

CytoSorb® HotSwap

Quick Setup Guide

HotSwap enables the exchange of a used CytoSorb® 300 adsorber in the ongoing extra-corporeal circuit – including controlled blood return.

The exchange can take place without disconnection from the Shaldon catheter and thus support a fast as well as hygienically optimized process.

In patients with frequently required adsorber exchanges – e.g., in hyperinflammation, rhabdomyolysis or liver dysfunction – the procedure contributes to more efficient workflows and potential time savings in everyday clinical practice.

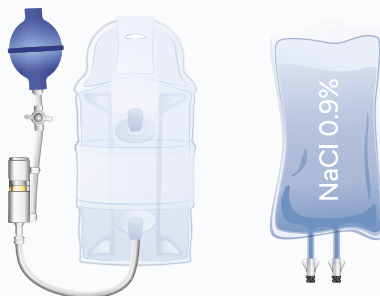
The HotSwap adapter is intended for a duration of use of up to 96 hours.

Required materials

CytoSorb Adsorber

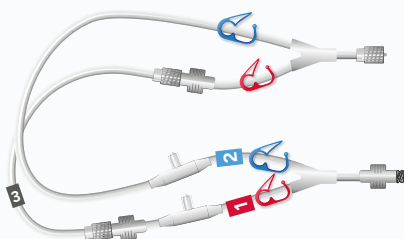


Pressure cuff and 500mL saline bag

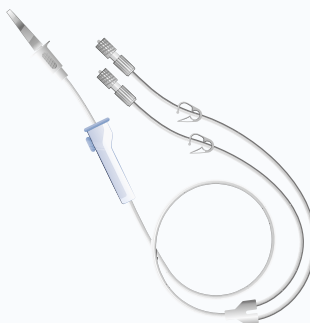


REF SE00200SP - HotSwap Set

HotSwap adapter



Flush line



2 Bridge adapter



The HotSwap adapter

Flush system

- (A) Typical pressure infusion bag with 500mL normal saline (NaCL 0.9%), e.g. from the arterial pressure flush system.
- (B) Roller clamp
- (C) Pinch clamps

Ensure sufficient filling of the flush bag before flushing procedures to avoid introducing air into the system.

1 Adsorber line

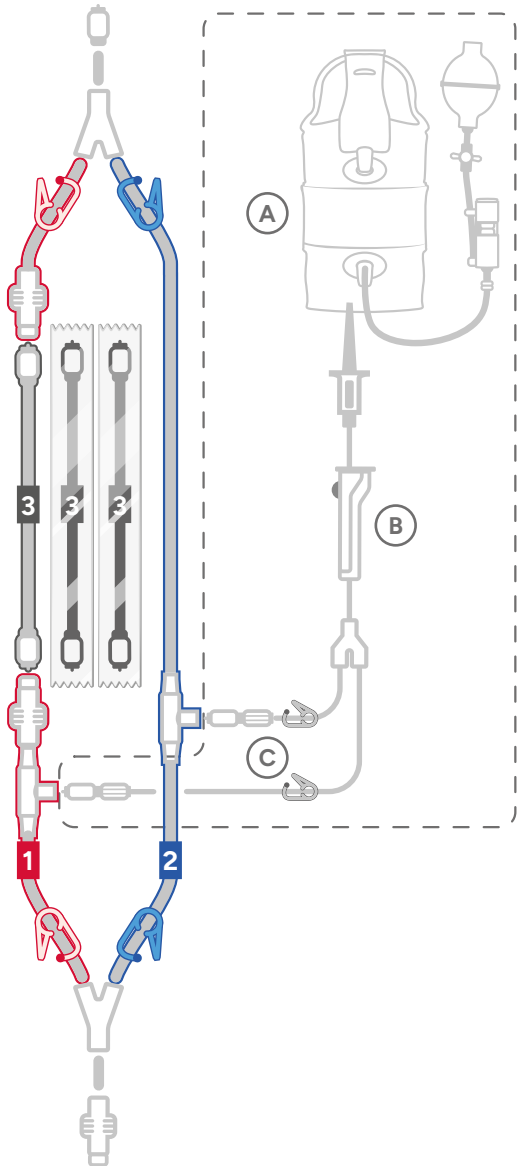
Blood flows during treatment through this line with connections for bridge adapter or adsorber.

