. The intake forms collected investigator and study information, as well as request completion dates. Information in the intake forms were matched with publications and meeting abstracts that were indexed in a database of faculty publications. Investigators who submitted EHR data requests that could not be readily matched to publications were contacted to verify the status of their studies and any associated publications. **RESULTS/ANTICIPATED RESULTS:** The evaluation included 167 data requests submitted to the CRDMU between 2016 and 2018. These requests were categorized into the following use cases: retrospective studies (n=93); patient recruitment (n=50); and 'other' (i.e., education, training, or process improvement; feasibility assessments; machine learning (n=14)). By the end of the evaluation period, an average of four years after the data requests were submitted to the CRDMU, 60 of all 167 EHR datasets (35.9%) led to publications as articles or meeting abstracts. 64.5% of the EHR datasets requested for retrospective studies, 56% of the datasets requested for recruitment, and 79.1% of datasets requested for other uses did not lead to publications. **DISCUSSION/SIGNIFICANCE:** These findings offer evidence that bibliometrics alone provide limited insight into the value of services and data utilized for secondary research. Data ecosystem stakeholders are encouraged to consider—and develop—scalable, reproducible, and more holistic assessments of the impact of their services.

## 183 Translational Health Informatics Support Service Practices, Challenges, and Facilitators

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**OBJECTIVES/GOALS:** **METHODS/STUDY POPULATION:** Utilized novel TS evaluation methods and tools: - Translational Science Case Study protocol adapted to examine translational support service practices, barriers and facilitators influencing translational movement. - Translational Science Benefits Model (TSBM) Checklist elements for translational/research impact analysis. Triangulated diverse data sources: - Primary data: semi-structured interviews with translational service stakeholders. - Secondary data: service's applications, reports, and publications; public stories/news related to their research support; scientific publications; organizational/policy documents; and interviews with research stakeholders featured in published sources. **RESULTS/ANTICIPATED RESULTS:** Translational challenges include: complexity and constant change of health data; lack of data/informatics literacy amongst researchers; limited appreciation and funding for research data services; silos of functionality and data related to biomedical informatics. Translational facilitators are: the UMN CTSA support; available infrastructure and knowledge base; researchers as the best promoters for services; multidisciplinary collaborations with research/community/healthcare teams; best practice approaches; and learning by doing. The translational/research support service contributes to community and public health, clinical/medical benefits, data literacy, catalyzing data-rich research, and health equity. **DISCUSSION/SIGNIFICANCE:** The evaluation case study provides evidence and lessons learned related to translational benefits, challenges, and facilitators of a successful translational research support service integrating best informatics practices in clinical research and contributing to health equity improvement.

## 185 A Clinical and Translational Science manuscript writing support program for research staff

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**OBJECTIVES/GOALS:** The objective of this initiative was to promote MICHR staff's production of Clinical and Translational Science publications. MICHR leadership approved this initiative, including an evaluation plan with measurable outcomes goals, and contracted with an experienced scientific writing coach with over 20 years of experience working with CTSA's. **METHODS/STUDY POPULATION:** A sequential mixed methods program evaluation designs was used. Pre- and post-surveys were used to measure participating staff's gain in skill, understanding & satisfaction. An interview with the instructor was then conducted to characterize staff performance, and identify possible areas of programmatic