Provide your patients with proven protection against CRBSIs.¹

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We developed Cook Spectrum technology to help provide optimal patient care by decreasing hospitals’ rates of catheter-related bloodstream infections (CRBSIs).¹

The right combination
Cook Spectrum catheters are impregnated with a combination of the antibiotics minocycline and rifampin in order to help patients by providing proven protection against CRBSIs.¹

Unmatched evidence
The efficacy of Cook Spectrum is supported by more than 30 sources published over the past two decades, including peer-reviewed studies and meta-analyses.

No evidence of increased resistance
More than 10 years of clinical use and a 7-year study of more than 500,000 Cook Spectrum catheter days have shown no evidence of increased antibiotic resistance.²

Worth switching
Switching from unimpregnated catheters to Cook Spectrum catheters helps provide quality patient care by decreasing the risk for CRBSIs and the costs associated with treating them.¹,³

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Learn more about Cook Spectrum technology, including links to a vast body of research investigating and supporting Cook Spectrum, at spectrum.cookmedical.com.
Cook Spectrum®
Hyperalimentation Catheter Set

Cook Spectrum catheters are impregnated with the antibiotics minocycline and rifampin to prevent CLABSIs and CRBSIs.

These catheters are used for the intravenous administration of nutrient fluids, chemotherapeutic agents, therapeutic drugs, and for blood sampling, blood delivery, and venous pressure monitoring.

Cook Spectrum Hyperalimentation Catheter Set components

- Catheter
- Introducer needle
- Wire guide
- Peel-Away® sheath and dilator
- Disposable syringe
- Disposable safety scalpel
- Paper measuring tape
- Safety sharps receptacle

The synthetic fiber cuff is affixed to the catheter in order to allow tissue ingrowth.

The soft, flexible silicone catheter material provides optimum patient comfort.

The suture wings provide secure fixation.

The orange color indicates that the catheter has Cook Spectrum technology that protects against CLABSIs and CRBSIs.

The clearly marked color-coded hubs allow combination therapies in multilumen catheters.
<table>
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<th>Order Number</th>
<th>Reference Part Number</th>
<th>Catheter Fr</th>
<th>Catheter Length cm</th>
<th>Introducer Fr</th>
<th>Sheath/Dilator Length cm</th>
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*The catheter does not have a cuff.
Some products or part numbers may not be available in all markets. Contact your local Cook Medical sales representative or Customer Service for details.
Cook Spectrum® Silicone Cuffed Central Venous Catheter

CAUTION: U.S. federal law restricts this device to sale by or on the order of a physician (or properly licensed practitioner).

INTENDED USE: The Cook Spectrum Silicone Cuffed Central Venous Catheters are intended for the intravenous administration of nutrient fluids, chemotherapeutic agents and other drugs for therapy; blood sampling; blood delivery; and venous pressure monitoring. The catheter is impregnated with the antimicrobial minocycline and rifampin to help provide protection against catheter-related bloodstream infection (CRBSI). It is not intended to be used as a treatment for existing infections.

CONTRAINDICATIONS: Allergy or history of allergy to tetracyclines or rifampin. NOTE: Because the Cook Spectrum Silicone Cuffed Central Venous Catheter is impregnated with a combination of the antimicrobial agents minocycline (a derivative of tetracycline) and rifampin (a derivative of rifamycin B), the contraindications, warnings and precautions regarding use of these antimicrobials apply and should be adhered to for use of this device, although systemic levels of minocycline and rifampin in patients receiving this device are highly unlikely to result from their use.

WARNINGS: Development of a hypersensitivity reaction should be followed by removal of the catheter and appropriate treatment at the discretion of the attending physician.

- Only medical practitioners licensed by law, and trained and experienced in proper positioning of catheters in the central venous system using percutaneous entry (Seldinger) technique should place this catheter. EXTREME CAUTION must be used in placement and monitoring. To dislodge great vessels and to prevent inadvertent an aspiration during catheter insertion, patient should be placed in Trendelenburg position. Every effort must be made to ascertain proper tip position in order to prevent erosion or perforation of central venous system. Tip position should be verified by Ktp and monitored on a routine basis. Periodic lateral view Ktp is suggested to assess tip location in relation to vessel wall. Tip position should appear to be parallel to vessel wall. During blood sampling, temporarily shut off remaining port(s) through which solutions are being infused.

- To avoid vascular injury, do not use excessive force when advancing dilator. Use the smallest size dilator catheter placement will allow. Wire-guide must always lead dilator by several centimeters. Do not advance dilator more than a few centimeters into the vessel. Do not power inject contrast medium through catheter. Catheter rupture may result. Use of a 10 ml syringe or larger will reduce the risk of catheter rupture. Do not re-stenotize the Cook Spectrum Silicone Cuffed Central Venous Catheter.

- Placement of this catheter into the subclavian vein may result in compression of the catheter by the clavicle and first rib. Excessive compression may result in catheter damage, including ruptures or catheter embolus. Compression of the catheter and consequent risks may be minimized by placement lateral to the junction of the clavicle and first rib or use of alternative venous sites.

PRECAUTIONS: This product is intended for use by physicians trained and experienced in the proper positioning of catheters in the central venous system using percutaneous entry (Seldinger) technique. Standard techniques for placement of central venous catheters should be employed. - Select puncture site and length of catheter needed by assessing patient anatomy and condition. - If venous flow is impeded, do not force injection or withdrawal of fluids. Notify attending physician immediately. - Patient movement can cause catheter tip displacement. Catheters placed via an antecubital vein have shown forward tip movement of up to 10 cm with motion of the extremity. Catheters placed from either a jugular or subclavian vein have demonstrated forward tip movement of 1-3 cm with neck and shoulder motion. - Use of ECG and/or fluoroscopy is suggested for accurate catheter placement. - The Cook Spectrum Silicone Cuffed Central Venous Catheter should not come into contact with ethyl alcohol, isopropanol alcohol or other alcohols, acetone or other non-polar solvents. These solvents may remove the antimicrobial from the catheter and reduce the catheter’s antimicrobial efficacy. - The Cook Spectrum Silicone Cuffed Central Venous Catheter should not be used as agents as contrast agents. See instructions for use for full product information.