



Reciprocity & COMPACT Instructions to obtain a SD EMR or EMT Certification

If you are seeking to obtain your South Dakota EMR or EMT Certification and you are currently certified/licensed in another state, and you have or have had National Registry Certification, you can apply to obtain your SD EMR or EMT Certification via our E-Licensing system.

ALS Levels (Advanced EMT and Paramedics) – You will need to apply for licensure with the South Dakota Board of Medical & Osteopathic Examiners via their website: [SDBMOE.gov](https://sdbmo.gov). Do not create your account or apply for reciprocity on this system (E-Licensing System).

To access the E-Licensing System, you can go directly to the site by clicking or typing in this address: <https://southdakota.imagetrendlicense.com/lms/public/portal#/login>, or you can access it by going to the Office of EMS & Trauma’s website: [EMS.sd.gov](https://ems.sd.gov) and clicking the blue box labeled EMS Licensing.

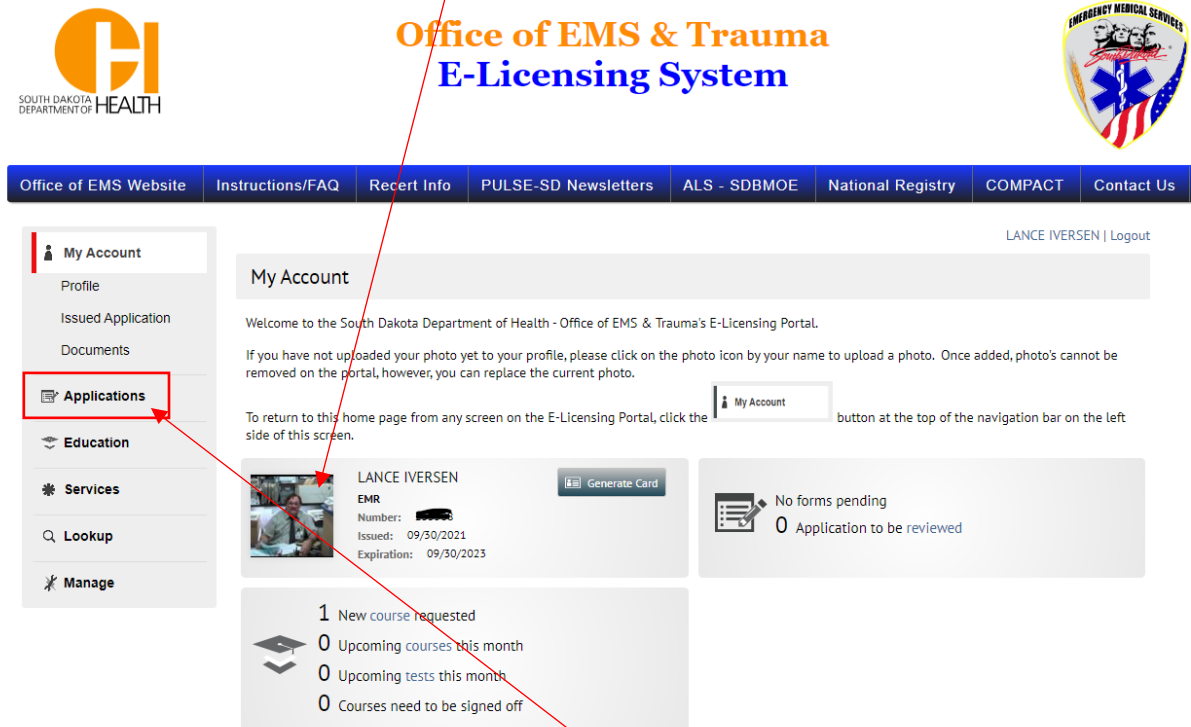
Once you are in the E-Licensing page, you will go to the bottom of the page and click the “Create Account” button. If you already created an account, you will log into your account with the Username and the Password you created when you set up your account.

A screenshot of a web login page. The title is "Login". There are two text input fields, one labeled "Username" and one labeled "Password". Below the "Password" field is a link that says "Forgot Username or Forgot Password?". At the bottom of the form are two buttons: "Login" and "Create Account". A red rectangular box is drawn around the "Create Account" button, and a red arrow points from the text above to this button.