2 Bypass line

Blood flows through this line only during the adsorber exchange. During normal operations, this line is flushed with saline and clamped.

3 Bridge adapter

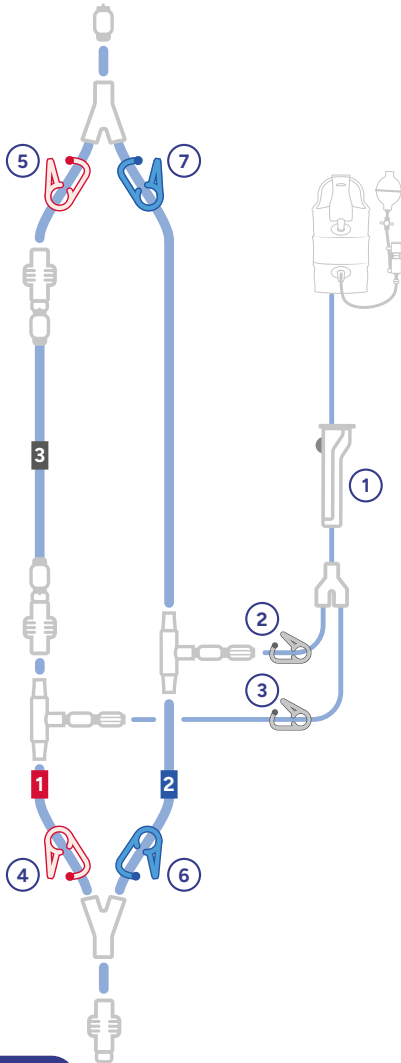
- For connecting the ports when no adsorber is installed.
- Removed when the adsorber is installed.
- 2 sterile packaged bridges included in the set, e.g. for a discontinuation trial.



01 Integrate HotSwap into RRT or HP

Integrate HotSwap (using the adapter, see **08**) during setup of the extracorporeal circuit (EC) and prime all line components.

Afterwards, the system is prepared for the start of treatment.



Please perform the steps in the order indicated by the numbers

①, ②, ...

- ▶ Connect the flush line to the saline bag and prime.
- Afterwards close ①, ②, ③
- ▶ Flush the adsorber line and bypass line until free of bubbles.
- Afterwards close ④ and ⑤
- ⑥ and ⑦ remain open.



