that three investigators found the ICON service to be highly valuable (highest ranking), overall, the mean value was 4.1 on a 5-point Likert scale. The written feedback from the investigators indicated that the service would have been more useful earlier in the pilot award process, such as prior to submission. The ICON team continues to execute the individualized assistance plan for each investigator and will provide tailored assistance at the 6- and 12-month check-ins to meet the investigator's needs. We will survey the investigators quarterly for feedback on the usefulness of the service. DISCUSSION/SIGNIFICANCE OF IMPACT: Survey feedback indicates the value of the ICON service but suggests that for some the consultation was delayed. The ICON team will continue to check-in with this cohort to determine if further assistance is needed. In the future, ICON will meet with awardees earlier in the application process.

468

Strengthening translation through multidisciplinary expertise: The impact of the feasibility review

Nicole Tosun, Alissa Jorgenson, Katherine Ingram, Ryan Lee, Ryan Thiel, Brenda Prich, Mahrya Johnson, Jessica Oslowski and Melena Bellin
University of Minnesota

OBJECTIVES/GOALS: To achieve the greatest impact, protocols must be rigorous and feasible. The University of Minnesota's Clinical Research Support Center developed a feasibility review (FR) to identify barriers, offer solutions, and strengthen translation through multidisciplinary expertise. Improvements are tracked using an Impact Scoring System.

METHODS/STUDY POPULATION: Established in 2018, the FR was designed to address operational barriers that delay study start-up and help researchers strengthen protocols before regulatory submission and implementation. Drafts are reviewed by a multidisciplinary panel with expertise in logistics, recruitment, biostatistics, monitoring, and regulation. Each protocol undergoes a 1-week review process culminating in a 90-minute structured discussion between the panel and study team. A written report summarizes strengths, concerns, available resources, and next steps. To assess impact, we developed a novel scoring system that assigns each protocol a pre- and post-review score, objectively measuring how protocols improve in response to feedback. RESULTS/ANTICIPATED RESULTS: Since its launch, 186 clinical studies from nine schools and colleges have completed FR. Study teams report high satisfaction (average rating 4.8/5), noting clearer recruitment plans, improved logistics, and valuable resource connections. The Impact Scoring System provides measurable evidence of change: on average, protocols increased their score by 28% from pre- to post-review, reflecting greater operational readiness and likelihood of success. Tracking also shows that FR participation is associated with fewer protocol-related IRB stipulations, offering an additional objective indicator of improved quality. Together, these results demonstrate both the perceived value and the measurable operational impact of the FR process. DISCUSSION/SIGNIFICANCE OF IMPACT: The FR addresses operational barriers early, ensuring protocols are both rigorous and feasible before launch. Its Impact Scoring System provides objective evidence of improvement and a scalable model other institutions can adopt to advance rigor, efficiency, and trustworthy translation.

469

Mapping CTSA resources and services within an institutional research infrastructure

Abbey Fisher
Penn State Clinical and Translational Science Institute

OBJECTIVES/GOALS: The PSCTSI provides critical resources and services at PSU/PSCOM. Our objectives are to map PSCTSI resources among the PSU/PSCOM research infrastructure, increase researcher knowledge of resources, services, and processes, and ensure improved PSCTSI integration within the research infrastructure. METHODS/STUDY POPULATION: PSCTSI will utilize process and resource mapping techniques and systems analysis to align our services and resources within the PSU/PSCOM research infrastructure. Methods: Identify and map PSU/PSCOM research infrastructure processes, services, offices, and resources. Identify and map PSCTSI resources and services within the PSU/PSCOM infrastructure. Highlight areas where PSCTSI resources and services fill critical gaps in the PSU/PSCOM infrastructure RESULTS/ANTICIPATED RESULTS: Navigating the research process is often confusing for researchers, especially where there are gaps within the infrastructure. Process and resource mapping techniques and systems analysis can provide a complete picture of PSCTSI's vital role and impact on the PSU/PSCOM research infrastructure. Results of this analysis will benefit three audiences: PSU/PSCOM researchers – to better understand research processes, PSU/PSCOM research leadership – to illustrate the importance and synergy of PSCTSI within the research infrastructure, and PSCTSI and other CTSAs – to share their impact and ensure improved integration DISCUSSION/SIGNIFICANCE OF IMPACT: CTSAs rely on external and potentially institutional support despite their essential roles within the research infrastructure. Resource and process mapping of PSCTSI within PSU/PSCOM's infrastructure has two benefits: improving knowledge on resources and services and ensuring improved integration.

470

Assessing clinical trial accrual monitoring practices across CTSA intuitions

Alexandria Moellner and Nasia Safdar
UW-Madison

OBJECTIVES/GOALS: Institutional clinical trial accrual metrics and associated monitoring practices are insufficiently characterized and

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 18 Nov 2026 at 06:25:40, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/cts.2026.10607