# MUCINEX SINUS-MAX DAY AND NIGHT MAXIMUM STRENGTH- acetaminophen, dextromethorphan hydrobromide, guaifenesin, doxylamine succinate, and phenylephrine hydrochloride RB Health (US) LLC

Disclaimer: Most OTC drugs are not reviewed and approved by FDA, however they may be marketed if they comply with applicable regulations and policies. FDA has not evaluated whether this product complies.

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# Mucinex® Sinus-Max® Day and Night Maximum Strength

Active ingredients (in each

#### **Drug Facts**

liquid gel)	Purposes
Mucinex SINUS-MAX DAY	•
Acetaminophen 325 mg	Pain reliever
Dextromethorphan HBr 10 mg	Cough suppressant
Guaifenesin 200 mg	Expectorant
Phenylephrine HCl 5 mg	Nasal decongestant
Active ingredients (in each liquid gel) Mucinex SINUS-MAX NIGHT	Purposes
-	<i>Purposes</i> Pain reliever
liquid gel) Mucinex SINUS-MAX NIGHT	
liquid gel) Mucinex SINUS-MAX NIGHT Acetaminophen 325 mg	Pain reliever

#### Uses

- temporarily relieves:
  - nasal congestion
  - headache
  - cough
  - minor aches and pains
  - sinus congestion and pressure
  - runny nose and sneezing (NIGHT only)
- temporarily promotes nasal and/or sinus drainage
- helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus and make coughs more productive (DAY only)

#### Warnings

# Liver warning

This product contains acetaminophen. Severe liver damage may occur if you take:

- more than 12 liquid gels in 24 hours, which is the maximum daily amount
- with other drugs containing acetaminophen
- 3 or more alcoholic drinks daily while using this product

#### Allergy alert

Acetaminophen may cause severe skin reactions. Symptoms may include:

- skin reddening
- blisters
- rash

If a skin reaction occurs, stop use and seek medical help right away.

#### Do not use

- with any other drug containing acetaminophen (prescription or nonprescription). If you are not sure whether a drug contains acetaminophen, ask a doctor or pharmacist.
- 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

- liver disease
- heart disease
- diabetes
- high blood pressure
- thyroid disease
- trouble urinating due to an enlarged prostate gland
- glaucoma (NIGHT only)
- a breathing problem such as emphysema or chronic bronchitis (NIGHT only)
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema
- cough that occurs with too much phlegm (mucus)

# Ask a doctor or pharmacist before use if you are

- taking the blood thinning drug warfarin
- taking sedatives or tranquilizers (NIGHT only)

# When using this product

- do not use more than directed
- excitability may occur, especially in children (NIGHT only)
- marked drowsiness may occur (NIGHT only)
- alcohol, sedatives, and tranquilizers may increase drowsiness (NIGHT only)
- avoid alcoholic drinks (NIGHT only)
- be careful when driving a motor vehicle or operating machinery (NIGHT only)

# Stop use and ask a doctor if

- nervousness, dizziness, or sleeplessness occur
- pain, nasal congestion, or cough gets worse or lasts more than 7 days
- fever gets worse or lasts more than 3 days
- redness or swelling is present
- new symptoms occur
- cough comes back, or occurs with fever, rash, or headache that lasts. These could be signs of a serious condition.

If pregnant or breast-feeding, ask a health professional before use.

Keep out of reach of children.

#### Overdose warning

Taking more than the recommended dose (overdose) may cause liver damage. In case of overdose, get medical help or contact a Poison Control Center right away. Quick medical attention is critical for adults as well as for children even if you do not notice any signs or symptoms.

#### **Directions**

- do not take more than directed (see Overdose warning)
- do not take more than 12 liquid gels in any 24-hour period
- adults and children 12 years of age and over: take 2 liquid gels every 4 hours
- children under 12 years of age: do not use

#### Other information

- store at 20-25°C (68-77°F)
- avoid excessive heat

# Inactive ingredients (DAY only)

FD&C yellow no. 6, gelatin, glycerin, hypromellose, isopropyl alcohol, lecithin, light mineral oil, polyethylene glycol, povidone, propylene glycol, sorbitol sorbitan solution, titanium dioxide, water

# Inactive ingredients (NIGHT only)

D&C yellow no. 10, FD&C blue no. 1, gelatin, glycerin, hypromellose, isopropyl alcohol, lecithin, light mineral oil, polyethylene glycol, povidone, propylene glycol, sorbitol sorbitan solution, titanium dioxide, water

#### **Questions?**

# 1-866-MUCINEX (1-866-682-4639)

Dist. by: RB Health (US) Parsippany, NJ 07054-0224

#### PRINCIPAL DISPLAY PANEL - Kit Carton

Fast Dissolving Liquid Gels!

