HIGHLIGHTS OF PRESCRIBING INFORMATION
These highlights do not include all the information needed to use MUPIROCIN Ointment safely and effectively. See full prescribing information for MUPIROCIN Ointment.

MUPIROCIN Ointment USP, for topical use

Initial U.S. Approval: 1987

INDICATIONS AND USAGE
Mupirocin ointment is an RNA synthetase inhibitor antibacterial indicated for the topical treatment of impetigo due to susceptible isolates of Staphylococcus aureus and Streptococcus pyogenes. (1)

DOSAGE AND ADMINISTRATION
- For Topical Use Only. (2)
- Apply a small amount of mupirocin ointment, with a cotton swab or gauze pad, to the affected area 3 times daily for up to 10 days. (2)
- Re-evaluate patients not showing a clinical response within 3 to 5 days. (2)
- Not for intranasal, ophthalmic, or other mucosal use. (2)

DOSAGE FORMS AND STRENGTHS
- Ointment: Each gram contains 20 mg mupirocin USP in a water-miscible ointment base supplied in 22-gram tubes. (3)

CONTRAINDICATIONS
- Known hypersensitivity to mupirocin or any of the excipients of mupirocin ointment. (4)

WARNINGS AND PRECAUTIONS
- Severe Allergic Reactions: Anaphylaxis, urticaria, angioedema, and generalized rash have been reported in patients treated with formulations of mupirocin, including mupirocin ointment. (5.1)
- Eye Irritation: Avoid contact with eyes. (5.2)
- Local Irritation: Discontinue in the event of sensitization or severe local irritation. (5.3)
- Clostridium difficile-Associated Diarrhea (CDAD): If diarrhea occurs, evaluate patients for CDAD. (5.4)
- Potential for Microbial Overgrowth: Prolonged use may result in overgrowth of nonsusceptible microorganisms, including fungi. (5.5)
- Risk Associated with Mucosal Use: Mupirocin ointment is not formulated for use on mucosal surfaces. A separate formulation, Bactroban nasal ointment, is available for intranasal use. (5.6)
- Risk of Polyethylene Glycol Absorption: Mupirocin ointment should not be used where absorption of large quantities of polyethylene glycol is possible, especially if there is evidence of moderate or severe renal impairment. (5.7)
- Risk Associated with Use at Intravenous Sites: Mupirocin ointment should not be used with intravenous cannulae or at central intravenous sites because of the potential to promote fungal infections and antimicrobial resistance. (5.8)

ADVERSE REACTIONS
- The most frequent adverse reactions (at least 1%) were burning, stinging or pain, and itching. (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Glenmark Pharmaceuticals Inc., USA at 1-888-721-7115 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.
See 17 for PATIENT COUNSELING INFORMATION.

Revised: 7/2016

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   Stop use and ask a doctor if

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FULL PRESCRIBING INFORMATION

Mupirocin Ointment USP, 22g (68462-180-22)

1 INDICATIONS AND USAGE

Mupirocin ointment is indicated for the topical treatment of impetigo due to susceptible isolates of Staphylococcus aureus (S. aureus) and Streptococcus pyogenes (S. pyogenes).

2 DOSAGE AND ADMINISTRATION
• For Topical Use Only.
  • Apply a small amount of mupirocin ointment, with a cotton swab or gauze pad, to the affected area 3
times daily for up to 10 days.
  • Cover the treated area with gauze dressing if desired.
  • Re-evaluate patients not showing a clinical response within 3 to 5 days.
  • Mupirocin ointment is not for intranasal, ophthalmic, or other mucosal use [see Warnings and
Precautions (5.2, 5.6)].
  • Do not apply mupirocin ointment concurrently with any other lotions, creams or ointments [see
Clinical Pharmacology (12.3)].

3 DOSAGE FORMS AND STRENGTHS
Each gram of mupirocin ointment contains 20 mg mupirocin USP in a water-miscible ointment base
supplied in 22-gram tubes.

4 CONTRAINDICATIONS
Mupirocin ointment is contraindicated in patients with known hypersensitivity to mupirocin or any of the
excipients of mupirocin ointment.

5 WARNINGS AND PRECAUTIONS
Click here to enter Warnings and Precautions

5.1 Severe Allergic Reactions
Systemic allergic reactions, including anaphylaxis, urticaria, angioedema, and generalized rash, have
been reported in patients treated with formulations of mupirocin, including mupirocin ointment [see
Adverse Reactions (6.2)].

