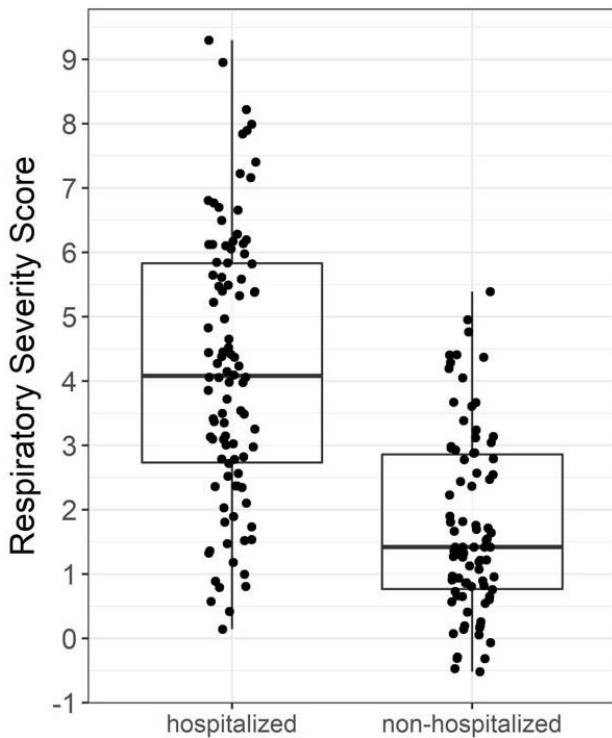


Boxplot demonstrating the difference in GRSS between hospitalized and non hospitalized infants



Conclusion: Infants hospitalized with RSV have a significantly higher GRSS than non-hospitalized subjects, and the GRSS is strongly associated with LOS. GRSS can also serve as an acceptable predictor of hospitalization. We are currently re-training the GRSS model with both datasets and believe it will lead to an improved predictive power of hospitalization.

Disclosures: All Authors: No reported disclosures

134. idweek Clinician Educator Mentoring Program for Junior Faculty

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Background: Effective career mentorship enhances well-being, productivity, and advancement in academic medicine. The pathway to success for clinician educators (CE) is often

ill-defined. Career development resources and support for this pathway vary across institutions. To address this need, we created a mentoring program pairing junior faculty pursuing careers as CEs with more experienced CEs from other institutions during IDWeek 2018 and 2019.

Methods: Prior to IDWeek 2018 and 2019, a survey was sent through the IDSA listserv to identify members pursuing CE careers interested in extra-institutional career mentorship. These faculty were paired with mentors who were established career CEs identified via the IDSA Medical Education Workgroup. Mentees completed a brief individual development plan (IDP) and identified 3 discussion topics. Mentors received the mentee's IDP and CV prior to IDWeek and were given brief guidance on successful mentoring. One hour advising sessions were held during IDWeek and ended with the creation of a mentee action plan and a scheduled follow-up call. Post-participation surveys were sent to mentees and mentors.

Results: 31 different mentees and 15 mentors participated in the program over two years. 26 (84%) mentees completed the post-session survey. 25 (96%) mentees and 14 (93%) mentors reported being very satisfied with their meetings at IDWeek. All mentees created an action plan with their mentor. 16 (62%) strongly agreed and 10 (38%) somewhat agreed that they planned to make changes based on the meeting. 21 (81%) mentees strongly agreed they received advice they were unable to get at their own institution. After the session, 18 (69%) strongly agreed they felt connected to a supportive CE community at IDSA; none strongly agreed in the pre-survey. All mentors and mentees agreed that this program was a resource that IDSA should consider expanding. Qualitative response themes from mentees emphasized the usefulness of an external perspective.

Conclusion: A mentoring program for junior faculty during IDWeek was feasible and effective for CEs. Through these interactions, mentees planned changes to enhance their careers and felt newly supported by the IDSA community. This model could be used for other ID career paths at future meetings.

Disclosures: All Authors: No reported disclosures

135. Impact of #idjclub, a Synchronous Twitter Journal Club, as a Novel Infectious Disease Education Platform

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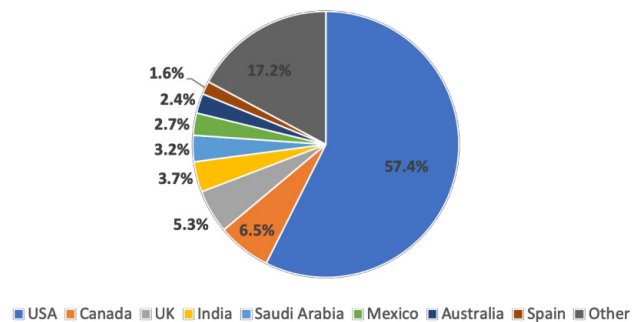
Session: O-26. ID Medical Education

Background: Journal clubs have been a mainstay of medical education since the days of Osler. Social media platforms allow virtual journal clubs to connect global participants. We describe the creation and impact of #IDJClub, an Infectious Diseases (ID) Twitter journal club.

