## **EXHIBIT 5**

## OAR Chapter 333, Division 200

## OREGON CRITERIA for CONSIDERATION of TRANSFER to a LEVEL I or II TRAUMA CENTER

- Penetrating injuries or open fracture of the skull

HEAD AND CENTRAL NERVOUS SYSTEM	<ul> <li>GCS &lt; 14 or lateralizing neurologic signs (if no neurosurgical consultation is available.)</li> <li>Spinal fracture or spinal cord deficit</li> <li>Carotid or vertebral arterial injury</li> </ul>
CHEST	<ul> <li>More than two unilateral rib fractures or bilateral rib fractures with pulmonary contusion (if no critical care consultation is available)</li> <li>Torn thoracic aorta or great vessel</li> <li>Cardiac injury or rupture</li> <li>Bilateral pulmonary contusion with Pao<sub>2</sub>:Flo<sub>2</sub> ratio less than 200 (require protracted ventilation)</li> </ul>
ABDOMEN AND PELVIS	<ul> <li>Major abdominal vascular injury</li> <li>Grade IV or V liver injuries requiring transfusion</li> <li>Unstable pelvic fracture requiring transfusion</li> <li>Complex pelvis/acetabulum fractures</li> <li>Open pelvic injury</li> </ul>
MULTIPLE SYSTEM INJURY	<ul> <li>Significant head injury combined with significant face, chest, abdominal, or pelvic injury</li> <li>Significant torso injury with advanced comorbid disease (such as coronary artery disease, chronic obstructive pulmonary disease, type 1 diabetes mellitus, or immunosuppression)</li> <li>Burns with associated injuries</li> <li>Fracture or dislocation with loss of distal pulses</li> </ul>
SECONDARY DETERIORATION (LATE SEQUELAE)	<ul> <li>Patients requiring long term ventilation</li> <li>Sepsis</li> <li>Single or multiple organ system failure (deterioration in CNS, cardiac, pulmonary, hepatic, renal or coagulation systems)</li> <li>Major tissue necrosis</li> </ul>

Effective: January 1, 2016