5.2 Eye Irritation
Avoid contact with the eyes. In case of accidental contact, rinse well with water.

5.3 Local Irritation
In the event of a sensitization or severe local irritation from mupirocin ointment, usage should be
discontinued, and appropriate alternative therapy for the infection instituted.

5.4 Clostridium difficile-Associated Diarrhea
Clostridium difficile-associated diarrhea (CDAD) has been reported with use of nearly all antibacterial
agents and may range in severity from mild diarrhea to fatal colitis. Treatment with antibacterial agents
alters the normal flora of the colon leading to overgrowth of C. difficile.

C. difficile produces toxins A and B which contribute to the development of CDAD. Hypertoxin-
producing strains of C. difficile cause increased morbidity and mortality, as these infections can be
refractory to antimicrobial therapy and may require colectomy. CDAD must be considered in all patients
who present with diarrhea following antibacterial drug use. Careful medical history is necessary since
CDAD has been reported to occur over 2 months after the administration of antibacterial agents.

If CDAD is suspected or confirmed, ongoing antibacterial drug use not directed against C. difficile may
need to be discontinued. Appropriate fluid and electrolyte management, protein supplementation,
antibacterial treatment of C. difficile, and surgical evaluation should be instituted as clinically indicated.

5.5 Potential for Microbial Overgrowth
As with other antibacterial products, prolonged use of mupirocin ointment may result in overgrowth of nonsusceptible microorganisms, including fungi [see Dosage and Administration (2)].

5.6 Risk Associated with Mucosal Use
Mupirocin ointment is not formulated for use on mucosal surfaces. Intranasal use has been associated with isolated reports of stinging and drying. A separate formulation, Bactroban (mupirocin calcium) nasal ointment, is available for intranasal use.

5.7 Risk of Polyethylene Glycol Absorption
Polyethylene glycol can be absorbed from open wounds and damaged skin and is excreted by the kidneys. In common with other polyethylene glycol-based ointments, mupirocin ointment should not be used in conditions where absorption of large quantities of polyethylene glycol is possible, especially if there is evidence of moderate or severe renal impairment.

5.8 Risk Associated with Use at Intravenous Sites
Mupirocin ointment should not be used with intravenous cannulae or at central intravenous sites because of the potential to promote fungal infections and antimicrobial resistance.

6 ADVERSE REACTIONS
The following adverse reactions are discussed in more detail in other sections of the labeling:
- Severe Allergic Reactions [see Warnings and Precautions (5.1)]
- Eye Irritation [see Warnings and Precautions (5.2)]
- Local Irritation [see Warnings and Precautions (5.3)]
- Clostridium difficile-Associated Diarrhea [see Warnings and Precautions (5.4)]

6.1 Clinical Trials Experience
Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared with rates in the clinical trials of another drug and may not reflect the rates observed in practice.

The following local adverse reactions were reported by at least 1% of subjects in connection with the use of mupirocin ointment in clinical trials: burning, stinging, or pain in 1.5% of subjects; itching in 1% of subjects. Rash, nausea, erythema, dry skin, tenderness, swelling, contact dermatitis, and increased exudate were reported in less than 1% of subjects.

6.2 Postmarketing Experience
In addition to adverse reactions reported from clinical trials, the following reactions have been identified during postmarketing use of mupirocin ointment. Because they are reported voluntarily from a population of unknown size, estimates of frequency cannot be made. These reactions have been chosen for inclusion due to a combination of their seriousness, frequency of reporting, or potential causal relationship to mupirocin ointment.

Immune System Disorders
Systemic allergic reactions, including anaphylaxis, urticaria, angioedema, and generalized rash [see Warnings and Precautions (5.1)].

8 USE IN SPECIFIC POPULATIONS
Click here to enter Use in Specific Populations

8.1 Pregnancy
Pregnancy Category B.  

There are no adequate and well-controlled studies of mupirocin ointment in pregnant women. Because animal reproduction studies are not always predictive of human response, this drug should be used during pregnancy only if clearly needed.

Developmental toxicity studies have been performed with mupirocin administered subcutaneously to rats and rabbits at doses up to 160 mg per kg per day in both species. This dose is 22 and 43 times, respectively, the human topical dose (approximately 60 mg mupirocin per day) based on body surface area. There was no evidence of fetal harm due to mupirocin.

8.3 Nursing Mothers  

It is not known whether this drug is excreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when mupirocin ointment is administered to a nursing woman.