Legend

←---
Flow direction

Clamp closed

Clamp open

Flush with saline solution

Filled with saline solution

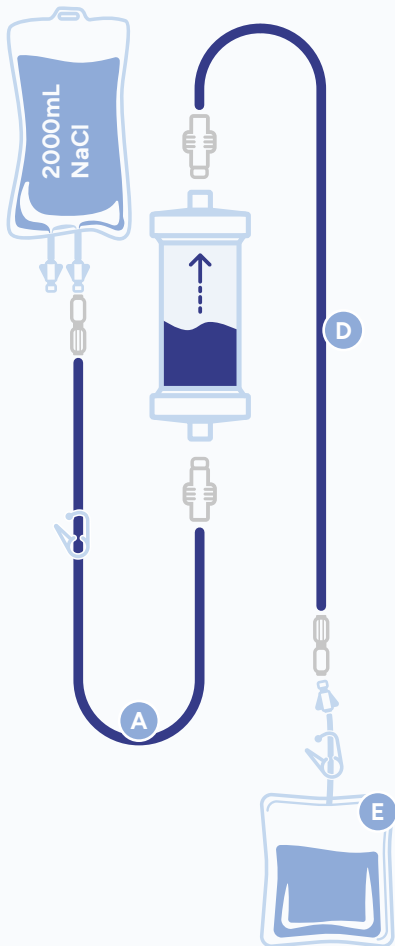
Filled with blood

02 Prime the adsorber

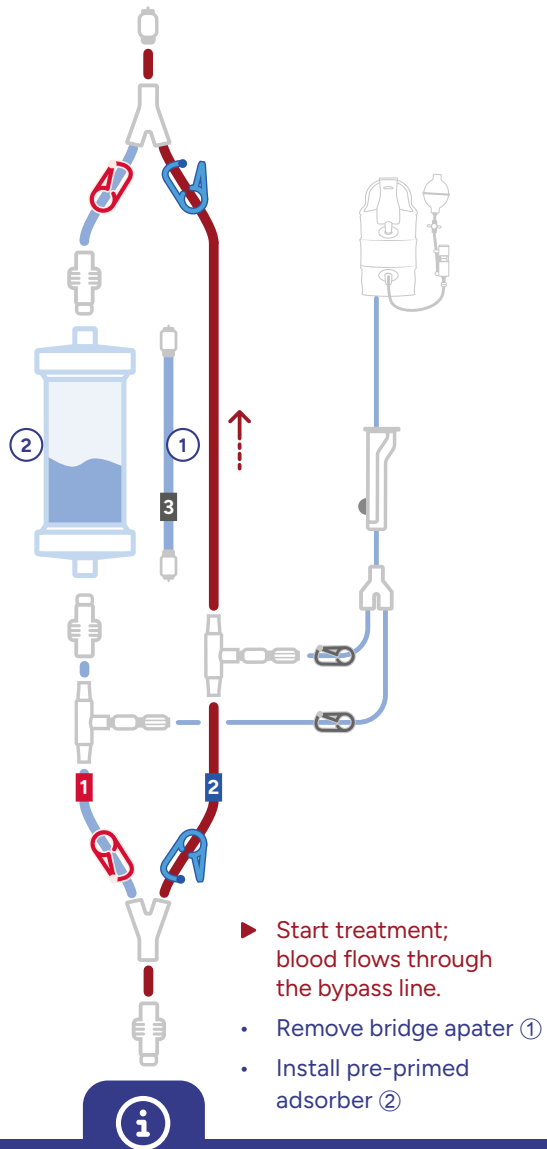
Before integration and adsorber exchange:

prime the adsorber using adapter set 1b.

- A** Red Luer Lock – Red DIN Lock
- D** Blue Luer Lock – Blue DIN Lock
- E** 2 liter disposal bag



