

**POLICY AND PROCEDURES REGARDING  
PROFESSIONAL ACTIVITY OUTSIDE THE TRAINING PROGRAM  
BY HOUSE STAFF PHYSICIANS AND DENTISTS**

**GENERAL STATEMENT:** House staff who wish to engage in professional activity outside of their graduate medical or dental training program (“moonlighting” as defined in this policy) during the period of their appointment, must follow the procedures outlined in this policy. Participation in any professional activity outside the training program should in no way conflict with the assigned clinical and educational responsibilities of the trainee’s program at the University of Iowa Hospitals and Clinics (UIHC) or its formal affiliates. At no time are house staff physicians and dentists required to engage in professional activity outside of their graduate medical or dental training program during the period of their appointment. Each training program at the UIHC shall meet the requirements of this policy, as well as any applicable standard set by the ACGME, the appropriate RRC, other accrediting or certifying body, or applicable statute. Questions regarding approval and scheduling of moonlighting should be directed to the respective Program Director. Failure to adhere to any part of this policy or to follow its procedures can be grounds for immediate dismissal of the house staff member from his/her training program.

**DEFINITION:** Professional activity outside the training program means activities requiring the exercise of professional judgment involving a commitment of the trainee’s time. The term refers to activities involving direct patient care, which are commonly referred to as “moonlighting,” as well as engagements as a consultant on patient care matters. Serving as a utilization review consultant for insurance companies and other organizations or as an expert witness solely for the purposes of advising or testifying regarding the appropriate standard of care is not permitted. However, it is not necessary for house staff to obtain permission as defined in this policy for activities arising out of professional contacts occurring as part of the training program (e.g. testifying at a disability hearing regarding the condition of a patient treated in the course of the trainee’s assigned responsibilities).

**LICENSURE:** All house staff engaged in moonlighting must be licensed for unsupervised medical practice in the state where the moonlighting occurs. A State of Iowa “Resident Physician” or “Resident Dental “ license is not valid for professional activity outside of the training program. The house staff member is solely responsible for obtaining appropriate licensure.

**MALPRACTICE COVERAGE:** The Iowa State Tort Claims Act does not cover any activity outside of the scope of the training program, including moonlighting. Accordingly, each house staff member is personally responsible for obtaining and maintaining professional liability insurance coverage while engaging in any moonlighting activity. During the time an individual is moonlighting, he or she is acting as a private practitioner without any sponsorship by the UIHC or its program directors.

**DUTY HOUR LIMITS:** In-house moonlighting at UIHC will count toward the limits stated in the *UIHC Policy for Resident Supervision and Duty Hours*.

**PROCEDURES:** The following steps must be followed to obtain approval of a moonlighting request:

1. **APPROVAL BY PROGRAM DIRECTOR:** Each respective Program Director is responsible for the approval of moonlighting requests. The Program Director shall evaluate and respond to each request on a case-by-case basis.
2. **COMPLETION OF MOONLIGHTING REQUEST FORM (MRF):** Each approved request shall be documented by the completion in writing of a prospective MRF, which is obtained from the Program Director.
  - a. The MRF shall specify:
    - 1) the name, department, program and level of training of the house staff member
    - 2) the reason for the moonlighting request
    - 3) the type of professional activity to be engaged in
    - 4) the educational value of the planned moonlighting activity
    - 5) the number of hours (specific days and times) involved in the moonlighting request for each specific site
    - 6) the name and phone number of the contact person at the moonlighting site during the moonlighting activity
    - 7) the specific site (name of hospital or clinic, street address and city/state) at which the moonlighting will occur
    - 8) a list of all other current moonlighting sites, updated with each new request
    - 9) the house staff member's permanent medical or dental license number
    - 10) attestation by the house staff member that he/she has arranged for adequate malpractice coverage during the moonlighting activity
  - b. The MRF shall be signed by:
    - 1) the requesting house staff member
    - 2) the Program Director
    - 3) other individuals, as required by the Department (i.e., Department Head, Departmental GME Director, Program Coordinator, etc.).
3. **DURATION OF APPROVAL:** Approval of each request shall be for no longer than a program year. A new request must be made each program year for each moonlighting site. The Program Director, in concert with UIHC, shall monitor performance of such moonlighting. Approval may be revoked at any time during the course of the year, pursuant to program policy or if a resident's moonlighting activity is determined to be adversely affecting his/her performance. .
4. **FILING OF AN APPROVED MRF:** The Program Director must submit the approved MRF to the Graduate Medical Education Office, to be filed in the house staff member's file, prior to the commencement of the approved moonlighting activity.

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