# QCH MAXIMUM STRENGTH MUCUS RELIEF DM 628 - dextromethorphan hbr, guaifenesin liquid

Chain Drug Marketing Association Inc.

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# QCH Maximum Strength Mucus Relief DM 628

## **ACTIVE INGREDIENTS (in each 20 mL)**

Dextromethorphan HBr, 20 mg Guaifenesin, 400 mg

#### **PURPOSE**

Cough Suppressant Expectorant

### USE(S)

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

#### WARNINGS

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#### **DO NOT USE**

- for children under 12 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**

• persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis or emphysema

cough that occurs with too much phlegm (mucus)

#### WHEN USING THIS PRODUCT

do not use more than directed

#### STOP USE AND ASK 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 condition.

#### 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.

#### **DIRECTIONS**

- do not take more than 6 doses in any 24-hour period
- measure only with dosing cup provided
- do not use dosing cup with other products
- dose as follows or as directed by a doctor
- Adults & children 12 years & older: 20 mL every 4 hours
- Children under 12 years of age: Do not use

#### OTHER INFORMATION

- each 20 mL contains: potassium 20 mg, sodium 20 mg
- store between 15-30°C (59-86°F)
- do not refrigerate
- dosing cup provided

#### **INACTIVE INGREDIENTS**

citric acid anhydrous, dextrose, D&C red # 33, FD&C Red #40, flavors, glycerin, methylparaben, potassium sorbate, propylene glycol, propylparaben, purified water, saccharin sodium, sodium hydroxide, sorbitol, sucralose, xanthan gum.

#### PACKAGE LABEL.PRINCIPAL DISPLAY PANEL

NDC 83324-026-06

# **QUALITY CHOICE®**

\*Compare to the Active Ingredient Maximum Strength Mucinex Fast Max DM  ${\it \$}$ 

Maximum Strength Mucus Relief

# Cough Suppressant / Expectorant

Dextromethorphan HBr, 20 mg Per 20 mL Guaifenesin, 400 mg Per 20 mL

Helps Control Cough

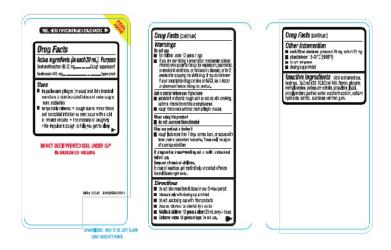
**Relieves Chest Congestion** 

Thins and Loosens Mucus

# **Cherry Flavor**

6 FL OZ (177 mL)





# **QCH MAXIMUM STRENGTH MUCUS RELIEF DM 628**

dextromethorphan hbr, guaifenesin liquid

Product Information				
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:83324-026	
Route of Administration	ORAL			

Active Ingredient/Active Moiety				
Ingredient Name	Basis of Strength	Strength		
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 20 mL		
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	400 mg in 20 mL		

Inactive Ingredients			
Ingredient Name	Strength		
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)			
D&C RED NO. 33 (UNII: 9DBA0SBB0L)			
DEXTROSE, UNSPECIFIED FORM (UNII: IY9XDZ 35W2)			
FD&C RED NO. 40 (UNII: WZB9127XOA)			

GLYCERIN (UNII: PDC6A3C0OX)	
METHYLPARABEN (UNII: A2I8C7HI9T)	
POTASSIUM SORBATE (UNII: 1VPU26JZZ4)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
PROPYLPARABEN (UNII: Z8IX2SC1OH)	
WATER (UNII: 059QF0KO0R)	
SACCHARIN SODIUM (UNII: SB8ZUX40TY)	
SODIUM HYDROXIDE (UNII: 55X04QC32I)	
SORBITOL (UNII: 506T60A25R)	
SUCRALOSE (UNII: 96K6UQ3ZD4)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics			
Color	RED	Score	
Shape		Size	
Flavor	CHERRY	Imprint Code	
Contains			

ı	Packaging				
	#	Item Code	Package Description	Marketing Start Date	Marketing End Date
	1	NDC:83324-026- 06	177 mL in 1 BOTTLE; Type 0: Not a Combination Product	04/26/2024	

Marketing Information				
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date	
OTC MONOGRAPH DRUG	part341	04/26/2024		

# Labeler - Chain Drug Marketing Association Inc. (011920774)

Establishment				
Name	Address	ID/FEI	<b>Business Operations</b>	
Guardian Drug Company		119210276	MANUFACTURE(83324-026)	

Revised: 4/2024 Chain Drug Marketing Association Inc.