

TISSUE MANAGEMENT

Target | Acquire | Treat

Precise control during your tissue management procedures can be key to positive outcomes for your patients.



Cook Medical's array of tissue management devices are designed to help you **target, acquire, and treat** your patients for their specific tissue management needs.

From injection needles, forceps, retrieval nets, and snares to the Duette® Multi-Band Mucosectomy Device, Cook offers a comprehensive line of tissue management solutions.

TARGET

Identify and focus on the correct tissue to manage, delineating between healthy and diseased tissue.

ACQUIRE

Obtain targeted tissue to confirm diagnosis and inform the best course of medical action.

TREAT

Address the medical condition therapeutically and comprehensively.

Want to learn more about Cook's tissue management devices?

TISSUE MANAGEMENT DEVICES

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AcuJect Flex[®]

INJECTION NEEDLE

TISSUE MANAGEMENT

TARGET | ACQUIRE | TREAT

Used for the endoscopic injection of legally marketed sclerotherapy agents and dyes into esophageal or colonic varices.

- The ergonomically designed handle with thumb-actuated needle extension allows one-handed (single-handed) operation.
- Offers reliable and stable needle extension.
- The flexible stainless steel coiled sheath is designed for tortuous anatomical positions and helps prevent kinking.



Order Number	Reference Part Number	Catheter Length cm	Needle gage	Minimum Accessory Channel Diameter mm
G57784	AJ-FLEX-25-230-10	230	25	2.8
G59858	AJ-FLEX-23-230-10	230	23	2.8

Some products or part numbers may not be available in all markets. Contact your local Cook representative or Customer Support & Distribution for details.

AcuJect®

VARIABLE INJECTION NEEDLE

TISSUE MANAGEMENT

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Used for endoscopic injection into gastrointestinal mucosa.

- The needle advances and retracts smoothly.
- The clear outer catheter and white inner catheter allow visualization of needle advancement.
- The inner and outer catheters lock together to secure the advanced needle during injection.
- The needle's length is adjustable.

Order Number	Reference Part Number	Catheter Length cm	Needle gage	Minimum Accessory Channel Diameter mm
G22525	VIN-23	215	23	2.8
G22526	VIN-25	215	25	2.8

