 <p><b>Mercy</b> MEDICAL CENTER DES MOINES <i>A member of Mercy Health Network</i></p>	GME Department Policy	Page 1 of 4	
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		Reviewed:	January 2017

**POLICY:**

At the discretion of individual program directors, Mercy Medical Center Residency Programs may permit moonlighting by resident physicians with a permanent license in the state of Iowa providing that the moonlighting activities do not interfere with their assigned program responsibilities or academic performance. General Surgery residents may moonlight if their inservice training exam score is at the 50<sup>th</sup>% or higher. The privilege to moonlight will be reviewed on an annual basis.


**PROCEDURES:**

If a residency program permits moonlighting and a resident chooses to participate, the following requirements must be met.


1. The resident must be fully licensed in the state of Iowa.
2. The resident must be in good standing within the residency program.
3. The resident must arrange with the institution where he/she is moonlighting to ensure that they are adequately covered under that institution's malpractice insurance.
4. The resident is prohibited from acting as a consultant, engaging in private specialty practice, or maintaining attending status during the residency program.
5. A Request to Moonlight form must be completed and approved by the Program Director prior to moonlighting. (See Attachment.) Any change in the number of hours that a resident is moonlighting must be submitted on another Request to Moonlight form.
6. Residents must record Moonlighting hours in My.Evaluations duty hours. They will be considered part of the 80-hour work week. Adequate rest periods must follow moonlighting activities prior to clinical duties at Mercy. Failure to do so will result in suspension of moonlighting approval.
7. Additional criteria may be determined by the Program Director.

Each program will monitor moonlighting activity as follows when applicable:

8. If a resident is found to be moonlighting and has not received permission from the Program Director, this will result in disciplinary action up to termination of the resident's contract.
9. The Program Director will monitor residents for sign of fatigue as a result of moonlighting and set limitations as necessary.
10. Any reports of unprofessional or inappropriate conduct from a facility where moonlighting occurs will subject the resident to immediate discipline upon the discretion of the Program Director and/or respective program Education Committee.

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11. If a resident is subject to any academic or non-academic misconduct or disciplinary procedure within the program the resident will not be eligible to request moonlighting privileges. If the resident is currently moonlighting, the resident must immediately terminate any moonlighting activities.

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Attachment: Request to Moonlight Form

\_\_\_\_\_  
Signature 

\_\_\_\_\_  
Title *CMO/DIO*

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MERCY MEDICAL CENTER – DES MOINES

RESIDENCY PROGRAMS

Request to Moonlight

Contracted Service\*: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Moonlighting Location(s): \_\_\_\_\_

Estimated Number of Hours Moonlighting Per Month: \_\_\_\_\_

Duration of Length of Moonlighting Period (if known): \_\_\_\_\_

I hereby consent to the release of information from the contracted service to my residency program for verification of hours worked.

\_\_\_\_\_  
Resident Name

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

.....  
 Approved     Not Approved

\_\_\_\_\_  
Signature of Program Director

\_\_\_\_\_  
Date

Annual review: \_\_\_\_\_

Annual review: \_\_\_\_\_

**\*Residents must complete a form for each contracted service company for which they perform moonlighting services.**