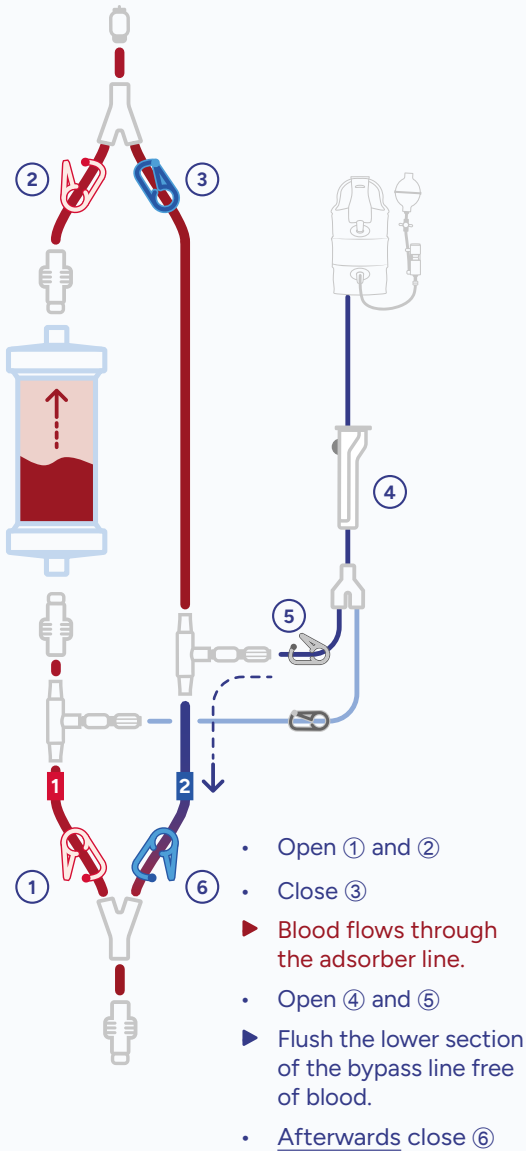
03 Integrate the adsorber



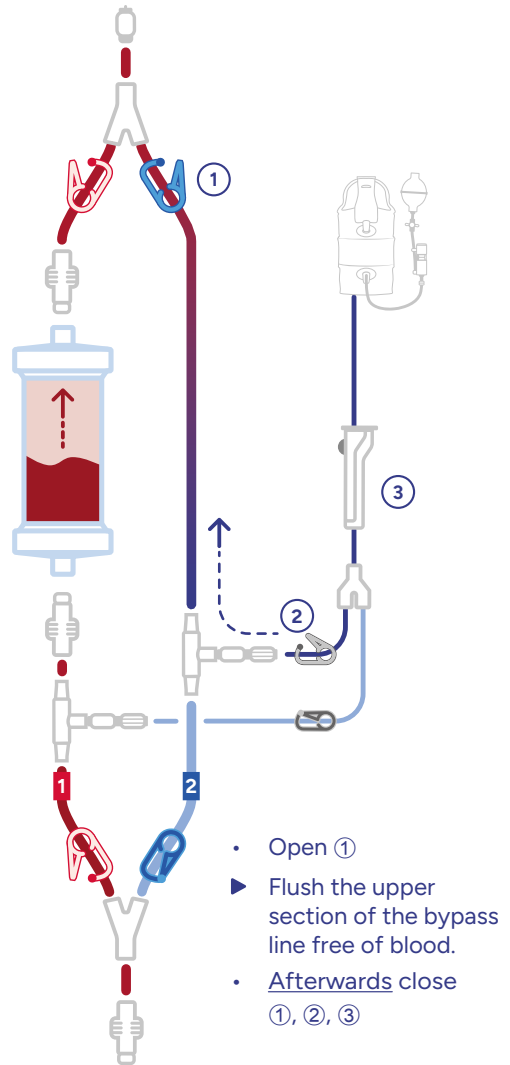
- Never remove both caps from the adsorber at the same time!
- Keep the adsorber caps on the used bridge adapter ①.

