MUCUS RELIEF DM- guaifenesin, dextromethorphan hbr tablet, extended release

FSA Store Inc. (Caring Mills)

Drug Facts

Active ingredients (in each extended-release tablet)

Dextromethorphan HBr 60 mg
Guaifenesin 1200 mg

Purpose

Cough Suppressant

Expectorant

Uses

- helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus and make coughs more productive
- temporarily relieves
 - cough due to minor throat and bronchial irritation as may occur with the common cold or inhaled irritants
 - the intensity of coughing
 - · the impulse to cough to help you get to sleep

Warnings

Do not use

- for children under12 years of age
- if you are now taking a prescription monoamine oxidase inhibitor (MAOI) (certain drugs for depression, psychiatric or emotional conditions, or Parkinson's disease), or for 2 weeks after stopping the MAOI drug. If you do not know if your prescription drug contains an MAOI, ask a doctor or pharmacist before taking this product.

Ask a doctor before use if you have

- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema
- cough accompanied by too much phlegm (mucus)

When using this product,

do not use more than directed.

Stop use and ask a doctor if

cough lasts more than 7 days, comes back, or occurs with fever, rash or persistent headache. These could be signs of a serious illness.

If pregnant or breast-feeding,

ask a health professional before use.

Keep out of reach of children.

In case of overdose, get medical help or contact a Poison Control Center right away (1-800-222-1222).

Directions

- do not crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regards for timing of meals
- adults and children 12 years of age and older: 1 tablet every 12 hours; not more than 2 tablets in 24 hours
- children under 12 years of age: do not use

Other information

• store between 20° to 25°C (68° to 77°F)

Inactive ingredients

carbomer, colloidal silicon dioxide, D&C yellow #10 aluminum lake, hypromellose, lactose monohydrate, magnesium stearate, microcrystalline cellulose, povidone, talc

Questions or comments?

Call **1-877-753-3935** Monday-Friday 9AM-5PM EST

Principal display panel

*Compare to the active ingredients in Maximum Strength Mucinex® DM

Maximum Strength

MUCUS RELIEF DM

Guaifenesin 1200 mg

Expectorant

Dextromethorphan HBr 60 mg

Cough suppressant

12-Hour Relief

- Controls Cough
- Thins and loosens mucus

Extended-Release Tablets

*This product is not manufactured or distributed by Reckitt Benckiser LLC, distributor of Maximum Strength Mucinex® DM

TAMPER EVIDENT: DO NOT USE IF BLISTER UNIT IS TORN, BROKEN OR SHOWS ANY SIGNS OF TAMPERING.

KEEP OUTER CARTON FOR COMPLETE WARNINGS AND PRODUCT INFORMATION.

Manufactured for FSA Store Inc,

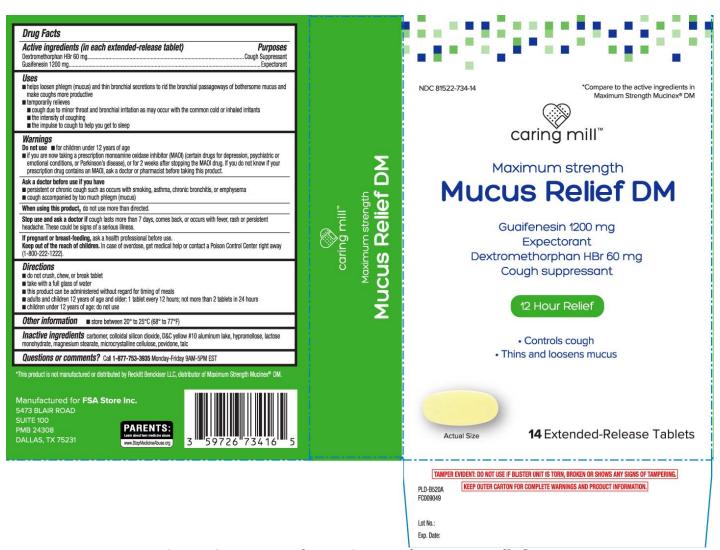
5473 BLAIR ROAD

SUITE 100

PMB 24308

DALLAS, TX 75231

Package Label



MUCUS RELIEF DM

guaifenesin, dextromethorphan hbr tablet, extended release

Product Information			
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:81522-734(NDC:65162-039)
Route of Administration	ORAL		

Active Ingredient/Active Moiety			
Ingredient Name	Basis of Strength	Strength	
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg	
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	1200 mg	

Inactive Ingredients			
Ingredient Name	Strength		
CARBOMER 934 (UNII: Z135WT9208)			
SILICON DIOXIDE (UNII: ETJ7Z6XBU4)			
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)			
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)			
LACTOSE MONOHYDRATE (UNII: EWQ57Q8I5X)			
MAGNESIUM STEARATE (UNII: 70097M6I30)			
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)			
POVIDONE (UNII: FZ989GH94E)			
TALC (UNII: 7SEV7J4R1U)			

Product Characteristics			
Color	yellow (light yellow)	Score	no score
Shape	OVAL	Size	22mm
Flavor		Imprint Code	AN039
Contains			

P	Packaging			
#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:81522-734- 14	14 in 1 CARTON	12/31/2023	
1		1 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information			
Marketing	Application Number or Monograph	Marketing Start	Marketing End
Category	Citation	Date	Date

ANDA	ANDA209692	12/31/2023	

Labeler - FSA Store Inc. (Caring Mills) (049283340)

Revised: 2/2024 FSA Store Inc. (Caring Mills)