

These products spanned a diverse range of functions including device data and decision support systems. Although 11 had clinical trial data demonstrating efficacy, only 4 had data demonstrating both efficacy and safety. Two of the regulated applications were subject to product recalls due to programming errors that resulted in incorrect insulin dose recommendations. These two applications had clinical trials evaluating efficacy but not safety. The companies noted that the incorrect insulin calculation from their respective mHealth app could cause either a low- or high-impact hypoglycemic event. **DISCUSSION/SIGNIFICANCE OF IMPACT:** With little to no clinical trial data to support their safety and efficacy, mHealth apps in the diabetes marketplace pose risks for patients as evidenced by recent safety-related recalls. The results of this study indicate that these products may need to be more tightly regulated.

4016

### Combined Eating Disorder and Weight-Loss Online Guided-Self Help Intervention: Updated Results from an Ongoing Pilot Study

Grace Elise Monterubio<sup>1</sup>, Ellen E. Fitzsimmons-Craft, PhD, and Denise E. Wilfley, PhD

<sup>1</sup>Washington University in St. Louis, Institute Of Clinical and Translational Sciences

**OBJECTIVES/GOALS:** Aims 1&2: Develop (1) and implement (2) online, guided self-help intervention for ED psychopathology and weight reduction. Aim 3: Follow-up to track remission of ED psychopathology and symptoms and WL maintenance at end of treatment and 6-months. **METHODS/STUDY POPULATION:** N = 60 college students meeting criteria (clinical/sub-clinical binge-type ED with BMI > 25) will complete a baseline survey and then will be randomized into a condition. Students in the intervention group (n = 30) will be offered 8 weeks of an online, guided self-help intervention for ED and WL. Students in the control group (n = 30) will receive an email message to seek support from Student Health Services. All participants will receive follow-ups 9 weeks and 6 months after baseline. Data analysis will compare Eating Disorder Examination Questionnaire (EDE-Q) scores and WL (change in BMI) at all three time-points. Group comparisons will be assessed via two-way mixed-model ANOVA. **RESULTS/ANTICIPATED RESULTS:** Recruitment is still ongoing. Data collected by the time of the conference will be presented on the poster. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Online, guided self-help interventions have been used for WL, as well as for treatment of EDs separately, but no program exists to manage these commonly comorbid conditions concurrently. Thus, this pilot study will examine the effectiveness of combined programs to breach this treatment gap.

4101

### Creating a Culturally Sensitive Report Card for African American (AA) Kidney Transplant Candidates

Warren McKinney<sup>1</sup>, Marilyn J. Bruin<sup>2</sup>, Sauman Chu<sup>2</sup>, Bertram L. Kasiske<sup>3</sup>, and Ajay K. Israni<sup>3</sup>

<sup>1</sup>University of Minnesota CTSI; <sup>2</sup>University of Minnesota - College of Design; <sup>3</sup>Hennepin Healthcare Research Institute

**OBJECTIVES/GOALS:** AA are over-represented on the waitlist for kidney transplant and are often unaware of how waitlist acceptance practices differ across transplant programs and influence access to transplant. We will develop a culturally sensitive transplant program

report card to communicate these variations. **METHODS/STUDY POPULATION:** Scientific Registry of Transplant Recipients (SRTR) data will be used to identify clinical factors strongly associated with AA access to transplant. Interviews and focus groups with AA kidney transplant candidates and their families will collect feedback on the SRTR report card and inform the development of the culturally sensitive report card. Additional focus groups will evaluate its effect on knowledge and medical decision making. We will collaborate with the stakeholders, including AA transplant candidates and their families, transplant programs, SRTR, and providers, to identify strategies to disseminate the report card in the AA community. **RESULTS/ANTICIPATED RESULTS:** To date, no investigation has systematically collected feedback on the SRTR transplant program report card from AA candidates to ensure that the tool is accessible and effective in the AA community. We hypothesize that a culturally sensitive report card will improve AA candidates' knowledge of program factors that impact access to transplant and enable informed decisions about where they pursue a transplant evaluation. The results of this study have the potential to change how AA patients are counselled while seeking transplantation. **DISCUSSION/SIGNIFICANCE OF IMPACT:** A culturally sensitive report card can reach more AA patients and enable more informed decision making by providing education about differences in transplant programs that may impact their access to transplant. In the future, we will design a trial to evaluate the prototype.

4056

### Dementia family caregivers' mobile app use and intention to adopt mHealth apps<sup>†</sup>

Kyra Jennifer Waligora Mendez<sup>1</sup>, and Hae Ra Han<sup>2</sup>

<sup>1</sup>Johns Hopkins University School of Medicine; <sup>2</sup>Johns Hopkins University School of Nursing

**OBJECTIVES/GOALS:** To describe preliminary results of Alzheimer's and dementia caregivers' (CGs) mobile app use and intention to adopt mHealth apps for their own chronic condition self-management. To discuss implications for designing and implementing mHealth interventions for CGs. **METHODS/STUDY POPULATION:** This study aims to recruit 110 racially and ethnically diverse family caregivers (CGs) who have a chronic condition, provide care for persons with Alzheimer's disease or related dementias, and have access to a mobile device. This is a cross-sectional correlational study collecting data with computer-assisted telephone interviews stored through REDCap. The study survey was created using existing surveys about mobile app use; relevant, well-validated research instruments; and questions from the U.S. Census and other national surveys. CGs are being actively recruited from the Baltimore-Washington metropolitan area using various recruitment strategies that have been effective in prior studies. **RESULTS/ANTICIPATED RESULTS:** The majority of CGs used websites (86%), mobile devices (68%) or apps (53%) to manage their own health. CGs using health-related apps were tracking their exercise (60%), diet (60%), medical records (50%), and physical health measures (50%). More than 4 out of 5 (82%) predicted they would use mobile apps to self-manage their chronic condition, though only 68% actually planned to use them. 86% of CGs were using mobile apps for non-health related purposes, with the most popular app being weather (90%), followed by social media (74%), music/entertainment (68%), and banking/business apps (63%). CGs used weather and social media apps most often (2 or more times/day) and spent 9 hours/week on apps. **DISCUSSION/SIGNIFICANCE**