

Charleston Area Medical Center Office of Graduate Medical Education

Moonlighting

CAMC strives to ensure a sound academic and clinical education carefully balanced with concerns for patient safety and overall resident/fellow well-being. Administration, faculty and residents/fellows collectively have responsibility for ensuring the safety and welfare of patients and the adherence to duty hours / clinical experience and education hours (CEEH) and moonlighting policies.

Definitions

The following terms used in this policy have the meaning provided in this section:

Moonlighting: A term used to refer collectively to both External Moonlighting and Internal Moonlighting.

External Moonlighting: Voluntary, compensated, medically related work performed outside the institution where the resident/fellow is in training or at any of its related participating sites except under ASHP requirements where external moonlighting is any voluntary, compensated work

Internal Moonlighting: Voluntary, compensated, medically related work (not related to training requirements) performed within the institution at or on behalf of CAMC facilities in which the resident/fellow is in training or at any of its related participating sites except under ASHP requirements where external moonlighting is any voluntary, compensated work.

General Institutional Criteria

- Residents/fellows must not be required to engage in moonlighting.
- Moonlighting must not interfere with the ability of the resident/fellow to achieve the goals and objectives of the educational program, interfere with resident fitness, or compromise patient safety.
- Time engaged by residents/fellows in moonlighting must be counted as duty hours / CEEH toward the 80-hour maximum weekly limit as required by accreditation standards and institutional or program requirements and policies.
- “Sunlighting” (i.e., working for income during hours when a resident/fellow has program duties and responsibilities) is not permitted at any time.
- Individual residency and fellowship programs must adhere to program-level and institutional-level requirements specific to their accrediting institution (i.e., ACGME, ASHP, etc.).
- The Graduate Medical Education Committee (GMEC) and CAMC monitor compliance with this policy.

Resident/Fellow Requirements and Responsibilities

The primary responsibility of the resident/fellow is to the residency/fellowship program service or activity to which the resident/fellow is assigned. Residents/fellows who choose to engage in moonlighting of any type shall do so outside the scope of their residency/fellowship program. CAMC shall not be responsible or liable for the consequences of a resident/fellow’s external moonlighting activity.

Moonlighting must not interfere with clinical and educational performance. The resident/fellow must obtain permission for moonlighting and adhere to criteria for moonlighting that is set forth in this policy and by the residency/fellowship program director. The residency/fellowship program director has the authority to restrict or prohibit moonlighting at any time and may establish more stringent reporting requirements than outlined in this policy. Permission will be based on

individual academic, clinical and professional performance and residency/fellowship program duties and responsibilities. An adverse effect on program performance may lead to withdrawal of permission to moonlight.

The following requirements must be met and maintained before moonlighting permission can be granted:

- PGL1 level physician residents are not permitted to engage in moonlighting.
- Residents/fellows with a restrictive visa status may not be allowed to engage in internal or external moonlighting.
- Residents/fellows must be in good academic standing within their residency/fellowship training program demonstrating overall satisfactory performance.
- Residents/fellows must demonstrate in-training exam scores at the national median or 50th percentile for residents/fellows in training at the comparable training level to be granted permission to moonlight. Program directors are responsible for scheduling the residents/fellows off at least 8 hours prior to and during the exam for ideal conditions conducive to enhancing the resident/fellow's performance on the exam.
- Residents/fellows must accurately report and document moonlighting hours through New Innovations or through other recording methods as directed by CAMC and their program.
- Residents/fellows are solely responsible for securing confirmation of malpractice coverage for patient care services provided outside the scope of the residency training assignment for external moonlighting activities. Such confirmation shall be required in writing prior to obtaining permission to moonlight.
- Residents/fellows who moonlight external to CAMC must be licensed for independent medical practice or obtain any other license/certification that may be required in the state where the moonlighting occurs. The program director shall not approve external moonlighting for any residents/fellows who does not meet state licensing/certification requirements.
- Residents/fellows must obtain a separate Drug Enforcement Administration (DEA) certificate for use in prescribing medications while for external moonlighting activities.
- Residents in combined programs must have permission to moonlight from both programs.

Requesting Permission to Moonlight

A resident/fellow desiring to moonlight must complete a "Request for Permission to Moonlight" form prior to moonlighting. It is the responsibility of the individual resident/fellow to provide all additional information and documents required by the program director, coordinator or institution.

- Permission to moonlight will be granted for a maximum period of six months and be approved for effective time periods from January 1 through June 30 and from July 1 through December 31 of each academic year. Permission cannot extend beyond June 30 or December 31 within each 6-month period without completion and approval of a new request form. Interim reporting of moonlighting activities may be required by the program director, coordinator or institution at any time.
- A request form is required for each employer with which a resident/fellow moonlights. Multiple sites staffed by the same employer may be listed on one request form and must be updated and approved by the program director prior to the resident/fellow performing services at a new location.
- A copy of the resident/fellow's license or certification requirements, DEA certificate in their name and confirmation of malpractice insurance at the moonlighting institution must be submitted with the request form for all external moonlight activities.

- Upon approval by the program director, the program shall provide a copy of the approved request form and all attachments to the Graduate Medical Education (GME) office. Originals will be placed in the resident/fellow's permanent program file.

Program Director Responsibilities

The program director is responsible for monitoring and determining the potential and actual impact of moonlighting on the clinical or educational performance of resident/fellow, the program, accreditation status, the quality of patient care, and safety requirements of CAMC and the residency program. The program director must:

- Inform and communicate policies, requirements or updates as may be required to residents/fellows who seek approval to moonlight.
- Support and enforce applicable policies and procedures regarding moonlighting.
- Monitor the resident/fellow's eligibility to moonlight as defined by this policy as well as accreditation standards, institutional and program requirements.
- Establish appropriate mechanisms for continuous monitoring of overall duty hours, including the number of hours and the workload of residents/fellows who moonlight.
- Review and approve the resident/fellow's "Request for Permission to Moonlight" form and ensure that the resident/fellow has submitted all required paperwork and documentation.
- Consider and approve a maximum number of hours per week specified by location. Any change that results in additional moonlighting hours or changes in moonlighting locations will require an updated request form and approval by the program director.
- Forward a copy of the completed and approved request form and all required attachments to the GME office prior to resident/fellow engagement in moonlighting activity.
- Provide summary reports or respond to requests for reports/information from the GMEC, the GME office or the Designated Institutional Official (DIO) at any time.

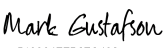
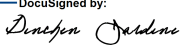
Institutional Oversight Responsibilities

The GMEC shall monitor program compliance with policies and procedures and has authority to revoke moonlighting privileges at the program or individual level. CAMC and/or the DIO have ultimate authority to permit, restrict or withdraw permission to moonlight or to revoke moonlighting privileges at the program or individual level.

Residents/fellows are professionally responsible for compliance with moonlighting policies, accurate completion of moonlighting requests, accurate reporting of moonlighting experiences/requirements, and compliance with duty hour requirements. Concerns regarding moonlighting violations should be reported to the Program Director or the DIO.

Failure to comply with the moonlighting policy requirements will result in revocation of moonlighting privileges. Residents/fellows who fail to maintain compliance with moonlighting requirements; report false information when requesting permission to moonlight; or falsely report moonlighting hours, will be subject to disciplinary action, including potential dismissal/termination. Engaging in moonlighting without obtaining permission in accordance with this policy and program requirements will result in immediate termination.

Signatures:

GMEC Chair:	Signed by:  513304FFB07C490... Mark Gustafson, DO	7/22/2026 Date
DIO:	DocuSigned by:  DT119688F13144F... Dink Jardine, MD	7/22/2026 Date