Log into your E-Licensing account.

On the next page is an example what your home page will look like. You may have more or fewer menu options in your account based on your permissions, such as Service Director, Training Officer, etc.

If you have not done so, please upload a picture of yourself into your profile. Your picture will be printed on your certification card. Click the photo icon then you can select a file on your computer or device to upload



Office of EMS & Trauma
E-Licensing System

Office of EMS Website | Instructions/FAQ | Recert Info | PULSE-SD Newsletters | ALS - SDBMOE | National Registry | COMPACT | Contact Us

My Account | Profile | Issued Application | Documents | **Applications** | Education | Services | Lookup | Manage

LANCE IVERSEN | Logout

My Account

Welcome to the South Dakota Department of Health - Office of EMS & Trauma's E-Licensing Portal.

If you have not uploaded your photo yet to your profile, please click on the photo icon by your name to upload a photo. Once added, photo's cannot be removed on the portal, however, you can replace the current photo.

To return to this home page from any screen on the E-Licensing Portal, click the **My Account** button at the top of the navigation bar on the left side of this screen.

LANCE IVERSEN
EMR
Number: [REDACTED]
Issued: 09/30/2021
Expiration: 09/30/2023

Generate Card

No forms pending
0 Application to be reviewed

1 New course requested
0 Upcoming courses this month
0 Upcoming tests this month
0 Courses need to be signed off

To get to your applications available to you, click the “Applications” button in your menu list.



Click the gray “Apply Now” button next to the “SDEMS Application” to open the application page (this example is applying for the EMT level).

Applications	Action
SDEMS EMT Application This is a multi-part application. You will use this to apply for a SD EMT (Emergency Medical Technician) Certification whether it is for Initial (from an EMT Course you took in South Dakota), Renewal, Reinstatement, Upgrade of a current EMR certification to EMT, or Reciprocity from an out-of-state license. Depending on which of these tasks you choose, once Part 1 is submitted the next form (Part 2) will be placed in the Applications tab of your Licensing account. You will be able to open the ne...	Apply Now
SDEMS EMR Application This is a multi-part application. You will use this to apply for a SD EMR (Emergency Medical Responder) Certification whether it is for an Initial (from a SD EMR Course you took) certification, Renewal, Reinstatement, or Reciprocity from an out-of-state license. Depending on which of these tasks you choose, once Part 1 is submitted, the next form (Part 2) will be placed in the Applications tab of your Licensing account. You will be able to open the next form by clicking the START button. Pleas...	Apply Now
EMT Student Registration Application Use this application to register as a student for an initial Emergency Medical Technician course. This application will allow to you be added to the roster of a class for certification.	Apply Now
Starting a NEW Ambulance Service in SD? If yes, complete this License Application (Step 1) This is how a company who wants to begin ambulance service operations in South Dakota will apply for a SD Ambulance Service License - Step 1	Apply Now

When you click the gray “Apply Now” button for the SDEMS EMT Application, this will open the first part of the two-part application form.

For this example, I want to apply for my SD EMT Certification via Reciprocity/COMPACT. Click the box that says “I currently hold a license from another state and want to apply for a South Dakota EMS Certification through Reciprocity or COMPACT” then click the box that says “I will be applying for an Emergency Medical Technician (EMT) Certification”. Then click the “Save and Continue” button on the bottom of the page.

Example on next page:

Part 1 - SDEMS Form

Application Type

Applicant Information

Submit Form

▼ Determination

***Which type of South Dakota certification are you requesting to obtain?**

- I want to apply for an Initial South Dakota EMS Certification.
- I want to Renew my CURRENT South Dakota EMS Certification.
- I want to Upgrade my current SD EMR Certification to EMT Certification.
- I want to Reinstate my EXPIRED South Dakota EMS Certification.
- I currently hold a license from another state and want to apply for a South Dakota EMS Certification through Reciprocity or COMPACT.

***For which certification level will you be applying?**

- I will be applying for an Emergency Medical Responder (EMR) certification.
- I will be applying for an Emergency Medical Technician (EMT) certification.

