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Exploring communication and collaboration at the Mount Sinai Health Hackathon: a social network analysis

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OBJECTIVES/SPECIFIC AIMS: The study aims to (1) investigate the structural patterns of professional communication that exist at the Mount Sinai Health Hackathon (2) explore if and how the professional networks of the participants change after engaging in the Mount Sinai Health Hackathon (3) explore any associations between the characteristics of participants' professional networks and successful innovation development. **METHODS/STUDY POPULATION:** The recruitment pool consists of all 78 Mount Sinai Health Hackathon 2018 participants. Characteristics of the social network of Health Hackathon participants are assessed via an SNA data collection instrument at three time points: T1 directly before the Health Hackathon event, T2 directly after the event, T3 six months post-event. The Icahn School of Medicine at Mount Sinai Institutional Review Board approved this study as exempt. In order to explore patterns of communication between Health Hackathon participants during event, whole network data is collected at T2. Participants are provided with a roster of Mount Sinai Health Hackathon participant names and asked to report the nature, frequency and perceived importance of their interaction with each of the other participants over the duration of the 48 hour event. In order to capture any network change in the wider professional networks of the individual participants, known as "ego networks", participants are asked to complete an SNA ego network survey at time points T1, T2 and T3. Open ended questions asked participants to report up to 20 people they consider being most important to them in their professional network and record the professional background of each person, the nature of the communication and the importance of each person to their success. Finally, at T3 participants are also asked to report on their project success (determined by businesses formed, filed provisional patents, financial income generation). This will be reviewed in relation to their social network data, to see if there is any relationship between the two. Data is analyzed using the specialized SNA software, UCINET, which creates network sociograms to visualize network data. Descriptive statistics are used to report individual-level characteristics of respondents. **RESULTS/ANTICIPATED RESULTS:** To describe the structural patterns of communication at each time point, the following network-level indices are calculated: density (a measure of network cohesion), degree centrality (how many connections the individual has), betweenness centrality (whether the individual provides connections to other people in a network) and closeness centrality (how close the individual is to other people in the network). Network sociograms are generated for each time point to provide a visualization of the network. To explore the hypothesis that participating in the Mount Sinai Health Hackathon increases diversity of a professional network, analysis will focus on whether and how network-level indices change pre- and post- Hackathon. It will also explore any association between network characteristics and project success. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Social Network Analysis of the Mount Sinai Health Hackathon provides an understanding about the structure of relationships that are formed as a result of participation in this event. Although, the design of this study does not allow for inferences of causality, the SNA approach enables an in-depth exploration of Hackathon participants' professional networks, how these evolve over time and how certain network characteristics may be associated with project

success. This information will be used to inform the development, content and delivery of future Health Hackathon initiatives.

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How to write your first scholarly journal article using reporting guidelines as a template

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OBJECTIVES/SPECIFIC AIMS: The objective of this session is to support and encourage novice, unpublished researchers to turn their poster content into a manuscript publishable in a scholarly journal, by showing them concrete steps to follow and research study reporting standards to use as a template. **METHODS/STUDY POPULATION:** We will cover the following topics: choosing a journal, finding the journal's requirements, locating the reporting standard for the study type (e.g., CONSORT for randomized trials), and structuring the manuscript appropriately per International Committee of Medical Journal Editors (ICMJE) recommendations (e.g., Introduction, Methods, Results, and Discussion). **RESULTS/ANTICIPATED RESULTS:** It is anticipated that by the end of the session, attendees should be able to: Select an appropriate journal; Organize a manuscript according to ICMJE guidelines; Compose a manuscript based on the applicable reporting standard (e.g. CONSORT). **DISCUSSION/SIGNIFICANCE OF IMPACT:** Providing novice researchers with information and resources that demystify the process of writing a manuscript suitable for a scholarly journal, is expected to bolster their confidence and increase the likelihood they will create and submit publishable manuscripts; thereby improving the dissemination of research findings and increasing research impact.

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Implementation of Instructional Design through a Learning Management System to Engage Scholars in Novel Methodologies Health Disparities Research Tracks

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OBJECTIVES/SPECIFIC AIMS: This project presents the implementation of research tracks instructional design using a learning management system (LMS). **METHODS/STUDY POPULATION:** On January 2018, a Novel Methodologies in Health Disparities Research Symposium was held, with participation of local and national collaborators. The purpose was to identify the most important areas of knowledge, essential skills, available online resources and conferences associated with each research track. The recommendations provided contributed to the instructional design of novel methodologies research tracks aiming to improve health disparity research. The LMS includes general documents, instructional materials and assessment instruments, among others. Scholars are required to comply with 30 contact hours. The content and strategies utilized will be evaluated. **RESULTS/ANTICIPATED RESULTS:** Active scholar participation through the LMS is expected. Evaluation results will reflect the strengths and challenges of the implementation of instructional design. **DISCUSSION/SIGNIFICANCE OF IMPACT:** This strategy will engage scholars in an active learning experience enhancing their career development as independent researchers to eliminate health disparities.