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Duette®

MULTI-BAND MUCOSECTOMY

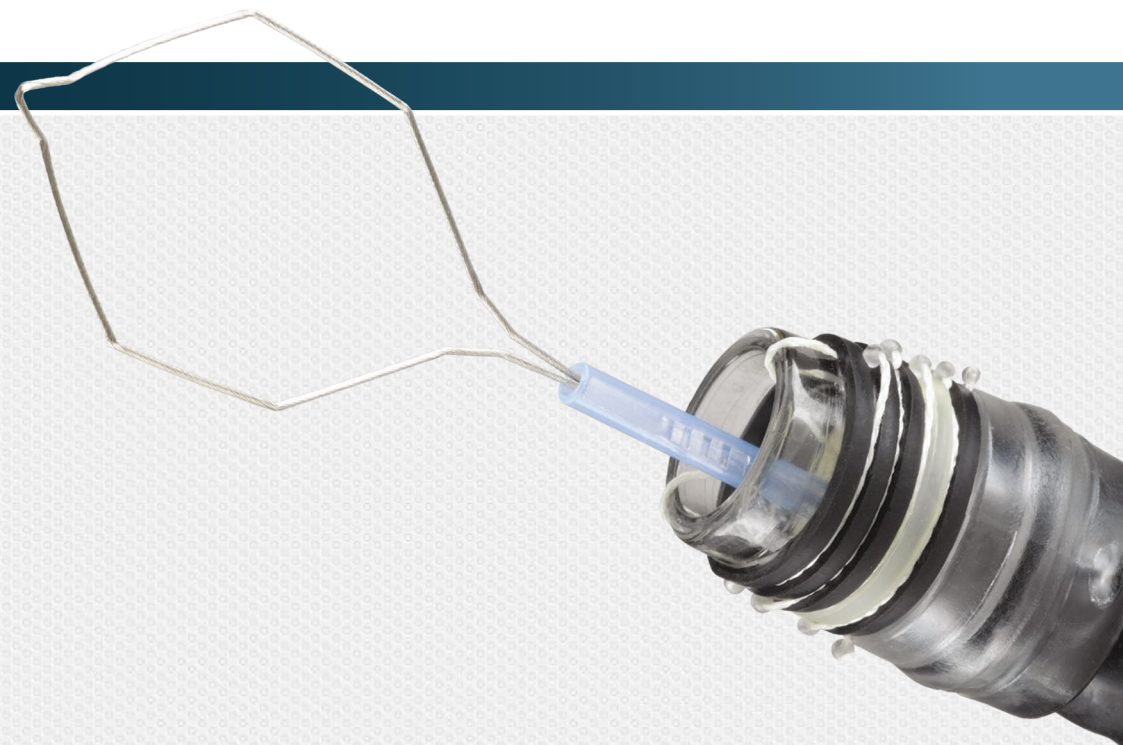
TISSUE MANAGEMENT

TARGET | ACQUIRE | TREAT

Used for endoscopic mucosal resection in the upper GI tract.

By combining a multi-band ligator with a snare, Duette facilitates targeted tissue acquisition and resection in the upper gastrointestinal (UGI) tract. Duette's inventive design can help you achieve positive outcomes in your endoscopic mucosal resection procedures.

- The device setup is similar to that of the 6 Shooter® Saeed® Multi-Band Ligator.
- The six latex rubber bands are available for resection purposes. A single clear band is included on the barrel as an alert that only one additional band remains for use.
- The snare wire is soft and braided and has a mini-hexagonal configuration.
- The snare is available in 5 and 7 Fr.
- The snare may be passed through the ligator handle, allowing for speedy resection of ligated tissue without the removal of the endoscope or the disassembly of the components.



Caution: This product contains natural rubber latex, which may cause allergic reactions.

Order Number	Reference Part Number	Endoscope Outer Diameter mm	Number of Bands	Sheath Fr	Snare Size mm	Minimum Accessor Channel Diameter mm
G34036	DT-6	9.5-13	6	7.0	15 x 25	3.7
G35129	DT-6-5F	9.5-13	6	5.0	15 x 25	2.8
G34054	DT-6-XL	11-14	6	7.0	15 x 25	3.7

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AcuSnare[®]

