or slow the onset of Alzheimer's disease. OBJECTIVES/GOALS: This study examines the association between cognitive and physical resilience and Alzheimer's disease in a Tibetan Buddhist monastic community in southern India. METHODS/STUDY POPULATION: The study will employ mixed methods of semi- and unstructured interviews and surveys. The interviews will be conducted among 60 monks of age 50+ in six Tibetan monastic colleges in southern India. The interviews will comprise general questions related to monks' monastic educations and practices, as well as clinical cognitive interviews. Interviewees will be randomly sampled from a census of monks at the six monasteries. Owing to COVID-19 crisis, we will begin data collection, starting with interviews via zoom in mid-December 2020. The survey, which includes demographic information, cognitive assessments, meditative practices, health, memory and physical activity, will be conducted among 400 monks. The survey will be performed onsite and is tentatively scheduled in the summer of 2021. RESULTS/ANTICIPATED RESULTS: The study will help to identify factors associated with physical and cognitive resilience and develop measures to quantify and describe meditative and cognitive practices. These data will be used to both adapt validated measures developed in Western populations for use with this unique population and to develop new items on physical and cognitive resilience to include in the planned survey. Furthermore, the study will provide information about the prevalence of Mild Cognitive Impairment and Alzheimer's disease and related dementias in this population and development of the survey to capture culturally appropriate measures, including on meditation. The findings could eventually lend us insights into behavioral intervention that could potentially prevent or slow the onset of Alzheimer's in wider population. DISCUSSION/SIGNIFICANCE OF FINDINGS: Cognitive and physical resilience are understood to confer significant benefits to health outcomes and healthy aging. However, the factors related to resilience, particularly in older adults, are poorly understood. This study will estimate the link between frequency and intensity of meditative practices and physical and cognitive resilience.

Biopsychosocial Determinants of Pain Assessment and Management - Medical and Surgical Trainees' Perspective

97448

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ABSTRACT IMPACT: Better understanding how clinicians make decisions about pain management, particularly since our prior research has demonstrated that opioids prescribed at discharge is the strongest predictor of opioids taken, is critical to decrease high-risk medication prescribing while preserving high-quality care. OBJECTIVES/GOALS: (1) Identify major biological, psychological, and social determinants of medical and surgical residents' pain management decisions; (2) Determine salient themes regarding the experience of residents in the management of acute and chronic pain METHODS/STUDY POPULATION: Focus groups of internal medicine and general surgery residents at an academic, tertiary care training hospital located in an urban setting were conducted. Due to the COVID-19 pandemic, all focus groups were conducted virtually and occurred during required didactic sessions to facilitate participation. All interviews were recorded and transcribed. Two reviewers independently reviewed and coded the data following the principles of constructivist grounded theory. RESULTS/ANTICIPATED RESULTS: 42 residents participated in ten focus groups ranging in size from two to five individuals. Six themes emerged demonstrating salient BPS factors in pain management decisions: (1) patient and clinician expectations determine what is considered normal/acceptable; (2) inability of pain scales to reliably capture patient pain; (3) desire for more objective methods of pain assessment, while simultaneously recognizing that pain is an inherently subjective experience; (4) difficulty in determine when pain is 'real' or 'legitimate'; (5) lack of education and protocols regarding pain management; (6) the importance of engaging other services such as acute pain service or nurse educators in complicated situations. Junior residents often expressed doubt in the appropriateness of their approaches and decisions. DISCUSSION/SIGNIFICANCE OF FINDINGS: Surgical and medical trainees routinely treat pain and may struggle, particularly in the early phases of training, to determine if pain levels are appropriate. There is also a lack of education and/or best practices for assessing and managing pain. These areas represent high-value, clinician-focused targets for future interventions to improve care.

Education/Mentoring/Professional and Career Development

55179

An assessment of understandability and actionability in breast cancer survivorship print materials

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ABSTRACT IMPACT: Our results reveal a limited amount of breast cancer survivorship print materials as both understandable and actionable, and indicate a need to supplement material with personalized teaching. OBJECTIVES/GOALS: Using educational print material for young women breast cancer survivors (YBCS) is considered a best practice in patient teaching. Little is known about how well YBCS understand or act upon the material. The purpose of this study was to assess the understandability and actionability of commonly distributed breast cancer survivorship print materials. METHODS/STUDY POPULATION: We used an environmental scan approach to obtain breast cancer survivorship print materials available in eight outpatient oncology clinics and one electronic medical record used in a Midwestern state. Print materials were included if they were freely available to patients, were specific to breast cancer, provided detailed information about survivorship, and were directly given to patients by physicians or nurses. Print materials were excluded if topics were related to treatment, diagnosis, or prevention. All brochures, drug advertisements, and advertisements for support services were excluded. The understandability and actionability analyses of the breast cancer survivorship print materials were analyzed using Patient Education Materials Assessment Tool for Printable Materials (PEMAT-P). RESULTS/ ANTICIPATED RESULTS: The environmental scan resulted in 82 individual print materials. After applying the inclusion and exclusion criteria, eight breast cancer survivorship print materials were included in the final sample. The final sample included two books, two patient education handouts from the electronic medical record,