MOONLIGHTER HANDBOOK

2018
Policies for house officers at the George Washington University Hospital

Eligible candidates

- PGY-3 and above in the GWU Internal Medicine Residency and Fellowship programs
- PGY-2 in the second half of the year (if all their requirements are met)
- Chief Residents and Faculty in the Department of Internal Medicine at the GWU- MFA who have the necessary credentials to work at the GWU Hospital

Mandates

- House officer commitments must not take priority over the primary responsibility of the resident/fellow towards their training program
- Moonlighting is limited to areas in which the resident has competence and to areas that will advance the resident’s training and career goals
- The hours spent engaged in internal moonlighting activities are considered part of the residency program duty hours, as per ACGME guidelines. The total number of hours worked per week should not exceed 80. One cannot be a house officer when they are scheduled to be on disaster-call for their residency program
- Permission from the program director of residency/fellowship programs must be obtained in advance of all moonlighting to review academic standing

Goals of the house officer service

- To offload the current night float housestaff from admitting patients when the teaching teams are busy, and/or after the teaching service teams have reached their cap
- To admit medicine patients of limited teaching value to the Non-Teaching Medicine service i.e. Medicine Orange team. If the non-teaching team is accepting chest pain patients, then they would also be included in your admissions.
- To admit medicine patients overnight and hand over to the medicine orange team in the morning. A max of 6 admissions can occur per night.
- To provide overnight coverage for the Medicine Non-Teaching (Orange) team overnight, including phone calls and rapid responses
- To provide overnight coverage for the Bariatric surgery service and address non-surgical issues
- To provide overnight coverage to the Physical medicine and Rehabilitation service (ARU), including follow up of pertinent daytime issues

Policies and procedures

- The house officer is expected to be available in-house for 12 hours from 6pm to 6am. The sign-out to the daytime non-teaching service will be via e-mail between 6 and 7am
The last admission should be seen no later than 5:00 am, after which the daytime on-call team will take responsibility of the admissions. For those patients that are sick and need care between 6-7:30am a verbal signout needs to be given to the on-call night float residents.

The moonlighter is expected to be available via tiger text and signed into the “Medicine Moonlighter” role from 6pm-6am.

The house officer will function as a housestaff member and thereby an attending will staff their work-ups the next day. The attending on-call for the hospitalist team that evening will assist with any issues related to admissions overnight. The house officer will not be responsible for any medical coding or billing.

The house officer needs to ensure that the shifts that they have signed up for are not in violation of the ACGME guidelines. The house officer needs to ensure they are not on disaster coverage, and are not on-call or covering any other services at the same time. Any conflict of commitment will lead to revocation of house officer privileges.

Physicians on a visa must ensure that their visa permits moonlighting i.e. J1 visas holders cannot moonlight.

Assignment of shifts

- As a general rule, one cannot be assigned more than 3 shifts per month
- The schedules will be made on an on-going basis up to 2 months in advance. If any changes need to be made, you would need to inform the Scheduler. It is recommended that you to find alternative coverage if you cannot cover a shift you were originally assigned to.
- Check your schedules based on the policies mentioned above and provide dates of your availability. The moonlighter schedule is available on [http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule](http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule) website under the tab “Moonlighter Schedule.”
- Please contact Shant Ayanian, MD at sayanian@mfa.gwu.edu for information and assignment of shifts. This is typically done via doodle shift assignment

Payroll information

- The GWU-MFA will provide compensation at the following rates:
  - $100/h for Mon-Fri Nighttime shifts
  - $100/h for Sat and Sun Daytime shifts
  - $105/h for Sat and Sun Nighttime shifts
  - $105/h for all MFA holidays
- Payroll information needs to be completed prior to starting any house officer shifts
- For PGY-2 and above housestaff: The checks will be prepared on a biweekly basis and will be mailed/directly deposited accordingly. Please contact Jocelyn Hutchinson at jhutchinson@mfa.gwu.edu for any payroll related questions.
- For Attending Faculty members and Chief residents: The checks will be incorporated into their monthly payroll. Please contact jhutchinson@mfa.gwu.edu Your malpractice insurance for the house officer shifts at GW will be covered by the GWU-MFA.
Guidelines for the house officer

Upon arrival
- Arrive at GW hospital by 6pm
- Please sign into the time clock reader with your fingerprint and your SSN
- Sign into the “Medicine Moonlighter” role on tiger text by 6pm
- Contact the Medicine on call resident via TT (TT the “Medical Admitting Offer – MAO” Role) to check if any admissions are waiting to be seen by you
- Print out a patient list of Non-teaching service patients (Orange Team) and Rehab Team patients from Cerner/CORES. The Bariatric service PA will TT if they have patients to sign out to you. They can also be found on Cerner/CORES under Surgery > Team 5.
- You will be called for any cross-cover issues overnight on orange team, bariatric surgery and rehab team patients
- Update the Primary contact for each patient with your name and make sure it is a temporary sign out that ends at 6am the day after.

Call room
- Room no. 4-1180 (4th floor hallway) is available for the moonlighter to use at night
  - If you need a key prior to a shift please contact Deborah Corvalan (dcorvalan@mfa.gwu.edu) or the chief medical residents.