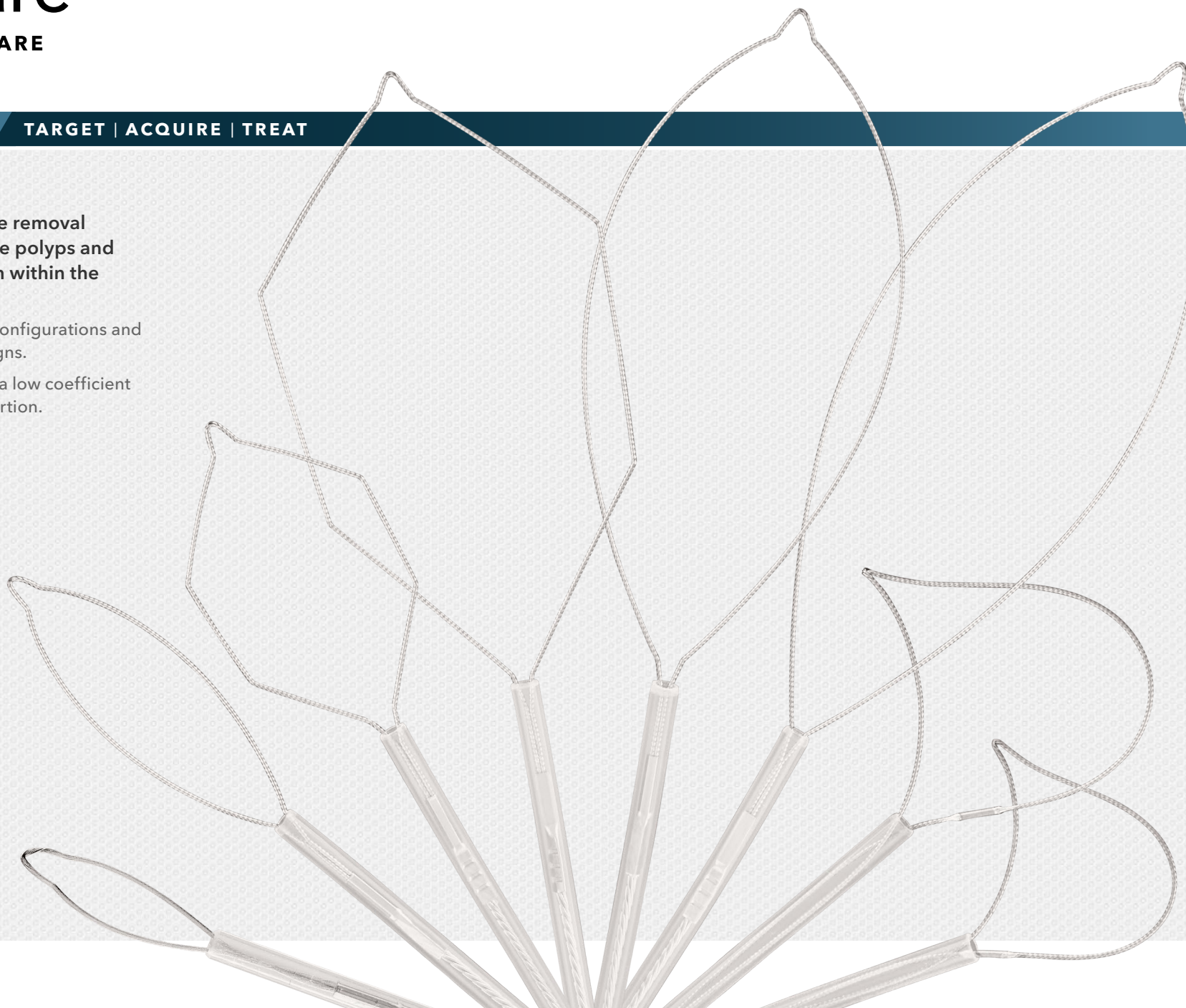
POLYPECTOMY SNARE

TISSUE MANAGEMENT

TARGET | ACQUIRE | TREAT

Used endoscopically in the removal and cauterization of sessile polyps and pedunculated polyps from within the gastrointestinal tract.

- It is available in multiple configurations and regular or soft snare designs.
- The PTFE sheath delivers a low coefficient of friction for smooth insertion.



TISSUE MANAGEMENT

TARGET | ACQUIRE | TREAT

Order Number	Reference Part Number	Snare Size mm	Sheath Fr	Snare Configuration
AcuSnare®				
G22631	ASM-1-S	15 x 30	6.9 Fr (2.3 mm)	Mini Oval
G22629	AS-1-S	25 x 55	6.9 Fr (2.3 mm)	Standard Oval
G22630	ASJ-1-S	30 x 60	6.9 Fr (2.3 mm)	Jumbo Oval
G22701	ASMH-1-S	15 x 25	6.9 Fr (2.3 mm)	Mini Hexagonal
G22700	ASH-1-S	30 x 45	6.9 Fr (2.3 mm)	Hexagonal
G22647	ASDB-15-015-S	15	6.9 Fr (2.3 mm)	Duck Bill
G22649	ASDB-25-015-S	25	6.9 Fr (2.3 mm)	Duck Bill

Order Number	Reference Part Number	Snare Size mm	Sheath Fr	Snare Configuration
Soft AcuSnare®				
G22704	SASMM-1-S	10 x 15	6.9 Fr (2.3 mm)	Micro Mini Oval
G22633	SASM-1-S	15 x 30	6.9 Fr (2.3 mm)	Mini Oval
G22632	SAS-1-S	25 x 55	6.9 Fr (2.3 mm)	Standard Oval
G22703	SASMH-1-S	15 x 25	6.9 Fr (2.3 mm)	Mini Hexagonal
G22702	SASH-1-S	30 x 45	6.9 Fr (2.3 mm)	Hexagonal

Minimum accessory channel diameter 2.8 mm. Active cord available separately. Some products or part numbers may not be available in all markets. Contact your local Cook representative or Customer Support & Distribution for details.

