

Lab Medicine and Pathology Residency Program MOONLIGHTING APPROVAL REQUEST

(Please Use Additional Sheets as Necessary)

Name (please print):	I understand, and will comply with the policies below:
Date(s) Requested:	<div style="display: flex; justify-content: space-between;"> <div>Resident signature _____</div> <div>Date _____</div> </div> <div>Rotation & Site: _____</div>

Moonlighting Policy

Per the Accreditation Council for Graduate Medical Education (ACGME; www.acgme.org), moonlighting requires a prospective, written statement of permission from the Program Director that will be made part of the resident's file; Residents and fellows are not required to engage in moonlighting; Moonlighting activities will not be allowed to conflict with the scheduled and unscheduled demands of the educational program and its faculty; The Resident/Fellow's performance will be monitored for the effect of these activities upon performance and adverse effects may lead to withdrawal of permission; and internal moonlighting must be counted toward the 80-hour weekly limit on duty hours.

This Program considers moonlighting to be a part of duty hours (see below) and it is the resident's responsibility to inform the Program Coordinator, in writing, of all duty hours incurred during moonlighting.

Moonlighting by Lab Medicine and Pathology residents is allowed only after the first year of residency and is allowed only in the field of Pathology. Moonlighting is allowed only during non-duty hours. Administrative time cannot be taken to moonlight; vacation time will be used for moonlighting (M-F). Moonlighting is not coordinated by the Department, but is monitored by the Program Director. Your University of Minnesota professional liability policy does not cover this activity.

Residents/fellows are required to notify the Program Director of their moonlighting activities via the submission of a Moonlighting Approval Request Form for each occurrence. Requests must include a beginning and end date, and the hours you'll expect to be working at that site. Failure to provide this information is grounds for discipline under Section VII of the Residency/ Fellowship Agreement.

International Medical Graduate residents/fellows on are NOT permitted to be employed outside the residency/fellowship program. No moonlighting allowed.

Facility Name:	Phone Number Where You Can Be Reached While Moonlighting:
Facility Address – Street:	
City & State:	Zip Code:
Contact Name:	Contact Phone Number:

(List Days/Hours Individually, Below)

Month: _____, 200_____						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____
HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____
_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____
_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours
DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____	DATE: _____
HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____	HOURS: _____
_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____	_____ to _____ = _____
_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours	_____ Total Hours

ACGME DUTY HOUR REQUIREMENT

Duty hours are defined as all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.

Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical educational and administrative activities.

Adequate time for rest and personal activities must be provided. This should consist of a 10 hour time period provided between all daily duty periods and after in-house call.

**Submit completed form to:
Gina Deveney, Coordinator**

Dept of Lab, Medicine & Pathology, MMC 609, University of MN School of Medicine, 420 Delaware St SE, Minneapolis MN 55455
Fax: 612-625-3976

<input type="checkbox"/> Request Approved	<input type="checkbox"/> Request Denied (Reason): _____
Program Director Signature _____	Date _____