

characteristics. RESULTS/ANTICIPATED RESULTS: Mean age of sample was 56.5 years, 57.3 % female, 54.9% white, 18.9% black and 13.1% Hispanic; 64.3% were discharged home, 15.8% to a skilled nursing or other intermediate care facility, 15.5% to home with home care and 2.4% left against medical advice. The top 3 discharge diagnoses were vaginal delivery (6.3% of discharges), psychosis (4.7%), and major joint replacement (2.9%). In adjusted analysis compared to white patients, black and Hispanic patients did not have an risk of increased LOS after being discharged to non-home destinations vs. discharged home, (black patients, adjusted OR [AOR], 0.97; 95% CI: 0.94-1.00, $p = 0.08$; Hispanic patients, AOR, 1.01; 95% CI: 0.98 – 1.05, $p = 0.5$). However, being black compared to white and discharge to non-home destinations significantly increased LOS. DISCUSSION/SIGNIFICANCE OF IMPACT: In this large sample of patients admitted for inpatient care in 2014 in New York, we found no independent effect between race and discharge destination on a patient's LOS after controlling for patient, disease and between-hospital characteristics. However race/ethnicity increased LOS, suggesting its effect may play a role on in-hospital processes. CONFLICT OF INTEREST DESCRIPTION: Dr. Ghosh has no relevant relationships with commercial interests to disclose. Dr. Ibrahim has no relevant relationships with commercial interests to disclose.

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Recruitment and Retention of Individuals with a Cocaine Use Disorder

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OBJECTIVES/GOALS: 1) illustrate the varied challenges individuals with a cocaine use disorder experience in daily life, 2) demonstrate techniques for empathizing and building rapport with potential subjects, and 3) identify recruitment obstacles and solutions. METHODS/STUDY POPULATION: Methods: We use a multi-source strategy to recruit our participants and employ practical techniques to enhance protocol adherence. Methods include a welcoming environment, establishing a routine with flexibility, personalized attention, and incentives for participation. Study population: Individuals with a cocaine use disorder. RESULTS/ANTICIPATED RESULTS: Understanding the life of an individual with a cocaine use disorder is paramount to successful recruitment and retention in addiction research studies. Our clinicians have been able to recruit and retain participants successfully by employing empathetic interpersonal skills, personalized attention, and health-related incentives. DISCUSSION/SIGNIFICANCE OF IMPACT: The Centers for Disease Control and Prevention estimated that 69,029 people died of a drug overdose during the period from February 2018 to February 2019, with 23%, due to cocaine. While methadone and buprenorphine-naloxone maintenance treatment allow opioid-dependent individuals achieve a sense of physical and mental stability, there is no pharmaceutical treatment to help a cocaine-dependent individual cope with cravings or the depression and anxiety that typically follow a cocaine binge. The development of a cocaine use disorder is multi-factorial and presents a significant challenge in terms of discovering treatments, identifying efficient recruitment and retention strategies is the first step for effective research.

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Researchers' Experiences Working With Community Advisory Boards: How Community Member and Patient Stakeholder Feedback Impacted The Research

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OBJECTIVES/GOALS: To assess researchers' experiences working with community advisory boards (CABs) and how community member/patient stakeholder feedback impacted the research. METHODS/STUDY POPULATION: Researchers (N = 34) who presented their research to a Mayo Clinic CAB (at MN, AZ, or FL) from 2014-2017 were invited to participate in an interview in-person or by phone averaging 10-15 min. Researchers were asked "In what ways did the feedback you received from the CAB influence your research?" The validated structured 7-item interview included domains assessing potential influence that CABs had on the research: 1) Pre-research (e.g., generated ideas), 2) Infrastructure (e.g., budget preparation), 3) Research design, 4) Implementation (e.g., research recruitment), 5) Analysis, 6) Dissemination, and 7) Post-research (e.g., assist in formulating next steps). RESULTS/ANTICIPATED RESULTS: 17 interviews were completed (8 no longer at Mayo, 9 no response). Researchers presented their study to a CAB a mean of 4 years (range 3-5) before the interview. Researchers reported that the CAB had influenced their research in the following domains: 24% in pre-research, 24% infrastructure, 41% study design, 41% implementation, 6% analysis, 24% dissemination, and 18% for post-research activities. The mean total score was = 1.8 (SD = 1.7, range 0-6), of a possible range of 0-7. DISCUSSION/SIGNIFICANCE OF IMPACT: Impact of CAB feedback on the research was moderate. Ways to enhance impact could include follow-up with researchers and CAB members.

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The Impact of Social Determinants of Health on Hepatocellular Carcinoma Outcomes

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OBJECTIVES/GOALS: Achieving therapy for hepatocellular carcinoma (HCC) involves navigating through a complex cascade of care. Non-HCC cancer mortality has been associated with social determinants of health outside of cancer specific risk. Our objective is to explore the impact of social determinants on HCC outcomes. METHODS/STUDY POPULATION: Patients with HCC were enrolled from 3 hospitals from June, 1 2019 to December 1, 2019. A chart review was done to collect information on liver disease severity and cancer stage. Patients were interviewed to collect information on the following: 1) socioeconomic status (income, education, insurance status, and employment status), 2) literacy (Rapid Estimate of Adult Literacy in Medicine (REALM-R) and Brief Health Literacy Screening Tool (BRIEF)), 3) social support (Patient Reported Outcome Measurement Information System (PROMIS) instrumental and information support tool), 4) quality of life (PROMIS global and mental health tool), 5) substance abuse, and 6) linkage to care. RESULTS/ANTICIPATED RESULTS: Data