Captura Pro[®]

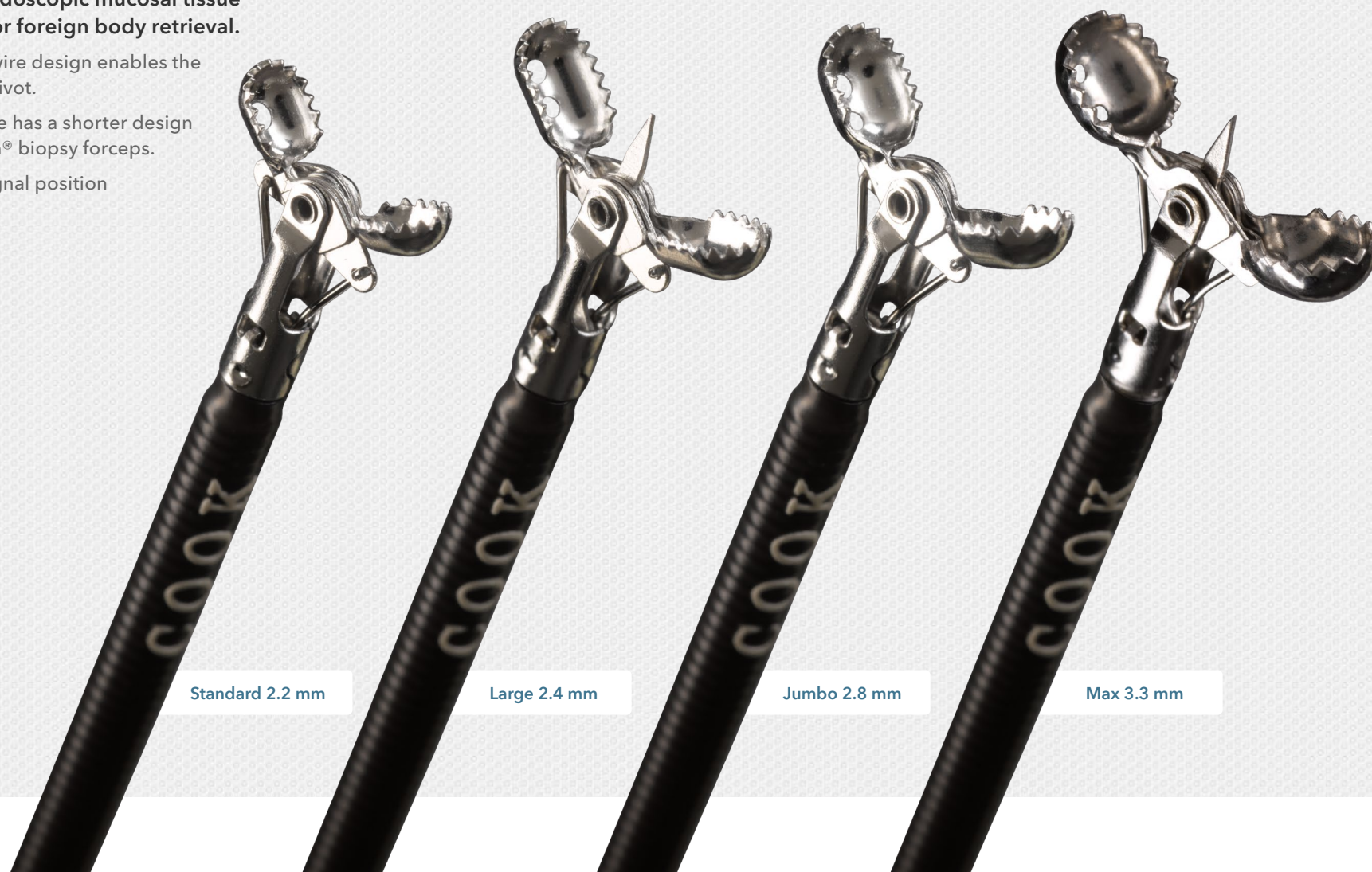
BIOPSY FORCEPS

TISSUE MANAGEMENT

TARGET | **ACQUIRE** | TREAT

Used to obtain endoscopic mucosal tissue biopsies and/or for foreign body retrieval.

- The dual-drive-wire design enables the biopsy cups to pivot.
- The throw handle has a shorter design than the Captura[®] biopsy forceps.
- The markings signal position and movement.



