MUCINEX DM MAXIMUM STRENGTH- guaifenesin and dextromethorphan hydrobromide tablet, extended release RB Health (US) LLC

Mucinex® DM

Drug Facts

Active ingredients (in each extended-release bi-layer tablet)	Purposes
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

PRINCIPAL DISPLAY PANEL - 14 Tablet Blister Pack Carton

NDC 63824-072-35 MAXIMUM STRENGTH

Mucinex ® DM

1200 mg guaifenesin & 60 mg dextromethorphan HBr extended-release bi-layer tablets

EXPECTORANT & COUGH SUPPRESSANT

12

HOUR ®

- Controls Cough
- Thins and Loosens Mucus
- Immediate and Extended Release

14 EXTENDED-RELEASE BI-LAYER TABLETS

MAXIMUM STRENGTH

MucinexDM

Tamper evident:
Do not use if carton is open or if printed seal on blister is broken or missing.

14) EXTENDED-RELEASE BI-LAYER TABLET

MAXIMUM STRENGTH

NDC 63824-072-35

MucinexDM

1200 mg guaifenesin & 60 mg dextromethorphan HBr extended-release bi-layer tablets

EXPECTORANT & COUGH SUPPRESSANT



- ✓ Controls Cough
- ✓ Thins and Loosens Mucus
- ✓ Immediate and Extended Release
- 14 EXTENDED-RELEASE BI-LAYER TABLETS

Choose from the MUCINEX® line of products to treat your symp

PARENTS:
Learn about teen medicine abuse

PA Learn at MWWS

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EXPECTORANT & COUGH SUPPRESSANT

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Drug Facts (continued)

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HEALTH > HYGIENE > HOME

Dist. by: RB Health (US) Parsippany, NJ 07054-0224 US patents: www.rb.com/patents

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Made in England

MucinexDM
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EX PECT (20 ANT & COUGH SU PPRESSANT

Unique Bi-Layer Table

Tablet shown actual size

Extended-Rélease

Immediate-Release Laye



aver Tablet

MUCINEX DM MAXIMUM STRENGTH

guaifenesin and dextromethorphan hydrobromide tablet, extended release

Product Information

Route of Administration ORAL

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

Inactive Ingredients				
Ingredient Name	Strength			
CARBOMER HOMOPOLYMER TYPE B (ALLYL PENTAERYTHRITOL CROSSLINKED) (UNII: HHT01ZNK31)				
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)				
ALUMINUM OXIDE (UNII: LMI26O6933)				
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)				
MAGNESIUM STEARATE (UNII: 70097M6I30)				
MICROCRYSTALLINE CELLULOSE (UNII: OP1R32D61U)				

Product Characteristics					
Color	white (yellow and white)	Score	no score		
Shape	OVAL	Size	22mm		
Flavor		Imprint Code	Mucinex;1200		
Contains					

Packaging				
#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:63824- 072-07	1 in 1 CARTON	06/26/2012	
1		7 in 1 BLISTER PACK; Type 0: Not a Combination Product		
2	NDC:63824- 072-35	1 in 1 CARTON	06/26/2012	
2		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		
3	NDC:63824- 072-36	2 in 1 CARTON	06/26/2012	
3		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		
А	NDC:63824-	2 in 1 CARTON	06/26/2012	

4	072-46	O III 1 CARTUN	UU/	
4		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		
5	NDC:63824- 072-48	4 in 1 CARTON	06/26/2012	09/01/2025
5		12 in 1 BLISTER PACK; Type 0: Not a Combination Product		
6	NDC:63824- 072-18	2 in 1 CARTON	06/26/2012	06/15/2022
6		9 in 1 BLISTER PACK; Type 0: Not a Combination Product		
7	NDC:63824- 072-56	4 in 1 CARTON	07/01/2021	
7		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		
8	NDC:63824- 072-02	1 in 1 CARTON	08/01/2021	
8		1 in 1 POUCH; 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 - RB Health (US) LLC (081049410)

Revised: 8/2023 RB Health (US) LLC