NDC 72854-204-24

MAXIMUM STRENGTH

Mucinex® SINUS-MAX®

DAY

Acetaminophen – Pain Reliever Dextromethorphan HBr - Cough Suppressant Guaifenesin – Expectorant Phenylephrine HCl – Nasal Decongestant

- Relieves Sinus Pressure, Headache & Congestion
- ✓ Controls Cough
- ✓ Thins & Loosens Mucus

#### **Actual Size**

16 LIQUID GELS (Liquid Filled Capsules)

**NIGHT** 

Acetaminophen – Pain Reliever Dextromethorphan HBr - Cough Suppressant Doxylamine Succinate - Antihistamine Phenylephrine HCl - Nasal Decongestant

- ✓ Relieves Nasal Congestion, Sinus Pressure & Pain
- ✓ Controls Cough
- ✓ Relieves Runny Nose & Sneezing

#### **Actual Size**

8 LIQUID GELS (Liquid Filled Capsules)

FOR AGES 12+

TOTAL 24 LIQUID GELS





#### MUCINEX SINUS-MAX DAY AND NIGHT MAXIMUM STRENGTH

acetaminophen, dextromethorphan hydrobromide, guaifenesin, doxylamine succinate, and phenylephrine hydrochloride kit

#### **Product Information**

Product Type HUMAN OTC DRUG Item Code (Source) NDC:72854-204

## **Packaging**

l	#	Item Code	Package Description	Marketing Start Date	Marketing End Date
ı	1	NDC:72854-204-24	1 in 1 CARTON	07/26/2021	

# **Quantity of Parts**

Part #	Package Quantity	Total Product Quantity
Part 1	2 BLISTER PACK	16
Part 2	1 BLISTER PACK	8

#### Part 1 of 2

#### MUCINEX SINUS-MAX DAY MAXIMUM STRENGTH

acetaminophen, dextromethorphan hydrobromide, guaifenesin, and phenylephrine hydrochloride capsule, liquid filled

#### **Product Information**

Route of Administration ORAL

Active Ingredient/Active Moiety				
Ingredient Name	Basis of Strength	Strength		
ACETAMINOPHEN (UNII: 36209ITL9D) (ACETAMINOPHEN - UNII:36209ITL9D)	ACETAMINOPHEN	325 mg		
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	10 mg		
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	200 mg		
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII: 1WS 297W6MV)	PHENYLEPHRINE HYDROCHLORIDE	5 mg		

Inactive Ingredients		
Ingredient Name	Strength	
FD&C yellow no. 6 (UNII: H77VEI93A8)		
GELATIN, UNSPECIFIED (UNII: 2G86QN327L)		
GLYCERIN (UNII: PDC6A3C0OX)		
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)		
ISOPROPYL ALCOHOL (UNII: ND2M416302)		
LIGHT MINERAL OIL (UNII: N6K5787QVP)		
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WJQ0SDW1A)		
POVIDONE, UNSPECIFIED (UNII: FZ989GH94E)		
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)		

TITANIUM DIOXIDE (UNII: 15FIX9V2JP)

WATER (UNII: 059QF0KO0R)

<b>Product Characteris</b>	tics		
Color	ORANGE	Score	no score
Shape	OVAL	Size	26mm
Flavor		Imprint Code	AR01
Contains			

ı	Pac	Packaging			
4	# Item Package Description		Marketing Start Date	Marketing End Date	
1	8 in 1 BLISTER PACK; Type 0: Not a Combination Product				

	Marketing In	Marketing Information				
Marketing Application Number or Monograph Category Citation		Marketing Start Date	Marketing End Date			
	OTC monograph final	part341	07/26/2021			

# Part 2 of 2

# MUCINEX SINUS-MAX NIGHT MAXIMUM STRENGTH

acetaminophen, dextromethorphan hydrobromide, doxylamine succinate, and phenylephrine hydrochloride capsule, liquid filled

#### **Product Information**

**Route of Administration** ORAL

Active Ingredient/Active Moiety			
Ingredient Name	<b>Basis of Strength</b>	Strength	
ACETAMINOPHEN (UNII: 36209ITL9D) (ACETAMINOPHEN - UNII:36209ITL9D)	ACETAMINOPHEN	325 mg	
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	10 mg	
DOXYLAMINE SUCCINATE (UNII: V9BI9B5YI2) (DOXYLAMINE - UNII:95QB77JKPL)	DOXYLAMINE SUCCINATE	6.25 mg	
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII: 1WS297W6MV)	PHENYLEPHRINE HYDROCHLORIDE	5 mg	

Inactive Ingredients	
Ingredient Name	Strength

D&C yellow no. 10 (UNII: 35SW5USQ3G)

FD&C blue no. 1 (UNII: H3R47K3TBD)

GELATIN, UNSPECIFIED (UNII: 2G86QN327L)

GLYCERIN (UNII: PDC6A3C0OX)

HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)

ISOPROPYL ALCOHOL (UNII: ND2M416302)

LIGHT MINERAL OIL (UNII: N6K5787QVP)

POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WJQ0SDW1A)

POVIDONE, UNSPECIFIED (UNII: FZ989GH94E)

PROPYLENE GLYCOL (UNII: 6DC9Q167V3)

TITANIUM DIOXIDE (UNII: 15FIX9V2JP)

WATER (UNII: 059QF0KOOR)

Product Characteristics			
Color	GREEN	Score	no score
Shape	OVAL	Size	21mm
Flavor		Imprint Code	AR03
Contains			

ı	Pac	Packaging				
	# Item Package Description		Marketing Start Date	Marketing End Date		
	1		8 in 1 BLISTER PACK; Type 0: Not a Combination Product			

Marketing Information				
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date	
OTC monograph final	part341	07/26/2021		

Marketing Information				
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date	
OTC MONOGRAPH FINAL	part341	07/26/2021		

# Labeler - RB Health (US) LLC (081049410)

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