04 Prime the bypass

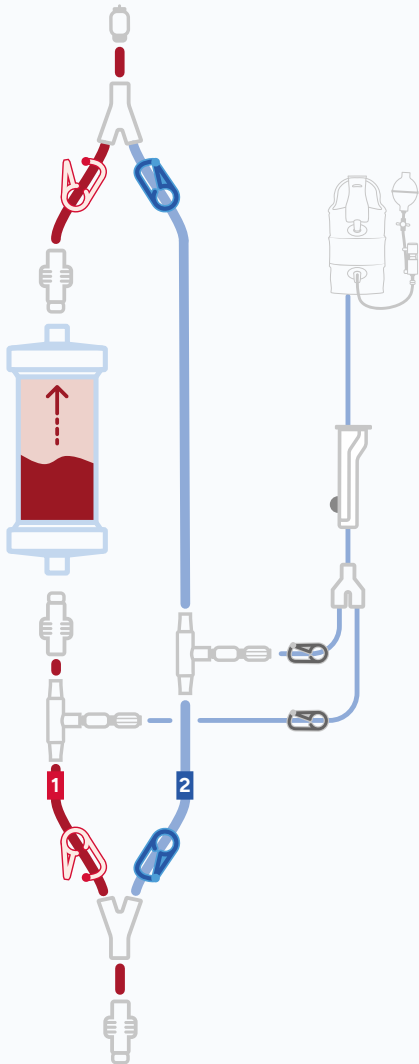
04.1



04.2



05 CytoSorb treatment

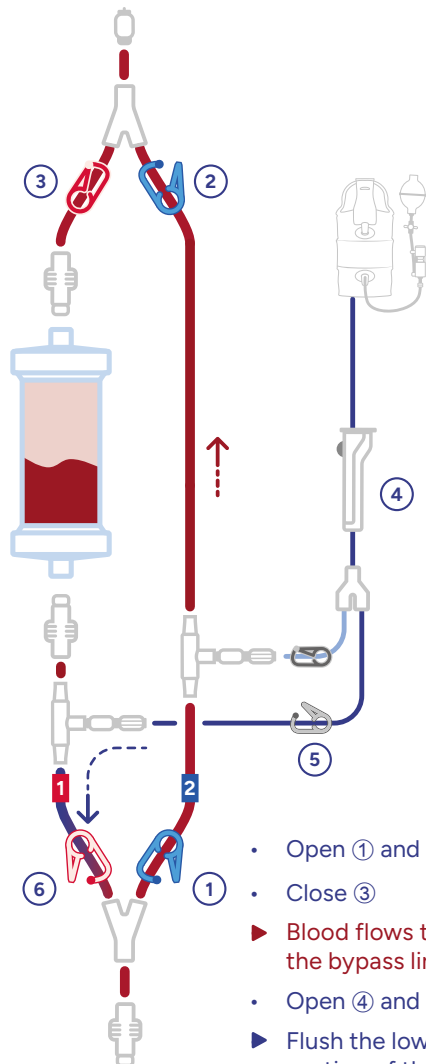


Consider changing the adsorber depending on the indication and course of treatment:

- Maximum 24 hours per adsorber.
- In the case of high target substance levels with a risk of saturation, consider changing the adsorber earlier, e.g. after 6-8 (or 12) hours.

06 Blood return

06.1

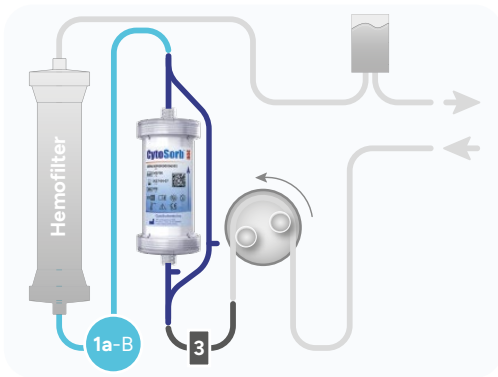


- Open ① and ②
- Close ③
- ▶ Blood flows through the bypass line
- Open ④ and ⑤
- ▶ Flush the lower section of the adsorber line free of blood.
- Afterwards close ⑥

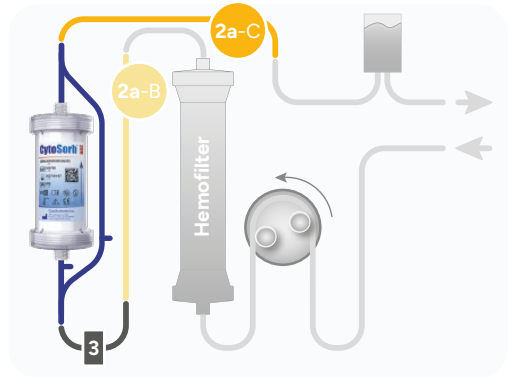
08 Integration of the HotSwap adapter into extracorporeal circuits

The HotSwap adapter should be installed during system setup and primed together with the system. For integration into CRRT, the lines shown from [adapter sets 1a](#) and [2a](#) are required.

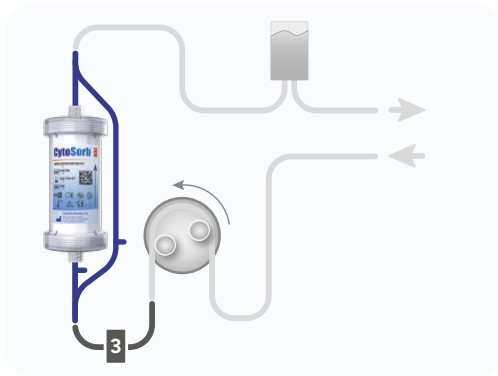
CRRT – Pre Filter



CRRT – Post Filter



PuriFi / HP



- HotSwap
- 3 Bridge adapter
- Adapter Set 1a – B 
- Adapter Set 2a – B 
- Adapter Set 2a – C 

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