Methods: We launched #IDJClub in October 2019. The format presents a recent ID publication for a 1-hour synchronous Twitter chat led by an ID physician from @IDJClub. Sessions started monthly, but increased in frequency due to interest during the COVID-19 pandemic. Pre-scripted tweets guide participants through the article description and analysis. We used Symplur's Healthcare Hashtag project to track the number of impressions, tweets, participants, and the engagement rate (average tweets/participant) of #IDJClub per 60 minute discussion plus the following 30 minutes to capture ongoing conversations. We also conducted an online anonymous survey using Likert scales and open-ended questions to assess educational impact.

Results: As of June 11 2020, @IDJClub garnered 5,338 followers from around the world (Figure 1). In its first 9 months, 12 virtual journal clubs were conducted with a mean of 791,624 impressions, 328 tweets, and 48 participants per session, which steadily increased over time (Figure 2). A total of 134 participants completed the survey, of whom 40% were ID physicians, 19% pharmacists, 13% ID fellows, and 10% medical residents. Most respondents followed 1-2 (38%) or 3-4 (38%) of the discussions, with variable levels of active participation. Majorities agreed that #IDJClub provided clinically useful knowledge, increased personal confidence in review of literature, and compared favorably with in-person journal clubs (Figure 3). The format addressed several barriers such as lack of access to in-person journal clubs or subject experts at one's own institution and lack of time to read new research or attend traditional journal clubs (Figure 4).

Figure 1. Global Distribution of @IDJClub Twitter Followers (as of June 11, 2020; N=5,338)



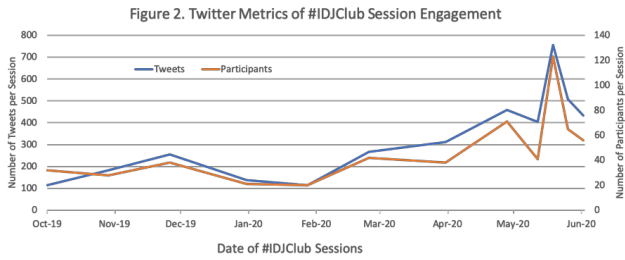
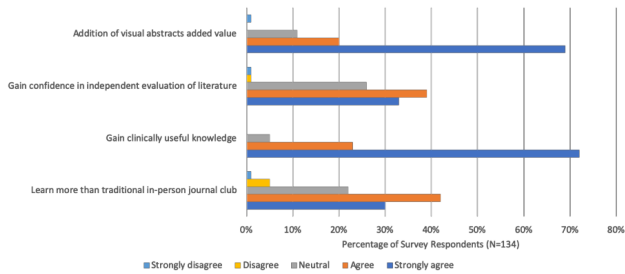
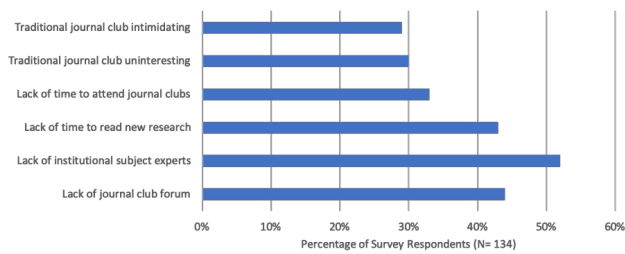


Figure 3: Survey of Educational Value of #IDJClub Sessions



Conclusion: #IDJClub is an effective platform for virtual journal club, providing an engaging, open-access tool for critical appraisal of ID literature. This innovation in medical education overcomes several barriers to traditional journal clubs while fostering professional relationships within the global ID community.

Figure 4. Survey of Barriers Addressed by #IDJClub Format



Disclosures: Todd P. McCarty, MD, Amplyx (Scientific Research Study Investigator)/Cidara (Scientific Research Study Investigator)

136. In Their Own words: a Qualitative Analysis of Factors Contributing to Gender Bias in Academic Advancement in Infectious Disease

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Background: Large and persistent inequities in academic advancement exist between men and women faculty in academic Infectious Diseases (ID). To identify and characterize beliefs about why these inequities persist in ID, we asked ID faculty members to share their thoughts and experiences with the advancement process.

