

**MUCINEX DM MAXIMUM STRENGTH- guaifenesin and dextromethorphan hydrobromide tablet, extended release**  
**A-S Medication Solutions**

-----  
**Mucinex®DM**

**Drug Facts**

<b>Active ingredients (in each extended-release bi-layer tablet)</b>	<b>Purposes</b>
Dextromethorphan HBr 60 mg	Cough suppressant
Guaifenesin 1200 mg	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 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 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.

### **Directions**

- do not crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regard for timing of meals
- adults and children 12 years 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 at 20-25°C (68-77°F)

### **Inactive ingredients**

carbomer homopolymer type B; D&C yellow no. 10 aluminum lake; hypromellose, USP; magnesium stearate, NF; microcrystalline cellulose, NF; sodium starch glycolate, NF

### **Questions?**

**1-866-MUCINEX (1-866-682-4639)** You may also report side effects to this phone number.

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

Made in England

### **HOW SUPPLIED**

Product: 50090-6549

NDC: 50090-6549-0 14 TABLET, EXTENDED RELEASE in a BLISTER PACK / 24 in a CARTON

**guaifenesin and dextromethorphan hydrobromide**

NDC 50090-6549-0  
A-S Medication Solutions, LLC  
Product No. 9389-0  
LOT

MUCINEX  
DM MAX 1200MG TABLETS  
24 UNITS X 14-CT CARTON  
STORE AT 20-25C (68-77F)



GTIN: 00350090654905  
LOT  
S/N:

DISTRIBUTED BY:  
A-S Medication Solutions  
Libertyville, IL 60048

SOURCE NDC: 63824-072-35



## MUCINEX DM MAXIMUM STRENGTH

guaifenesin and dextromethorphan hydrobromide tablet, extended release

### Product Information

<b>Product Type</b>	HUMAN OTC DRUG	<b>Item Code (Source)</b>	NDC:50090-6549(NDC:63824-072)
<b>Route of Administration</b>	ORAL		

### Active Ingredient/Active Moiety

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

### Inactive Ingredients

Ingredient Name	Strength
<b>Carbomer Homopolymer Type B (Allyl Pentaerythritol Crosslinked)</b> (UNII: HHT01ZNK31)	
<b>D&amp;C yellow no. 10</b> (UNII: 35SW5USQ3G)	
<b>aluminum oxide</b> (UNII: LMI26O6933)	
<b>hypromellose, unspecified</b> (UNII: 3NXW29V3WO)	
<b>magnesium stearate</b> (UNII: 70097M6I30)	
<b>microcrystalline cellulose</b> (UNII: OP1R32D61U)	

### Product Characteristics

<b>Color</b>	WHITE (yellow and white)	<b>Score</b>	no score
<b>Shape</b>	OVAL	<b>Size</b>	22mm
<b>Flavor</b>		<b>Imprint Code</b>	Mucinex;1200
<b>Contains</b>			

### Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:50090-6549-0	24 in 1 CARTON	07/11/2023	
1		14 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
NDA	NDA021620	06/26/2012	

**Labeler** - A-S Medication Solutions (830016429)

## Establishment

Name	Address	ID/FEI	Business Operations
A-S Medication Solutions		830016429	RELABEL(50090-6549) , REPACK(50090-6549)

Revised: 7/2023

A-S Medication Solutions