→ Save and Continue

The next page in the Part 1 Application that will open is your “Applicant Information” (demographics) page. Review your demographics and make any changes such as mailing address, phone number(s), email address, etc. At the bottom of this page, you will enter your National Registry, CPR, and Driver’s License Information. Once done go to the bottom of the page and click the “Save and Continue Button:

Part 1 - SDEMS Form

Application Type

Applicant Information

Submit Form

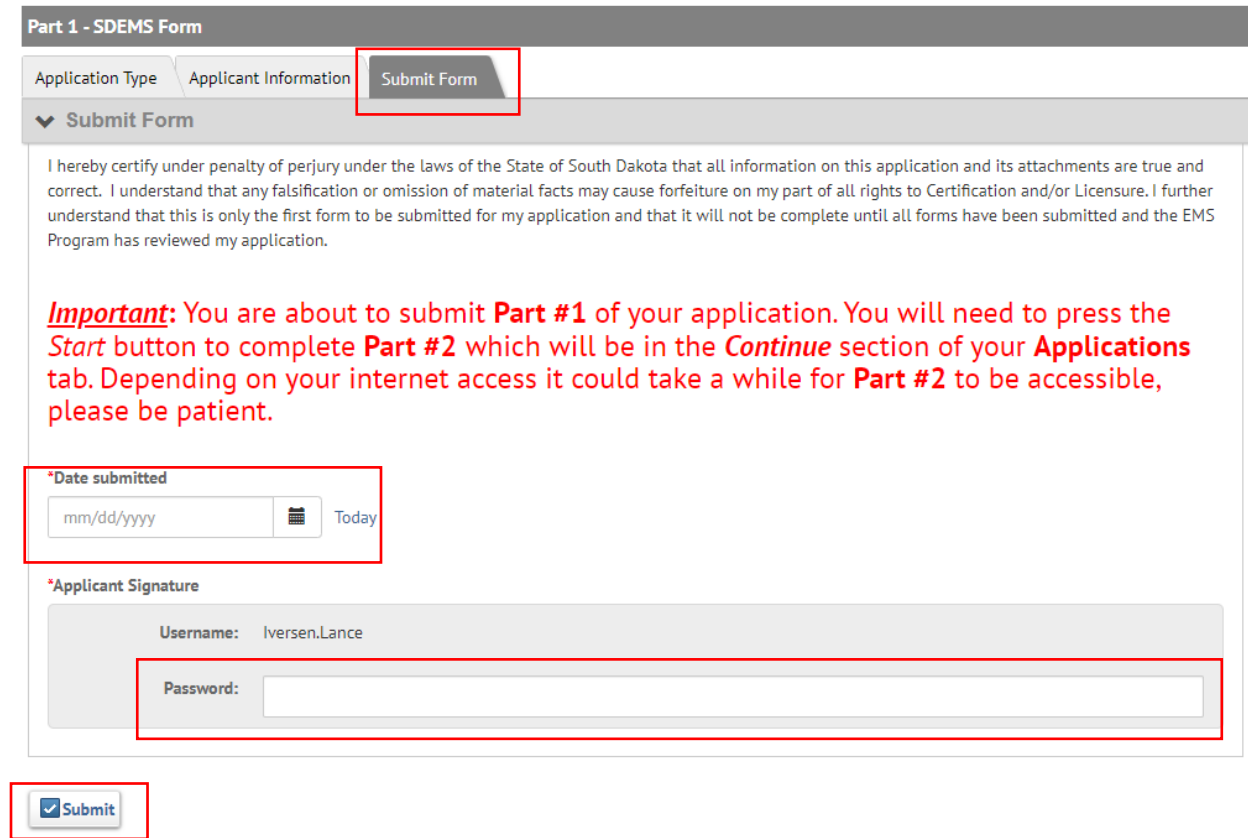
▼ Demographic Information

Instructions: Below is information from your core record. Please review and update any information which is incorrect. If the field is disabled, you are not able to update it from the application.