Characteristics of Focus Group Participants

Gender and Level of Faculty	Number of Focus Group Participants	AACSB Region	ES Type	ES Year	Publications	MSI	MSI Diseases
Assistant Professor	11	1 NE	1 Clinical	1	4	3	11
Assistant Professor	11	1 NE	1 Clinical	1	4	3	11
Assistant Professor	11	1 NE	1 Clinical	1	4	3	11
Full Professor	11	1 NE	1 Clinical	1	4	3	11
Full Professor	11	1 NE	1 Clinical	1	4	3	11

Summary of Main Emergent Themes from Focus Group Analysis

Theme	Description
Barriers to academic advancement in ID	Barriers to academic advancement in ID
Gender bias in ID	Gender bias in ID
Work-life balance	Work-life balance
Family demands	Family demands
Professional development	Professional development
Networking	Networking
Research productivity	Research productivity
Teaching	Teaching
Leadership	Leadership
Work-life balance	Work-life balance
Family demands	Family demands
Professional development	Professional development
Networking	Networking
Research productivity	Research productivity
Teaching	Teaching
Leadership	Leadership

Methods: We conducted four 60-minute focus groups with ID faculty members during IDWeek 2019. We enrolled women that were diverse geographically and in academic rank (i.e., Instructor/Assistant, Associate, Full Professor). We assigned women to focus groups by rank to minimize social desirability bias across rank. Our fourth focus group included only men who were Full Professors, to capture additional perspectives about barriers to advancement and solutions. (Table 1) We analyzed focus group discussion transcripts using content analysis.

Results: We identified nine main themes regarding inequities in academic advancement of women in ID. (Table 2) In all 4 focus groups, gender bias as a barrier to academic advancement was a major theme. Women Full Professors emphasized explicit gender bias such as sexual harassment and “predatory mentoring,” whereas women Instructors/Assistant Professors more frequently cited barriers related to implicit bias, such as obscure maternity leave policies and divisional meetings scheduled during childcare hours. Women Associate Professors cited implicit and explicit gender bias, while men Full Professors focused primarily on implicit bias. Women Instructors/Assistant Professors experienced the greatest difficulty in balancing demands of family with career, though this was a prominent theme in all groups. The perception that women less often utilize negotiation to advance themselves was a dominant theme for women Associate Professors, though all groups raised examples of this theme.

Conclusion: Gender bias, both implicit and explicit, is an important and ongoing barrier to equitable academic advancement of women in ID. Difficulty balancing demands of family with career and gender differences in professional negotiation are also perceived barriers that can be targeted by innovative programs and interventions to address gender disparities in academic advancement.

Disclosures: All Authors: No reported disclosures

137. Applying Gamification to Microbiology Core Curriculum in Undergraduate Medical Education

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Session: O-26. ID Medical Education

Background: Gamification uses elements of game design to enhance learner engagement. We introduced a microbiology “trivia game” for first year medical students (MS1), leveraging principles of gamification (self-efficacy, points, leaderboards, etc.) to enhance participation. We hypothesized this would engage learners and improve course performance.

Methods: We created a “microbiology trivia game” using Kaizen-Education, a software platform (Kaizen) developed by our Center for Clinical and Translational Science. All MS1 in the Microbiology course at the University of Alabama at Birmingham (Fall 2019) were invited to participate by downloading the smartphone app. We created 56 questions emphasizing high yield concepts and their clinical application. Participation was voluntary during the Microbiology course (3 weeks). We collected app utilization and test performance data in this IRB approved investigation. We completed descriptive analyses of student engagement including a Player Efficiency Rating (PER). The PER is a student-level composite measure of student accuracy, play frequency and question completion. We calculated Spearman rank correlation of mean exam scores and PER. At course completion students received a survey about their experience.

Results: 181 (96%) of 189 Microbiology students answered ≥ 1 question. Across those 181 students, 161 (89%) completed all questions (table 1). An average of 67 students answered questions each day. Collectively, students answered 96% of all published questions (n=10,136; 56 questions x 181 students). A total of 49% of questions were answered < 24H from publication. Survey response rate was 34% (n=61), and our teaching innovation was positively received (table 2).

Final exam performance increased from 80% (2018) to 87% (2019) among students in the gamification enhanced Microbiology course. A correlation between higher PER and better exam scores was found (0.34; $p \leq 0.0001$).