characteristics may be associated with not only coronary artery disease, but also multiple chronic conditions. Having sleep disorders and reduced circadian amplitude can be associated with white matter microstructure and functional connectivity. These collaborations provided multiple funding and publication opportunities. DISCUSSION/SIGNIFICANCE: Interdisciplinary team research is important to enhance translational science. Although challenges were identified, using multiple methods and dataset sources with multidisciplinary team members enabled opportunities to explore multifaceted topics related to sleep and brain aging.

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*Extrapulmonary Gas Exchange Through Peritoneal Perfluorocarbon Perfusion*

Joshua L. Leibowitz, Warren Naselsky, Mahsa Doosthosseini, Kevin Aroom, Aakash Shah, Gregory J. Bittle, Jin-Oh Hahn, Hosam K. Fathy and Joseph S. Friedberg

1University of Maryland

OBJECTIVES/GOALS: For patients suffering from respiratory failure there are limited options to support gas exchange aside from mechanical ventilation. Our goal is to design, investigate, and refine a novel device for extrapulmonary gas exchange via peritoneal perfusion with perfluorocarbons (PFC) in an animal model. METHODS/STUDY POPULATION: Hypoxic respiratory failure will be modeled using 50 kg swine mechanically ventilated with subatmospheric (10-12%) oxygen. Through a midline laparotomy, two cannulas, one for inflow and one for outflow, will be placed into the peritoneal space. After abdominal closure, the cannulas will be connected to a device capable of draining, oxygenating, regulating temperature, filtering, and pumping perfluorodecalin at a rate of 3-4 liters per minute. During induced hypoxia, the physiologic response to PFC circulation through the peritoneal space will be monitored with invasive (e.g. arterial and venous blood gases) and non-invasive measurements (e.g. pulse oximetry). RESULTS/ANTICIPATED RESULTS: We anticipate that the initiation of oxygenated perfluorocarbons perfusion through the peritoneal space during induced hypoxia will create an increase in hemoglobin oxygen saturation and partial pressure of oxygen in arterial blood. As we expect gas exchange to be occurring in the microvascular beds of the peritoneal membrane, we expect to observe an increase in the venous blood oxygen content sampled from the inferior vena cava. Using other invasive hemodynamic measures (e.g. cardiac output) and blood samples taken from multiple venous sites, a quantifiable rate of oxygen delivery will be calculable. DISCUSSION/SIGNIFICANCE: Peritoneal perfluorocarbon perfusion, if able to deliver significant amounts of oxygen, would provide a potentially lifesaving therapy for patients in respiratory failure who are unable to be supported with mechanical ventilation alone, and are not candidates for extracorporeal membrane oxygenation.

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*A TL1 Team Approach: Physician Strategies to Promote Physical Activity Among Youth with Comorbid Asthma and Overweight/Obesity*

Natalie C. Koskela-Staples, Jacqelyn L. Yourell, MS, Jennifer L. Doty and David A. Fedele

1University of Florida, ABPP

OBJECTIVES/GOALS: Youth with comorbid asthma and overweight/obesity (OW/OB) are at risk for increased morbidity. Physical activity (PA) engagement can mitigate risks, but the majority of youth do not meet national PA guidelines. This study examines caregiver and youth perspectives about ways physicians can promote PA in this population. METHODS/STUDY POPULATION: Participants included 20 adolescents (M age = 16.0; 55% male) with asthma and OW/OB and a primary caregiver (90% mothers). Caregivers and adolescents participated in separate semi-structured interviews about adolescent PA engagement, including questions regarding strategies for physicians to promote PA. Interviews were audio recorded, transcribed, and analyzed using NVivo. Two authors assigned conceptual codes to the transcripts to identify key concepts and then met to create a codebook. Authors independently coded 4 transcripts and met to resolve discrepancies. Authors then independently coded 2 additional transcripts (final kappa = .62) and met to reach consensus before dividing the remainder for coding. Codes were collapsed and sorted into themes, and attributes of each theme were determined. RESULTS/ANTICIPATED RESULTS: Dyads discussed the importance of physicians providing general (positive statements) and PA-specific encouragement. Dyads also stated that physicians should encourage teens to set and reach PA-related goals. Caregivers and youth reported that physicians should provide education about the importance of PA and ways to engage in PA, awareness about adolescents weight and its impact on health, and resources (camps, events, and locations). Additionally, caregivers and a teen noted that physicians should talk directly to and address questions toward teens. Dyads mentioned the importance of focusing on overall health (instead of weight) as well. Dyads also noted that physicians should avoid judgmental and shaming statements when talking about weight. DISCUSSION/SIGNIFICANCE: Results provide information about strategies physicians can use to promote PA among adolescents with asthma and OW/OB, a population that is at risk for low PA and poor health outcomes. Findings suggest that physicians may effectively motivate behavior change by providing health guidelines, encouragement, resources, and positive reinforcement.