8.4 Pediatric Use  

The safety and effectiveness of mupirocin ointment have been established in the age range of 2 months to 16 years. Use of mupirocin ointment in these age-groups is supported by evidence from adequate and well-controlled trials of mupirocin ointment in impetigo in pediatric subjects studied as a part of the pivotal clinical trials [see Clinical Studies (14)].

11 DESCRIPTION  

Mupirocin ointment USP 2% contains the RNA synthetase inhibitor antibacterial, mupirocin USP. The chemical name is (E)-(2S,3R,4R,5S)-5-[(2S,3S,4S,5S)-2,3-epoxy-5-hydroxy-4-methylhexyl]tetrahydro-3,4dihydroxy-ß-methyl-2H-pyran-2-crotonic acid, ester with 9-hydroxynonanoic acid. The molecular formula of mupirocin USP is C_{26}H_{44}O_{9}, and the molecular weight is 500.6. The chemical structure is:

![Figure 1. Structure of Mupirocin USP](image)

Each gram of mupirocin ointment USP 2% contains 20 mg mupirocin USP in a water-miscible ointment base (polyethylene glycol ointment, N.F.) consisting of polyethylene glycol 400 and polyethylene glycol 3350.

12 CLINICAL PHARMACOLOGY  

Click here to enter Clinical Pharmacology

12.1 Mechanism of Action  

Mupirocin is an RNA synthetase inhibitor antibacterial [see Microbiology (12.4)].
12.3 Pharmacokinetics

Absorption
Application of \(^{14}\)C-labeled mupirocin ointment to the lower arm of normal male subjects followed by occlusion for 24 hours showed no measurable systemic absorption (less than 1.1 nanogram mupirocin per milliliter of whole blood). Measurable radioactivity was present in the stratum corneum of these subjects 72 hours after application.

The effect of the concurrent application of mupirocin ointment with other drug products has not been studied [see Dosage and Administration (2)].

Elimination
In a trial conducted in 7 healthy adult male subjects, the elimination half-life after intravenous administration of mupirocin was 20 to 40 minutes for mupirocin and 30 to 80 minutes for monic acid.

Metabolism: Following intravenous or oral administration, mupirocin is rapidly metabolized. The principal metabolite, monic acid, demonstrates no antibacterial activity.

Excretion: Monic acid is predominantly eliminated by renal excretion.

Special Populations
Renal Impairment: The pharmacokinetics of mupirocin have not been studied in individuals with renal insufficiency.

12.4 Microbiology
Mupirocin is an RNA synthetase inhibitor antibacterial produced by fermentation using the organism *Pseudomonas fluorescens*.

Mechanism of Action
Mupirocin inhibits bacterial protein synthesis by reversibly and specifically binding to bacterial isoleucyltransfer RNA (tRNA) synthetase.

Mupirocin is bactericidal at concentrations achieved by topical administration. Mupirocin is highly protein bound (greater than 97%) and the effect of wound secretions on the minimum inhibitory concentrations (MICs) of mupirocin has not been determined.

Mechanism of Resistance
When mupirocin resistance occurs, it results from the production of a modified isoleucyl-tRNA synthetase, or the acquisition of, by genetic transfer, a plasmid mediating a new isoleucyl-tRNA synthetase. High-level plasmid-mediated resistance (MIC =512 mcg/mL) has been reported in increasing numbers of isolates of *S. aureus* and with higher frequency in coagulase-negative staphylococci. Mupirocin resistance occurs with greater frequency in methicillin-resistant than methicillin-susceptible staphylococci.

Cross Resistance
Due to its mode of action, mupirocin does not demonstrate cross resistance with other classes of antimicrobial agents.

Antimicrobial Activity
Mupirocin has been shown to be active against susceptible isolates of *S. aureus* and *S. pyogenes*, both in vitro and in clinical trials [see Indications and Usage (1)]. The following in vitro data are available, but their clinical significance is unknown. Mupirocin is active against most isolates of *Staphylococcus epidermidis*.

Susceptibility Testing
High-level mupirocin resistance (=512 mcg/mL) may be determined using standard disk diffusion or
broth microdilution tests.\textsuperscript{1,2} Because of the occurrence of mupirocin resistance in methicillin-resistant 
\textit{S. aureus} (MRSA), it is appropriate to test MRSA populations for mupirocin susceptibility prior to the 
use of mupirocin using a standardized method.\textsuperscript{3,4,5}

\section*{13 NONCLINICAL TOXICOLOGY}

Click here to enter Nonclinical Toxicology

\subsection*{13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility}

Long-term studies in animals to evaluate carcinogenic potential of mupirocin have not been conducted.