First Name

→ Save and Continue

The last tab of the Part 1 Application is to submit it. You will enter the date then enter your password and click the blue “Submit” button at the bottom of the page:



Part 1 - SDEMS Form


Application Type Applicant Information **Submit Form**

▼ **Submit Form**

I hereby certify under penalty of perjury under the laws of the State of South Dakota that all information on this application and its attachments are true and correct. I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to Certification and/or Licensure. I further understand that this is only the first form to be submitted for my application and that it will not be complete until all forms have been submitted and the EMS Program has reviewed my application.

Important: You are about to submit **Part #1** of your application. You will need to press the **Start** button to complete **Part #2** which will be in the **Continue** section of your **Applications** tab. Depending on your internet access it could take a while for **Part #2** to be accessible, please be patient.

*Date submitted

mm/dd/yyyy  Today

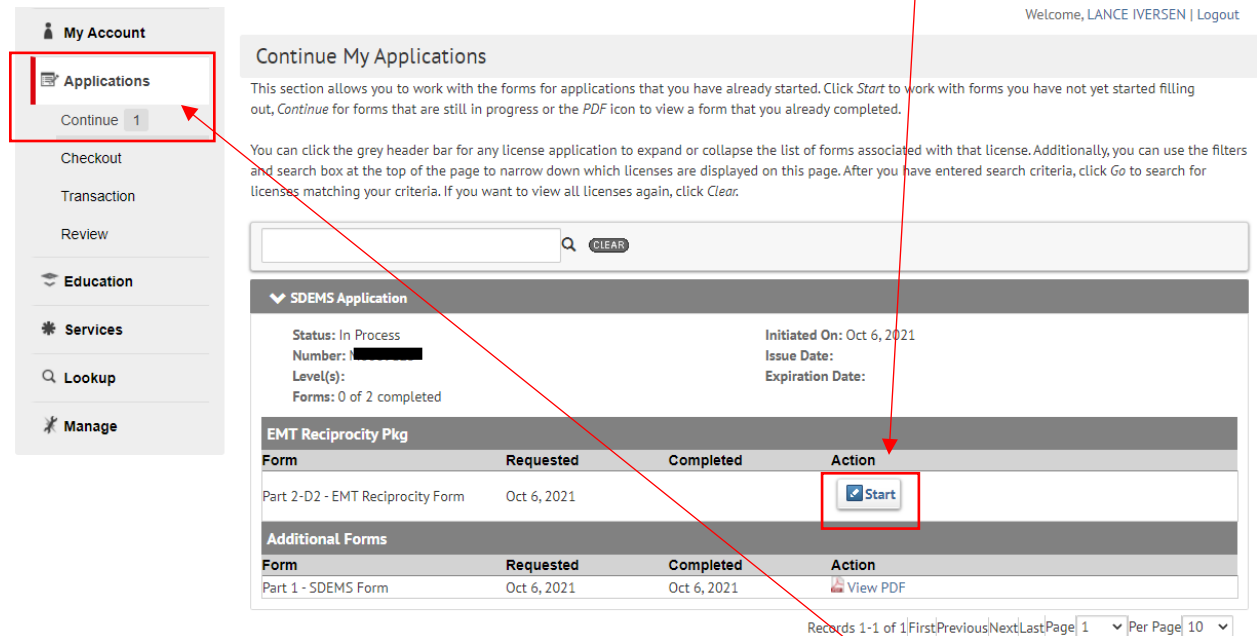
*Applicant Signature

Username: Iversen.Lance

Password:

Please note the message in red on the form. This is a two-part application process so once you submit this form, the page will refresh once submitted then you will need to click the blue “Start” button for Part 2. Depending on your internet connection speed, it may take a few minutes for your application to process/save.

Once you do the above, this page will open where you can click the blue “Start” button to open the Part 2 application:



Welcome, LANCE IVERSEN | Logout

Continue My Applications

This section allows you to work with the forms for applications that you have already started. Click [Start](#) to work with forms you have not yet started filling out, [Continue](#) for forms that are still in progress or the [PDF](#) icon to view a form that you already completed.

You can click the grey header bar for any license application to expand or collapse the list of forms associated with that license. Additionally, you can use the filters and search box at the top of the page to narrow down which licenses are displayed on this page. After you have entered search criteria, click [Go](#) to search for licenses matching your criteria. If you want to view all licenses again, click [Clear](#).