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*Impact of Maternal Diabetes on Neonatal Body Composition, Energy Homeostasis and Hypothalamic Salivary Gene Expression*

Dara Azuma, Yvette Penner RD, Tomoko Kaneko-Tarui, Taysir G. Mahmoud, Patrick Catalano, Perrie O’Tierney-Ginn and Jill L. Maron

1Tufts Medical Center, 2Mother Infant Research Institute at Tufts Medical Center and 3Women & Infants Hospital

OBJECTIVES/GOALS: Infants of diabetic mothers (IDMs) may exhibit decreased oral intake, requiring nasogastric feedings and prolonged hospitalization. We hypothesize that increased insulin exposure and resulting overgrowth in utero disrupts hypothalamic regulation of food intake, correlates to body composition and impacts feeding in IDMs. METHODS/STUDY POPULATION: Infants born at ≥35 weeks gestation to mothers with gestational or type II diabetes (IDM cohort), and normoglucose mothers (control cohort) were recruited. Infants born to mothers with Type I DM or preeclampsia and with a history of intrauterine growth restriction, opioid exposure, or major congenital anomalies were excluded. Salivary expression of known hunger signaling genes 5AMP-activated protein kinase (AMPK), Neuropeptide Y receptor Y2 (NPY2R), leptin (LEP), ghrelin (GHRL), proopiomelanocortin (POMC), and adiponectin (ADIPOQ) were quantified using RT-
qPCR. Body composition was assessed via skinfold measurements and compared and correlated between cohorts. Feeding outcomes were recorded. RESULTS/ANTICIPATED RESULTS: 23 infants were recruited in each cohort. POMC and AMPK were expressed by 71% and 88% of infants respectively in both cohorts. NPY2R was expressed by 79% and 83% of the diabetic cohort and normoglycemia cohort respectively, while GHRL was expressed by 75% and 79% of the diabetic cohort and normoglycemia cohort, respectively. LEP and ADIPOQ were not reliably expressed in either cohort. Infants with a higher body fat percentage were less likely to express NPY2R (OR= 0.76). There was no significant association between body fat percentage and expression of AMPK, POMC, or GHRL. Only 3 IDMs were noted by providers to exhibit poor oral intake, limiting our ability to correlate gene expression and body composition with feeding outcomes. DISCUSSION/SIGNIFICANCE: Non-invasive assessment of hunger signaling gene expression is possible through salivary analysis of AMPK, POMC, NPY2R, and GHRL. Given the paucity of IDMs with poor feeding in our study, future studies should target IDMs requiring feeding support to understand mechanisms driving aberrant feeding behavior.

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An Example for Establishing a Clinically Translational Innovation Lab at a University Setting

Max Kerensky1, Joshua C Doloff1, Nitish Thakor1, Nicholas Theodore2 and Amir Manbachi1

