# MUCUS RELIEF DM- guaifenesin, dextromethorphan hbr tablet CVS Pharmacy

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## **Drug Facts**

## Active ingredients (in each extended-release tablet)

Dextromethorphan HBr 30 mg Guaifenesin 600 mg

## **Purpose**

Cough Suppressant

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 under12 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 (1-800-222-1222).

#### **Directions**

- do not crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regards for timing of meals
- adults and children 12 years of age and older: 1 or 2 tablet every 12 hours; not more than 4 tablets in 24 hours
- children under 12 years of age: do not use

#### Other information

store between 20° to 25°C (68° to 77°F)

#### **Inactive ingredients**

carbomer, colloidal silicon dioxide, D&Cyellow #10 aluminum lake, hypromellose, lactose monohydrate, magnesium stearate, microcrystalline cellulose, povidone, talc

#### Questions or comments?

Call **1-877-753-3935** Monday-Friday 9AM-5PM EST

# **Principal Display Panel**

Compare to active ingredients in Mucinex® DM\*

Mucus DM

Extended Release

**GUAIFENESIN AND DEXTROMETHORPHAN** 

HYDROBROMIDE EXTENDED-RELEASE TABLETS, 600 mg/30mg

#### **EXPECTORANT/COUGH SUPPRESSANT**

- Controls cough
- Thins & loosen mucus

#### EXTENDED-RELEASE TABLETS

\*This product is not manufactured or distributed Reckitt Benckiser LLC, distributor of

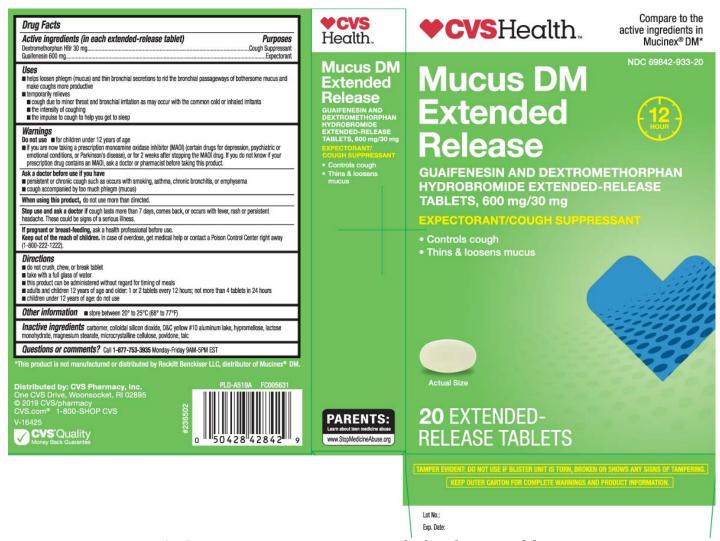
# TAMPER EVIDENT: DO NOT USE IF BLISTER UNIT IS TORN, BROKEN OR SHOWS ANY SIGNS OF TAMPERING.

# KEEP OUTER CARTON FOR COMPLETE WARNINGS AND PRODUCT INFORMATION.

Distributed by: CVS Pharmacy, Inc.

One CVS Drive, Woonsocket, RI 02895

#### Package Label



#### **CVS HEALTH Mucus DM Extended Release Tablets**

# mucus relief DM guaifenesin, dextromethorphan hbr tablet Product Information Product Type HUMAN OTC DRUG Item Code (Source) NDC:69842-933

Active Ingredient/Active Moiety			
Ingredient Name	Basis of Strength	Strength	
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	600 mg	
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	30 mg	

Inactive Ingredients			
Ingredient Name	Strength		
SILICON DIOXIDE (UNII: ETJ7Z6XBU4)			
MAGNESIUM STEARATE (UNII: 70097M6I30)			
<b>CARBOMER 934</b> (UNII: Z135WT9208)			
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)			
POVIDONE (UNII: FZ989GH94E)			
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)			
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)			
LACTOSE MONOHYDRATE (UNII: EWQ57Q8I5X)			
TALC (UNII: 7SEV7J4R1U)			

Product Characteristics				
Color	yellow	Score	no score	
Shape	OVAL	Size	16mm	
Flavor		Imprint Code	AN038	
Contains				

P	Packaging						
#	Item Code	Package Description	Marketing Start Date	Marketing End Date			
1	NDC:69842-933- 40	40 in 1 CARTON	02/28/2019				
1		1 in 1 BLISTER PACK; Type 0: Not a Combination Product					
2	NDC:69842-933- 20	20 in 1 CARTON	02/28/2019				
2		1 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	
ANDA	ANDA209692	02/28/2019		

# Labeler - CVS Pharmacy (062312574)

Revised: 11/2022 CVS Pharmacy