Continue 1

Checkout

Transaction

Review

Education

Services

Lookup

Manage

Search: [] CLEAR

▼ SDEMS Application

Status: In Process
Number: [REDACTED]
Level(s):
Forms: 0 of 2 completed

Initiated On: Oct 6, 2021
Issue Date:
Expiration Date:

EMT Reciprocity Pkg			
Form	Requested	Completed	Action
Part 2-D2 - EMT Reciprocity Form	Oct 6, 2021		Start

Additional Forms

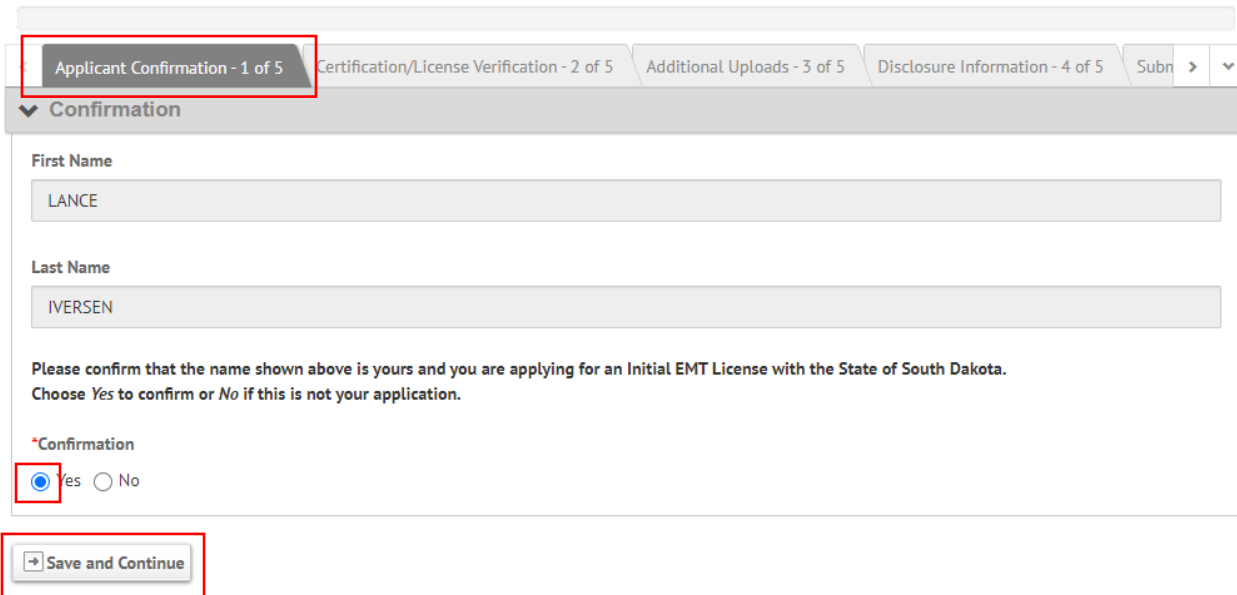
Form	Requested	Completed	Action
Part 1 - SDEMS Form	Oct 6, 2021	Oct 6, 2021	View PDF

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Note: If you leave the application, you can access it by clicking the “Applications” box in your menu list on the left side of your page, then click the “Continue” button. If you see a number behind the Continue that means you have open applications in your account. In this example, I have one (1) application left to complete.

When you open the Part 2 application you will go from tab to tab, entering the information asked for and uploading your documents, such as your Driver’s License or other Govt. Issued Photo ID, Current CPR Card, your other state licenses for your level and National Registry card (current or expired), etc.

Part 2-D2 - EMT Reciprocity Form



Applicant Confirmation - 1 of 5 Certification/License Verification - 2 of 5 Additional Uploads - 3 of 5 Disclosure Information - 4 of 5 Subn > ▾

Confirmation

First Name
LANCE

Last Name
IVERSEN

Please confirm that the name shown above is yours and you are applying for an Initial EMT License with the State of South Dakota.
Choose Yes to confirm or No if this is not your application.