Standard 2.2 mm

Large 2.4 mm

Jumbo 2.8 mm

Max 3.3 mm

Order Number	Reference Part Number	Cup Diameter mm	Shaft Length cm	Forceps Type
Captura Pro® Standard Forceps				
G47687	BF-2.2S-160-20	2.2	160	Nonspiked
G47688	BF-2.2S-160-40	2.2	160	Nonspiked
G47689	BF-2.2S-160SP-20	2.2	160	Spiked
G47686	BF-2.2S-160SP-40	2.2	160	Spiked
G47690	BF-2.2S-230-20	2.2	230	Nonspiked
G47691	BF-2.2S-230-40	2.2	230	Nonspiked
G47692	BF-2.2S-230SP-20	2.2	230	Spiked
G47693	BF-2.2S-230SP-40	2.2	230	Spiked
Captura Pro® Large Forceps				
G47694	BF-2.4SL-160-20	2.4	160	Nonspiked
G47695	BF-2.4SL-160-40	2.4	160	Nonspiked
G47696	BF-2.4SL-160SP-20	2.4	160	Spiked
G47697	BF-2.4SL-160SP-40	2.4	160	Spiked
G47698	BF-2.4SL-230-20	2.4	230	Nonspiked
G47699	BF-2.4SL-230-40	2.4	230	Nonspiked
G50696	BF-2.4SL-230SP-20	2.4	230	Spiked
G50697	BF-2.4SL-230SP-40	2.4	230	Spiked

Order Number	Reference Part Number	Cup Diameter mm	Shaft Length cm	Forceps Type
Captura Pro® Jumbo Forceps				
G56992	BF-2.8SJ-160-20	2.8	160	Nonspiked
G56993	BF-2.8SJ-160-40	2.8	160	Nonspiked
G56994	BF-2.8SJ-160SP-20	2.8	160	Spiked
G56995	BF-2.8SJ-160SP-40	2.8	160	Spiked
G56996	BF-2.8SJ-230-20	2.8	230	Nonspiked
G56997	BF-2.8SJ-230-40	2.8	230	Nonspiked
G56998	BF-2.8SJ-230SP-20	2.8	230	Spiked
G56999	BF-2.8SJ-230SP-40	2.8	230	Spiked
Captura Pro® Max Forceps				
G57000	BF-3.3SM-230-20	3.3	230	Nonspiked
G57001	BF-3.3SM-230-40	3.3	230	Nonspiked
G57002	BF-3.3SM-230SP-20	3.3	230	Spiked
G57003	BF-3.3SM-230SP-40	3.3	230	Spiked
Captura® Mini Biopsy Forceps				
G53006	DBF-1.8-160-S	1.8	160	Nonspiked
Captura® Hot Biopsy Forceps				
G31583	HDBF-2.4-230-S	2.4	230	Nonspiked
G56135	HDBF-2.4SN-230-S	2.4	230	Nonspiked

All forceps are fenestrated. Some products or part numbers may not be available in all markets. Contact your local Cook representative or Customer Support & Distribution for details.

