# GAVILAX- polyethylene glycol 3350 powder, for solution Preferred Pharmaceuticals, Inc.

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## **Drug Facts**

## **Active Ingredient**

Polyethylene Glycol 3350, 17 g (cap filled to line)

## **Purpose**

Osmotic Laxative

#### Use

- relieves occasional constipation (irregularity)
- generally produces a bowel movement in 1 to 3 days

#### WARNINGS

**Allergy alert:** Do not use if you are allergic to polyethylene glycol

**Do not use** if you have kidney disease, except under the advice and supervision of a doctor

## Ask a doctor before use if you have

- nausea, vomiting or abdominal pain
- a sudden change in bowel habits that lasts over 2 weeks
- irritable bowel syndrome

Ask a doctor or pharmacist before use if you are taking a prescription drug

When using this product you may have loose, watery, more frequent stools

## Stop use and ask a doctor if

- you have rectal bleeding or your nausea, bloating, cramping or abdominal pain gets worse. These may be signs of a serious condition.
- you get diarrhea
- you need to use a laxative for longer than 1 week

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

## Keep out of the reach of children

In case of overdose, get medical help or contact a POISON CONTROL CENTER right

#### **Directions**

- do not take more than directed unless advised by your doctor
- the bottle top is a measuring cap marked to contain 17 grams of powder when filled to the indicated line.
- adults and children 17 years of age and older:
- fill to top of line in cap which is marked to indicate the correct dose (17 g)
- stir and dissolve in any 4 to 8 ounces of beverage (cold, hot or room temperature) then drink
- use once a day
- use no more than 7 days
- children 16 years of age or under: ask a doctor

#### Other Information

- store at 20°- 25°C (68°- 77°F)
- tamper-evident: do not use if printed foil seal under cap is missing, open or broken

### **Inactive Ingredient**

none

#### Questions or comments?

1-866-403-7592

Relabeled by Preferred Pharmaceuticals, Inc.

#### PACKAGE LABEL.PRINCIPAL DISPLAY PANEL

**NDC** 68788-7508-02

Original Prescription Strength

#### GaviLax

Polyethylene Glycol 3350

Powder for Solution, Osmotic Laxative

14 ONCE-DAILY DOSES

**NET WT 8.3 OZ (238 g)** 

#### GaviLAX Generic for Miralax

Each gm contains Polyethylene Glycol 3350

Pkg Size: Exp Date: Lot#: Batch#: Ins:

Mfg: Lupin Pharmaceuticals, Inc. Prod#:

Warning
Store at 10<sup>2</sup>-15<sup>3</sup>C (68<sup>3</sup>-77<sup>2</sup>F). See Bottle for directions.
In case of overdose, get medical help or contact a Poison
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package.

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Utilice como dirigido en el paquete. Uso según lo dirigido oor su doctor GaviLAX Qty: Ins: Lot#: Bat#:

Prod# (NDC): GaviLAX

Log

Qty: Ins: Lot#: Bat#: Prod# (NDC): Chart

GaviLAX Qty: Insurance NDC: Billing

Gavil AX Qty: Ins: Lot#: Bat#: Prod# (NDC): Patient

### **GAVILAX**

polyethylene glycol 3350 powder, for solution

#### **Product Information**

HUMAN OTC DRUG **Product Type** Item Code (Source) NDC:68788-7508(NDC:43386-312)

ORAL **Route of Administration** 

## **Active Ingredient/Active Moiety**

**Ingredient Name Basis of Strength Strength** 

POLYETHYLENE GLYCOL 3350 (UNII: G2M7P15E5P) (POLYETHYLENE GLYCOL **POLYETHYLENE** 3350 - UNII:G2M7P15E5P)

17 g GLYCOL 3350 in 17 g

## **Inactive Ingredients**

**Ingredient Name** Strength

**SODIUM HYDROXIDE** (UNII: 55X04QC32I)

## **Product Characteristics**

Color	WHITE	Score	
Shape		Size	
Flavor		Imprint Code	
Contains			

#### **Packaging**

7	# Item Code	Package Description	Marketing Start Date	Marketing End Date
:	NDC:68788- 7508-2	238 g in 1 BOTTLE; Type 0: Not a Combination Product	10/28/2019	

Marketing Information						
Marketing Application Number or Monograph Category Citation		Marketing Start Date	Marketing End Date			
ANDA	ANDA091077	10/09/2009				

## **Labeler - Preferred Pharmaceuticals, Inc. (791119022)**

## **Registrant -** Preferred Pharmaceuticals, Inc. (791119022)

Establishment						
Name	Address	ID/FEI	<b>Business Operations</b>			
Preferred Pharmaceuticals, Inc.		791119022	RELABEL(68788-7508)			

Revised: 1/2024 Preferred Pharmaceuticals, Inc.