*Confirmation
 Yes No

Save and Continue

In tab one above, your name will auto-populate in the boxes then you will select the Yes button where it asks to confirm your name above is correct. Then click the “Save and Continue” button to go to the next tab.

In the second tab, **Certification/License Verification**, you will answer Yes to the question asking “Have you ever held an EMS License in another state?”. You will then enter the number of states where you hold an Out-of-State license. When you do that you will select the State(s) you have had an EMS License in (current or past, then enter the expiration date of your Out-of-State license and upload a copy of your card. If you select more than one state, you will repeat the process described above (enter the State name, your exp. date, and upload a copy of that State License). When you are done, it will ask you to upload a copy of your National Registry card, a copy of your current CPR card and a copy of your Driver’s License (or other Govt. Issued Photo ID).

When done with this tab, click the “Save and Continue” button at the bottom of the page to go to the next tab, **Additional Uploads**.

You will need to upload a copy of your FEMA ICS/IC Training Certificates (100, 200, 700). If you have any other training certificates you would like to upload, such as an EVOC certificated, PHTLS, etc., you can do it here. When done on this page, click the “Save and Continue” button at the bottom of the page.

The next tab, **Disclosure Information**, please answer the three questions.

If you answer Yes to any of the questions you will need to supply more information and documents. Example on next page:

< Disclosure Information - 2 of 5 Additional Uploads (Optional for Recert. App.) - 3 of 5 **Disclosure Information - 4 of 5** Submit Application - 5 of 5

▼ Disclosure Info

*Since your most recent issued application have you been convicted of a felony?
 Yes No

*Please provide court documents on your felony conviction

Upload File

*Name
Court Documentation

Document Type
Felony Conviction

Remove

Add Another

*Since your most recent issued application have you had disciplinary action taken against your EMS Certification/License?
 Yes No

*Since your most recent issued application have you been denied EMS Certification/Licensure from another state or South Dakota?
 Yes No

Save and Continue

Once done with this section, click the “Save and Continue” button at the bottom of the page. This will then take you to the last tab, **“Submit Application”**.

Enter the date and your password, then click the blue “Submit” button at the bottom of the page. See example on next page:

Please Note: Once you submit your application for Reciprocity you will be mailed a criminal history background check packet (fingerprint cards, etc.) to complete and mail, along with payments, to the SD DCI and FBI. We cannot process your application or issue you your SD EMT Certification until we receive your criminal history reports from those two agencies.

Part 2-C2 - EMT Reinstatement Form

[ion - 1 of 5](#)
[Certification/License Information - 2 of 5](#)
[Additional Uploads \(Optional\) - 3 of 5](#)
[Disclosure Information - 4 of 5](#)
[Submit](#)

Submit Application

I hereby certify under penalty of perjury under the laws of the State of South Dakota that all information on this application and its attachments is true and correct. I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to Certification and/or Licensure. I understand all information on this application is subject to verification, and I hereby give my express permission for the EMS Program to contact any person or agency for information related to my application, and for any person, agency, firm, association, or employer to release any information requested by the EMS Program. I agree to hold the EMS Program and its employees, officers, and contractors harmless from any act or action resulting from the release of the information as stated above.

Date application submitted

***Applicant E-Signature**

Username: Iversen.Lance
Password:

Note: Please do not exit the page until the form has been saved/submitted.

To see the status of your application(s), you can click the “Applications” button in your menu list, then click the “Continue” button:

My Account

- Applications**
- Continue
- Checkout
- Transaction
- Review

Education

- Services
- Lookup
- Manage

Welcome, LANCE IVERSEN | Logout

Continue My Applications

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SDEMS Application

Status: Pending Issue	Initiated On: Oct 1, 2021
Number: ██████████	Issue Date:
Level(s): EMT	Expiration Date:
Forms: 0 of 2 completed	

EMT Renewal Pkg			
Form	Requested	Completed	Action
Part 2-B2 - EMT Renewal Form	Oct 1, 2021	Oct 1, 2021	View PDF

Additional Forms			
Form	Requested	Completed	Action
Part 1 - SDEMS Form	Oct 1, 2021	Oct 1, 2021	View PDF

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