Admissions
- The MAO will tiger text you regarding any new admissions waiting in the ER. Be in close touch with the MAO regarding their census and how many patients you and they can admit. The average would be 3-4 admissions per night, with a max of 6. You can accept new admissions until about 5am.
- Typically patients admitted by the moonlighter will go to the orange team. Patients admitted by the moonlighter can be redistributed to the teaching service in the morning if they are complicated and/or interesting. Hence the moonlighter and the MAO should triage all along the way.
- The admission H & P should be comprehensive and accurate. The house officer is representative of the hospitalist physicians at night and since they will not be there personally to discuss the patients, the workups need to be more than just adequate. Any updates must be documented and mentioned to the hospitalists. This is frequently an issue and can be a cause for frustration for providers caring for patients after the house officer leaves. Persistent inadequacies in performance will lead to revocation of moonlighting privileges.
- The H & P needs to be written under the status of a Resident/Fellow, so that the Attending MD can co-sign the note in the morning.
Please send your sign-out to all the hospitalist attendings/PA’s and the Chief Residents. The email list is located on the [http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule](http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule) website in the Moonlighter section.

Make sure that the Primary Contact tab is updated back to the midlevel covering and or the attending physiatrist.

The house officer will be responsible for those patients’ care until 6am. After that, the nurses will contact the Orange team MD/PA’s for questions. They may also contact the night float residents for acute issues between 6am-7:30am.

**Hand-off**

- All the patients admitted overnight should be handed over to the chief residents and the hospitalist attendings in the morning
- Please email your hand-off to the Chief medicine residents, Hospitalist attendings and PA’s using the list found here [http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule](http://smhs.gwu.edu/medicine-residents/moonlighting/moonlighter-schedule). Please include your contact information, so you may be contacted if questions arise.
- Hand-off should be as detailed and relevant as needed with pertinent patient information with regards to new admissions and cross-coverage issues
- Also include the information on cross-coverage of rehab team on your sign-out
- If any issues arise with the bariatric team patients, please inform Dr. Afram
- After 6am the Orange Team MD/PA will be called for all cross-cover issues. If urgent issues are expected on sick patients, the house-officer should give a verbal/written hand-off to the on-call night float resident
- **If hand-offs are repeatedly found to be inadequate, you may be suspended from your house officer duties**

**Wrap up**

- Log out of the “Medicine Moonlighter” TT Role at 6am
- Be available by TT during the day in case questions arise about the overnight admissions
GETTING STARTED

- Identify the months of the year when it might be possible for you to do the moonlighting shifts without violating your work hour rules. It is also imperative that you are not on disaster or back up coverage (for your residency/fellowship program) at that time.
- Contact Shant Ayanian, MD at sayanian@mfa.gwu.edu and inform him of your interest. Also provide your personal contact phone number.

LICENSURE AND OTHER REQUIREMENTS

ALL of the below stated documents need to be given prior to your FIRST shift in hard (paper) copy to Shant Ayanian, MD at his office on 5-South office at the GWU hospital

Before you start your shifts, you need:

a. Permanent DC license-Active status
b. Permanent Federal DEA number (not the one given during residency)
c. DC controlled substances number
d. Written/Signed Permission from your program director (through Medhub)
e. GME form (on medhub)
f. GWUH hospital privileges (You already should have that if you work at GWU)
g. MFA application for payroll (available at 10th floor MFA HR)
h. Biometrics from MFA HR (can be done after completion of MFA Application)

After you have obtained items a through f above, please email Shant Ayanian at sayanian@mfa.gwu.edu. You will be put in contact with HR at the MFA. You will have to physically go to the MFA HR and submit an application for a new hire. Once that is submitted the approval would take about two weeks, after which you will receive a PIN number and will have to go back to the HR department for biometrics enrollment. This would allow you to use the fingerprinting process for payroll.

Here are the websites for applications for the necessary licensure requirements:

http://doh.dc.gov/service/dc-controlled-substance-registration-application
-- New DC Controlled Substances license application
https://www.deadiversion.usdoj.gov/webforms/jsp/regapps/common/newAppLogin.jsp
-- New Federal DEA number
http://doh.dc.gov/node/120782
Remember - you can only request permission to moonlight for the current academic year. You must re-submit for approval (and bring Dr. Ayanian a printout of your new approval from GME) each academic year.

TIME CLOCK INFORMATION
- It is essential that you clock in and out at the beginning and end of your shift.
- Faculty and Chief residents do not need to use this biometric system

TIME CLOCK LOCATION (at the GWU hospital)
- Ground floor: On the Lobby floor, when you enter, walk to the right of the security desk and follow that hallway. Make the last left turn there. At the end of the hallway, bear right and the first door on your left is SUITE 2092- Rooms G103-G135 which are the offices of Anesthesiology, Radiology, Pathology and Newborn services. That door is Always open. Go in and immediately on the left wall, you will see a Silver/Grey timeclock. This is the one to use. DO NOT use the one in 2nd floor ICU.
BARIATRIC SURGERY SERVICE COVERAGE

In addition to general medicine coverage:

- The house officers are expected to provide overnight cross coverage for the bariatric service patients on 5 North floor. Coverage should be provided only to Dr. Joseph Afram’s patients.

- They generally have a census of 1-3 patients, most of them are post-gastric bypass and the moonlighter will be expected to cover some of the simple prn issues.

- Occasionally, patients might have post-operative bleeding or post-surgical sepsis and in such situations, please contact Dr. Afram. He would be expecting your calls. These patients would be expected to go to the ICU.

- The medicine house officers are not expected to admit surgical patients from the emergency room or transfer surgical patients from various other services.
PHYSICAL MEDICINE AND REHABILITATION COVERAGE

- The house officers are expected to provide overnight cross coverage to the patients on the physical medicine and rehabilitation

- They generally have a census of 12-16 patients who are usually stable and getting inpatient rehab. It is essential that you print out the hand-off information from Cerner/CORES and check on their tasks that may be pending for you to do

- Ensure that their information and updates are also included in your morning hand-off
CONTACT INFORMATION

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