I. PURPOSE
To delineate the conditions under which a resident or Fellow may engage in moonlighting activities and the procedure by which such activities must be requested, approved, recorded and monitored as set forth in the University Policy #00-01-30-10:00 for outside employment while a member of the housestaff.

II. SCOPE
This policy is directed to all members of the housestaff.

III. DEFINITION OF TERMS
Housestaff - refers to all interns, residents and subspecialty residents (fellows) enrolled in a University of Medicine and Dentistry of New Jersey-School of Osteopathic Medicine/ Kennedy University Hospital and Our Lady of Lourdes Medical Center joint residency training programs. A member of the housestaff may be referred to as a housestaff officer.

IV. RESPONSIBILITY/REQUIREMENTS
A. The primary work obligation of a full or part-time housestaff officer of the UMDNJ-SOM/Kennedy University hospital/Our Lady of Lourdes Medical Center joint program is to the UMDNJ-SOM/Kennedy University hospital/Our Lady of Lourdes Medical Center.

B. Full or part-time housestaff must not be required to engage in moonlighting. They may voluntarily engage in outside employment only if the outside employment does not:
1. constitute a conflict of interest (see university policy 00-01-10-50:00, code of Ethics: General Conduct);

2. occur at a time when the house officer is expected to perform his or her primary work obligation at the University; or

3. diminish the house officer’s efficiency in performing his or her primary work obligations at the University; or

4. exceed the 80-hour weekly limit on duty hours when combined with regular program work schedules.

C. Notice of regular or continuing outside employment of full or part-time housestaff is required during the regular work year. (Such individuals will complete a Notice of Outside Employment and will follow the submission process as indicated below.) If housestaff plan to engage in outside employment, they are required to receive approval of outside employment from their Program Director, Department Chair and forward the forms for approval and signature to the Assistant Dean for Graduate Medical Education. After approval by the Assistant Dean for GME the housestaff officer will be instructed on how to apply for final approval from the University Office of Ethics and Compliance by the Graduate Medical Education office. The resident’s performance will be monitored for the effect of these activities upon performance and adverse effects may lead to withdrawal of permission.

D. This policy shall not apply to outside employment undertaken by a house officer during his or her annual leave or vacation periods, except that no such house officer may engage at any time in outside employment that constitutes a conflict of interest.

E. OUTSIDE EMPLOYMENT MUST BE REPORTED AS FOLLOWS:

Each house officer must complete an Outside Employment Declaration Form whether or not he/she plans to engage in outside employment. All outside employment must be approved prior to commencing such activity. The Outside Employment Declaration Form must be forwarded to the Office of Graduate Medical Education and signed by the Program Director, Department Chair and Associate Dean for Graduate Medical Education. The Program Director and Department Chair shall keep copies of housestaff declaration forms on file. The Program Director shall forward the original form to the Office of Graduate Medical Education.

F. Failure of housestaff to comply with this policy shall result in disciplinary action up to and including termination.

G. Outside Employment Declaration Form (Procedure should be followed for newly hired housestaff)

1. Newly hired/appointed housestaff shall receive an Outside Employment Declaration form from his/her Medical Education Office during personnel processing/upon appointment.

2. The Program Director is responsible for indicating whether or not outside employment has been approved by signing the Outside Employment Declaration
Forms and submitting the original forms to the appropriate Department Chair. Copies shall also be retained by the Program Director.

3. The Department Chair is responsible for signing the Outside Employment Declaration forms as an indication that he/she agrees with the Program Director and submitting the originals to the Associate Dean for Graduate Medical Education.

4. The Associate Dean for Graduate Medical Education is responsible for signing the forms as an indication that there is agreement with the Program Director, Department Chair, and GME policies. The GME office will submit completed signed forms to Ethics & Compliance for final approval.

H. **OGME 1's are not permitted to moonlight under any circumstance.**
EXHIBIT C
UMDNJ-SCHOOL OF OSTEOPATHIC MEDICINE
DECLARATION/REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT

HOUSESTAFF

PLEASE NOTE THAT BEFORE ENGAGING IN OUTSIDE EMPLOYMENT, APPROVAL IS REQUIRED FROM YOUR PROGRAM DIRECTOR, DEPARTMENT CHAIR AND ASSOCIATE DEAN FOR GRADUATE MEDICAL EDUCATION, AS WELL AS COMPLETION OF THE STATE OF NEW JERSEY OUTSIDE ACTIVITY QUESTIONNAIRE WITH APPROVAL FROM THE ETHICS LIAISON OFFICER

Date: ___________________________ Program: _______________________________

Name: ___________________________ PGY Level _______________________________

(please print)

PLEASE CHECK ONE: _____ Yes, I am requesting outside employment. (Complete information requested below.)

______ No, I do not have outside employment.

NOTE: THERE IS NO MALPRACTICE COVERAGE FROM THE UNIVERSITY FOR OUTSIDE EMPLOYMENT

OUTSIDE EMPLOYMENT INFORMATION

Name of Employer ___________________________ Telephone ___________________________

Address ___________________________

Title ___________________________ Type of Work Performed ___________________________

________________________________________________________________________________

Days & Hours of Work ________________________________________________________________

Period of Outside Employment:  From ___________________________ To ___________________________

(Attach additional sheets if necessary.)

I have read and understand the University's policies on Code of Ethics and Outside Employment. I attest that the information provided above is true. I understand that hours worked during outside employment when combined with hours worked in the program must not exceed ACGME requirements.

___________________________________________________ _____________________________
Housestaff Signature     Date:

I have reviewed this request with the employee and (check one) _____there is no conflict; _____the conflict has been resolved and documented.

_____________________________________________
Program Director    Date

_____________________________________________
Department Chair    Date

☑ Approved ☐ Denied

Assistant Dean for Graduate Medical Education ___________________________ Date