# COUGH DM- dextromethorphan polistirex suspension, extended release CVS Pharmacy

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### CVS Pharmacy, Inc. Cough DM Drug Facts

#### Active ingredient (in each 5 mL)

Dextromethorphan polistirex equivalent to 30 mg dextromethorphan hydrobromide

## **Purpose**

Cough suppressant

#### Uses

temporarily relieves

- cough due to minor throat and bronchial irritation as may occur with the common cold or inhaled irritants
- the impulse to cough to help you get to sleep

## Warnings

#### Do not use

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.

**Allergy Alert:** Contains sodium metabisulfite, a sulfite that may cause allergic-type reactions.

# Ask a doctor before use if you have

- chronic cough that lasts as occurs with smoking, asthma or emphysema
- cough that occurs with too much phlegm (mucus)

# Stop use and ask a doctor if

- side effects occur. You may report side effects to FDA at 1-800-FDA-1088.
- cough lasts more than 7 days, 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.

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

#### **Directions**

- shake bottle well before use
- measure only with dosing cup provided
- do not use dosing cup with other products
- dose as follows or as directed by a doctor

adults and children 12 years of age	10 mL every 12 hours, not to exceed 20 mL in 24 hours
and over	
children 6 to under 12	5 mL every 12 hours, not to
years of age	exceed 10 mL in 24 hours
children 4 to under 6	2.5 mL every 12 hours, not to
years of age	exceed 5 mL in 24 hours
children under 4 years of	do not use
age	

#### Other information

- each 5 mL contains: sodium 5 mg
- store at 20° to 25°C (68° to 77°F)
- dosing cup provided

# **Inactive ingredients**

artificial grape flavor, D&C Red #30 aluminum lake, FD&C Blue #1 aluminum lake, glycerin, high fructose corn syrup, methylparaben, polysorbate 80, polyvinyl acetate, povidone, propylparaben, purified water, sodium metabisulfite, sodium polystyrene sulfonate, sucrose, tartaric acid, tragacanth gum, triacetin, xanthan gum

## Questions or comments?

1-800-719-9260

# Package/Label Principal Display Panel

Compare to the active ingredient in  $Delsym^{\circledR}$  grape-flavor

Cough DM

DEXTROMETHORPHAN POLISTIREX EXTENDED-RELEASE ORAL SUSPENSION

Cough Suppressant

Contains sodium metabisulfite, a sulfite that may cause allergic-type reactions

12 Hour cough relief

Day or night

Alcohol free

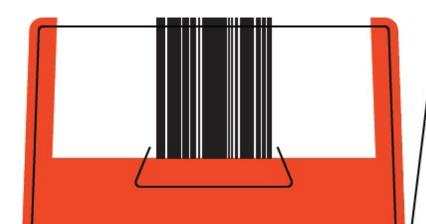
12 HOUR

Grape-Flavored Liquid

Dosing cup included

3 FL OZ (89 mL)

Actual Bottle Size on Side Panel





Compare to the active ingredient in Delsym® grape-flavor\*

NDC 59779-709-21

# Cough DM

DEXTROMETHORPHAN
POLISTIREX EXTENDEDRELEASE ORAL SUSPENSION

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12 Hour cough relief
Day or night
Alcohol free





**Grape-Flavored Liquid** 

Dosing cup included

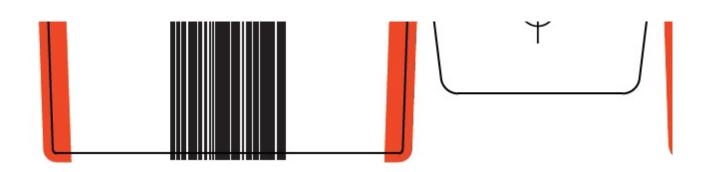
3 FL 0Z (89 mL)



Cough suppressant
12 hour cough relief
Grape-flavored liquid
Contains no fever reducer
or pain reliever

**Actual Size** 





DO NO T USE IF CARTON IS O PEN ED OR PR IN TED FOIL UN DER CAP IS Broken or missing. Cough Suppressant

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# Condy DM

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6 years of age	not to exceed 5 mL in 24 hours
children under 4 years of age	do not use

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#### Drug Facts (continued)

Inactive ingredients artificial grape flavor, D&C Red #30 aluminum lake, FD&C Blue #1 aluminum lake, glycerin, high fructose corn syrup, methylparaben, polysorbate 80, polyvinyl acetate, povidone, propylparaben, purified water, sodium metabisulfite, sodium polystyrene sulfonate, sucrose, tartaric acid, tragacanth gum, triacetin, xanthan gum

#### Questions or comments? 1-800-719-9260

\*This product is not manufactured or distributed by Reckitt Benckiser, distributor of Delsym® grape-flavor.

#### DOSING

SHAKE WELL BEFORE USE.

Measure only with dosing cup provided. Do not use dosing cup with other products.

Age (yr)	Dose	
12 years	10 mL	
to adult	EVERY 12 HOURS	
6 to	5 mL	
under 12	EVERY 12 HOURS	
4 to	2.5 mL	
under 6	EVERY 12 HOURS	
Under 4	Do not use	

See back panel for full dosing directions.



Dosing cup included Also available in orange flavor

# PARENTS:

Learn about teen medicine abuse

www.StopMedicineAbuse.org

#333043



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V-16430





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# **COUGH DM**

dextromethorphan polistirex suspension, extended release

#### **Product Information**

Product Type HUMAN OTC DRUG Item Code (Source) NDC:59779-709

**Route of Administration** ORAL

## **Active Ingredient/Active Moiety**

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Ingredient Name	<b>Basis of Strength</b>	Strength		
	DEXTROMETHORPHAN HYDROBROMIDE	30 mg in 5 mL		

Inactive Ingredients	
Ingredient Name	Strength
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
GLYCERIN (UNII: PDC6A3C0OX)	
HIGH FRUCTOSE CORN SYRUP (UNII: XY6UN3QB6S)	
METHYLPARABEN (UNII: A2I8C7HI9T)	
POLYSORBATE 80 (UNII: 60ZP39ZG8H)	
POLYVINYL ACETATE (UNII: 32K497ZK2U)	
POVIDONE, UNSPECIFIED (UNII: FZ 989GH94E)	
PROPYLPARABEN (UNII: Z8IX2SC10H)	
WATER (UNII: 059QF0KO0R)	
SODIUM METABISULFITE (UNII: 4VON5FNS3C)	
SODIUM POLYSTYRENE SULFONATE (UNII: 1699G8679Z)	
SUCROSE (UNII: C151H8M554)	
TARTARIC ACID (UNII: W4888I119H)	
TRAGACANTH (UNII: 2944357020)	
TRIACETIN (UNII: XHX3C3X673)	
XANTHAN GUM (UNII: TTV12P4NEE)	
<b>D&amp;C RED NO. 30</b> (UNII: 2S42T2808B)	

Product Characteristics			
Color	PURPLE	Score	
Shape		Size	
Flavor	GRAPE	Imprint Code	
Contains			

P	Packaging				
#	Item Code	Package Description	Marketing Start Date	Marketing End Date	
1	NDC:59779-709- 21	1 in 1 CARTON	03/27/2015		
1		89 mL in 1 BOTTLE; Type 0: Not a Combination Product			
2	NDC:59779-709- 28	1 in 1 CARTON	06/15/2022		
2		148 mL in 1 BOTTLE; Type 0: Not a Combination Product			

Marketing Information			
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA091135	03/27/2015	

# Labeler - CVS Pharmacy (062312574)

Revised: 6/2022 CVS Pharmacy