RotoNet™

ROTATABLE RETRIEVAL NET

TISSUE MANAGEMENT

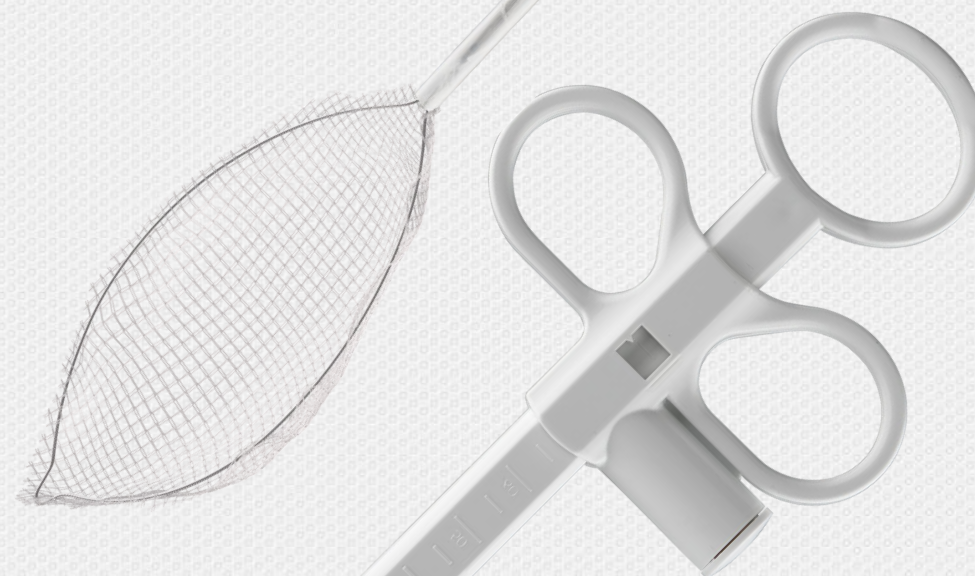
TARGET | **ACQUIRE** | TREAT

Used for the endoscopic retrieval of foreign body, food bolus, and excised tissue such as polyps.

- The 360° rotation optimizes control.
- Multiple sizes and lengths accommodate various clinical needs.
- It is capable of handling multiple foreign body removals.
- The soft, flexible mesh is efficient for the removal of foreign bodies and tissue.

Order Number	Reference Part Number	Tip Diameter mm	Net Size cm	Catheter Length cm	Minimum Accessory Channel Diameter mm
G57785	RT-NET-2-160-5	1.8	2 x 4.5	160	2.0
G57797	RT-NET-3-160-5	2.5	3 x 6	160	2.8
G57798	RT-NET-3-230-10	2.5	3 x 6	230	2.8
G57799	RT-NET-3-350-5	2.5	3 x 6	350	2.8
G57800	RT-NET-4-160-5	3.0	4 x 8	160	3.2
G57801	RT-NET-4-230-5	3.0	4 x 8	230	3.2

Some products or part numbers may not be available in all markets. Contact your local Cook representative or Customer Support & Distribution for details.



AcuTrap™

4-CHAMBER POLYP TRAP

TISSUE MANAGEMENT TARGET | **ACQUIRE** | TREAT

Used for in-line suction retrieval of polyps during endoscopic procedures.

- It is packaged individually.
- The single-use device minimizes the risk of cross-contamination.
- The clear plastic design allows for visual confirmation during polyp collection.
- It has a 4-chamber index.
- Accurately identify each specimen sample in fixed chambers.
- Capture excised tissue with a convenient polyp collection and transport container.

Order Number	Reference Part Number	Number of Chambers	Type of Chambers
G57802	AT-PT-4-12	4	Fixed

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Instinct Plus[®]

ENDOSCOPIC CLIPPING DEVICE

TISSUE MANAGEMENT

TARGET | ACQUIRE | TREAT

Reengineered for smoother operation and responsive handling, the Instinct Plus Endoscopic Clipping Device combines strength with the simplicity of one-step deployment.

Strength and security

- It has strong clip retention.¹
- The multiple anchoring tips on the clip aid in dragging and holding tissue.
- The clip is reinforced with nitinol, a superelastic shape-memory alloy.

Responsive handling

- The adjustable clip span opens up to 16 mm wide.
- It has one-to-one rotation from the handle to the tip.
- It can be opened and closed up to five times for repositioning.

Versatility

- It is compatible with forward-viewing and side-viewing scopes.
- It is indicated for defect closure, hemostasis, and affixing jejunal feeding tubes and esophageal self-expanding metal stents (see complete indications for use for details).



1. Ponugoti PL, Rex DK. Clip retention rates and rates of residual polyp at the base of retained clips on colorectal EMR sites. *Gastrointest Endosc*. 2017;85(3):530-534.

