




Utah Bureau of Emergency Medical Services

RECIPROCITY CHECKLIST



| DONE ✓ | ELIGIBILITY | NOTES | |
|--------|---|--|--|
| | CURRENT EMS CERTIFICATION | MUST BE STATE OR NATIONAL REGISTRY |  |
| | CURRENT CPR OR ACLS/PALS CERTIFICATION | MUST BE A STATE RECOGNIZED CPR COURSE | |
| DONE ✓ | DOCUMENTATION | NOTES | |
| | APPLICATION | |  |
| | PICTURE | PHOTO, JPEG, OR HAVE IT TAKEN AT BEMS | |
| | FINGERPRINTS | LIVESCAN OR INK | |
| | DECLARATION OF UNDERSTANDING | | |
| | POLICIES AND PROCEDURES DOCUMENT | | |
| | 25 HOURS OF CME | MUST BE WITHIN THE LAST YEAR | |
| | TB TEST | MUST BE WITHIN THE LAST YEAR | |
| | PAY FEES | | |
| DONE ✓ | TESTING | NOTES | |
| | RECIPROCITY ORIENTATION | |  |
| | STUDY DOT-NSC | AVAILABLE ON OUR WEB SITE | |
| | STUDY TTG'S | FOR EMT-B AND EMT-I | |
| | PASS WRITTEN TEST | | |
| | PASS PRACTICAL TEST | | |
| DONE ✓ | OBTAIN CARD | NOTES | |
| | RECEIVE UTAH CERTIFICATION CARD IN MAIL | IF YOU HAVE ANY QUESTIONS REGARDING RECIPROCITY CONTACT GLENNA AT 801-273-6624 OR GMCCLCCAN@UTAH.GOV | |