1Johns Hopkins University

OBJECTIVES/GOALS: This poster shares a case study on how a group at The Johns Hopkins University formed a translational lab missioned to reinvent currently existing treatments for acute spinal cord injuries, implanting in humans within a five-year window. The poster showcases how a project funded by the Defense Advanced Research Projects Agency has been implemented. METHODS/STUDY POPULATION: The translational team; Holistic Electrical; ultrasonic and Physiological Interventions Unburdening those with Spinal cord injury• (HEPIUS) Lab is composed of many parts as listed below: neurosurgeons; engineers; radiologists; public health specialists; statisticians; patient advocates; ethicists; sonographers; researchers; academic collaborators; and specialized industry partners. Sometimes physically separated; the team has videoconferencing carts across locations to stay connected at every step in the process. The lab facilities were organized with several key facets in mind: research and development (R&D); prototyping; fabrication; verification; and validation (V&V); animal model testing; cadaveric testing accessibility; mock operating room for simulations; and collaboration hubs. RESULTS/ANTICIPATED RESULTS: Due to communications with the US Food and Drug Administration (FDA), DARPA, patient advocates, ethicists, internal review boards, and other bodies, the team has a clear path towards clinical translation. The team has the following stages in progress or scheduled: manufacturing devices, benchtop testing, rat and pig models, biocompatibility testing, cadaveric testing, and clinical use. The lab space was designed to achieve these core functions. For rapid, in-house manufacturing, the lab has unique capabilities including 3D metal printing. For experiments, industry collaborations and equipment acquisitions enable the highest quality research. These technologies are assembled into diagnostic, therapeutic, testing, and manufacturing hubs to drive real change in the lives of many; the patient comes first. DISCUSSION/SIGNIFICANCE: This laboratory, team, and system of operation is aimed to enable novel practices for the clinical translation of spinal cord medical solutions. For researchers interested in launching their own translational work, this poster may serve as a reference, example, and inspiration for similar hopeful university-centered hubs.

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The Team Science Landscape within the National COVID Cohort Collaborative (N3C)

Gabriella Tangkilisan1 and Anita Walden1

1Oregon Health & Science University

OBJECTIVES/GOALS: As question complexity in science and medicine increase, the need for teams with diverse skill sets grows as well. We identify essential roles and barriers that define the team environment within the National COVID Cohort Collaborative (N3C), an initiative grounded in interdisciplinary team science. METHODS/STUDY POPULATION: This work was compiled through a combination of observations, interviews, and survey responses involving members of the N3C research community, specifically those involved in N3C workstreams and clinical domain teams. Observational data was obtained through participation in N3C workstream activities and domain team research and meetings. The survey included five questions related to team science elements and barriers, as well as contrasting science-based teams and non-science-based teams, such as “What elements are common between both Team-Science and non-Team-Science teams?”, and was sent to members of two domain teams: Immunosuppressed and Compromised and Social Determinants of Health. RESULTS/ANTICIPATED RESULTS: Team science within N3C has a unique structure of roles and barriers that define the team environment of each project. Within each group, team and role management within team science is an ongoing process that occurs even after a team is formed. We obtained 8 survey responses that indicated communication, attribution, team management, collaboration, interdisciplinary diversity, and problem solving were key aspects to successful team science. Additionally, survey respondents identified prominent barriers to successful team science that included bandwidth constraints, lack of a shared scientific language, learning curves, funding, and lack of communication. DISCUSSION/SIGNIFICANCE: Communication was identified as a key component of team science and a prominent barrier, which indicates that successful team science relies on communication between team members. Thus, it is vital that teams identify and commit to using predefined methods of communication to function effectively.

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Reframing the JTF Clinical Trial Competencies from a CRP Team Science Perspective

Robert H. Kolb1, Carolynn Jones2, Jessica Fritter2, Karen Carter2, Nicole Summerside3, Nicole Exe4, Jennifer Sprecher3, Elizabeth Kopras5, Ty Saldana2, David Aslaner2, Laura Hildreth2, Nopporn Thanthraeng6, Katherine Owens7, JT Means2 and Bernadette Capili8

1University of Florida, 2The Ohio State University, 3University of Washington, 4University of Michigan, 5University of Cincinnati, 6Harvard (Mass General Hospital) and 8University of Alabama at Birmingham and 8Rockefeller University

OBJECTIVES/GOALS: Our goal is to explore and collaboratively identify the team science competencies essential for Clinical Research Professionals at all experience levels and how these