The Instinct Plus Endoscopic Clipping Device is used for endoscopic clip placement within the gastrointestinal tract for the purpose of:

- Endoscopic marking
- Hemostasis for:
 - › Mucosal/submucosal defects less than 3 cm
 - › Bleeding ulcers
 - › Arteries less than 2 mm
 - › Polyps less than 1.5 cm in diameter
 - › Diverticula in the colon
 - › Prophylactic clipping to reduce the risk of delayed bleeding post lesion resection
- Anchoring to affix jejunal feeding tubes to the wall of the small bowel
- As a supplementary method for closure of GI tract luminal perforations less than 20 mm that can be treated conservatively
- Anchoring to affix fully covered esophageal self-expanding metal stents to the wall of the esophagus in patients with fistulas, leaks, perforations, or disunion

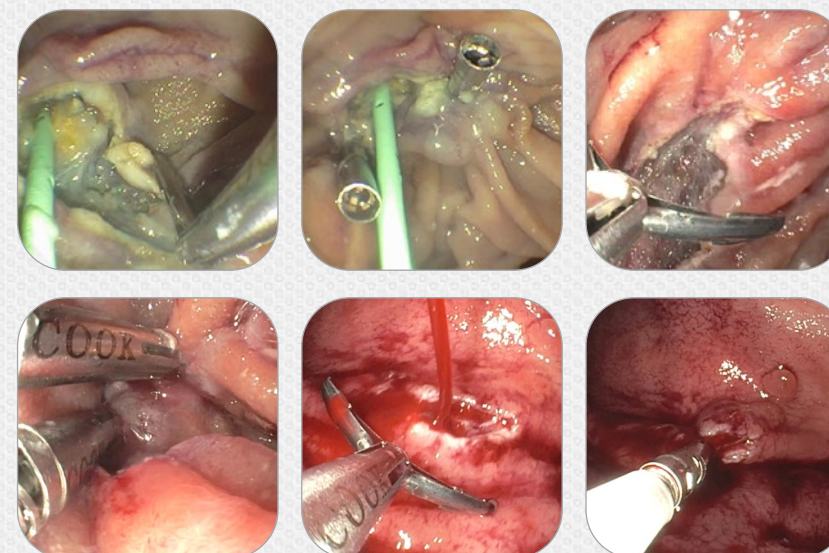


Image credit: Dr. Shou Jiang Tang, the University of Mississippi Medical Center, Jackson, MS

Order Number	Reference Part Number	Clip Opening Width mm	Catheter Fr	Catheter Length cm	Quantity	MR Status	Minimum Forward-Viewing Channel Diameter mm	Minimum Side-Viewing Channel Diameter mm
G58010	INSC-P-7-230-S	16	7	230	10	MR Conditional	2.8	4.2

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AI-ESC-IR-OHNS-PI-RH-SUR-A4

Instinct Plus® Endoscopic Clipping Device

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

INTENDED USE: This device is used for endoscopic clip placement within the gastrointestinal tract for the purpose of: 1. Endoscopic marking, 2. Hemostasis for • Mucosal/submucosal defects less than 3 cm, • Bleeding ulcers, • Arteries less than 2 mm, • Polyps less than 1.5 cm in diameter, • Diverticula in the colon, and • Prophylactic clipping to reduce the risk of delayed bleeding post lesion resection, 3. Anchoring to affix jejunal feeding tubes to the wall of the small bowel, 4. As a supplementary method for closure of GI tract luminal perforations less than 20 mm that can be treated conservatively, 5. Anchoring to affix fully covered esophageal self-expanding metal stents to the wall of the esophagus in patients with fistulas, leaks, perforations, or disunion.

CONTRAINDICATIONS: Those specific to primary endoscopic procedure to be performed in gaining access to desired site. Those specific to endoscopic hemostasis include, but are not limited to: uncooperative patient, coagulopathy, cricopharyngeal or esophageal narrowing or stricture, and tortuous esophagus.

WARNINGS: This device has not been evaluated for anchoring to affix fully covered esophageal self-expanding metal stents to the wall of the esophagus in patients with esophageal strictures or malignant obstructions.

POTENTIAL COMPLICATIONS: Those associated with gastrointestinal endoscopy and endoscopic hemostasis include, but are not limited to: perforation, hemorrhage, aspiration, fever, infection, allergic reaction to medication, hypotension, respiratory depression or arrest, cardiac arrhythmia or arrest, hematemesis, transient dysphagia, aspiration pneumonia, wound dehiscence, minimal acute inflammatory tissue reaction, transitory local irritation, migration of clip into the bile duct, and anatomy disruption.

See Instructions for Use for full product information.

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