Results of the following studies performed with mupirocin calcium or mupirocin sodium in vitro and in 
vivo did not indicate a potential for genotoxicity: rat primary hepatocyte unscheduled DNA synthesis, 
sediment analysis for DNA strand breaks, \textit{Salmonella} reversion test (Ames), \textit{Escherichia coli} mutation 
assay, metaphase analysis of human lymphocytes, mouse lymphoma assay, and bone marrow micronuclei 
assay in mice.

Reproduction studies were performed with mupirocin administered subcutaneously to male and female 
rats at doses up to 100 mg per kg per day which is 14 times the human topical dose (approximately 60 
mg mupirocin per day) based on body surface area. Neither evidence of impaired fertility nor impaired 
reproductive performance attributable to mupirocin was observed.

\section*{14 CLINICAL STUDIES}

The efficacy of topical mupirocin ointment in impetigo was tested in 2 trials. In the first, subjects with 
impetigo were randomized to receive either mupirocin ointment or vehicle placebo 3 times daily for 8 
to 12 days. Clinical efficacy rates at end of therapy in the evaluable populations (adults and pediatric 
subjects included) were 71\% for mupirocin ointment (n = 49) and 35\% for vehicle placebo (n = 51). 
Pathogen eradication rates in the evaluable populations were 94\% for mupirocin ointment and 62\% for 
vehicle placebo.

In the second trial, subjects with impetigo were randomized to receive either mupirocin ointment 3 times 
daily or 30 to 40 mg per kg oral erythromycin ethylsuccinate per day (this was an unblinded trial) for 8 
days. There was a follow-up visit 1 week after treatment ended. Clinical efficacy rates at the follow-up 
visit in the evaluable populations (adults and pediatric subjects included) were 93\% for mupirocin 
ointment (n = 29) and 78.5\% for erythromycin (n = 28). Pathogen eradication rates in the evaluable 
populations were 100\% for both test groups.

\subsection*{Pediatrics}

There were 91 pediatric subjects aged 2 months to 15 years in the first trial described above. Clinical 
efficacy rates at end of therapy in the evaluable populations were 78\% for mupirocin ointment (n = 42) 
and 36\% for vehicle placebo (n = 49). In the second trial described above, all subjects were pediatric 
except 2 adults in the group receiving mupirocin ointment. The age range of the pediatric subjects was 7 
months to 13 years. The clinical efficacy rate for mupirocin ointment (n = 27) was 96\%, and for 
erythromycin it was unchanged (78.5\%).

\section*{15 REFERENCES}

Susceptibility Testing; Twenty-fifth Informational Supplement}. CLSI document M100-S25. Clinical and 
Laboratory Standards Institute, 950 West Valley Rd., Suite 2500, Wayne, PA 19087, USA, 2015.
Tests for Bacteria that Grow Aerobically; Approved Standard – Tenth Edition}. CLSI document M07-
A10. Clinical and Laboratory Standards Institute, 950 West Valley Road, Suite 2500, Wayne,
Pennsylvania 19087, USA, 2015.


16 HOW SUPPLIED/STORAGE AND HANDLING

Mupirocin ointment USP 2% is supplied in 22-gram tubes. Each gram of mupirocin ointment USP contains 20 mg mupirocin USP in a water-miscible ointment base. NDC 68462-180-22 22-gram tube (1 tube per carton)

Store at 20° to 25°C (68° to 77°F) [see USP Controlled Room Temperature].

17 PATIENT COUNSELING INFORMATION

*Advise the patient to read the FDA-approved patient labeling (Patient Information).*

Advise the patient to administer mupirocin ointment as follows:

- Use mupirocin ointment only as directed by the healthcare provider. It is for external use only. Avoid contact of mupirocin ointment with the eyes. If mupirocin ointment gets in the eyes, rinse thoroughly with water.
- Do not use mupirocin ointment in the nose.
- Wash your hands before and after applying mupirocin ointment.
- Use a gauze pad or cotton swab to apply a small amount of mupirocin ointment to the affected area. The treated area may be covered by gauze dressing if desired.
- Report to the healthcare provider any signs of local adverse reactions. Mupirocin ointment should be stopped and the healthcare provider contacted if irritation, severe itching, or rash occurs.
- Report to the healthcare provider or go to the nearest emergency room if severe allergic reactions, such as swelling of the lips, face, or tongue, or wheezing occur [see Warnings and Precautions (5.1)].
- If impetigo has not improved in 3 to 5 days, contact the healthcare provider.

†Bactroban is a registered trademark of the GSK group of companies.

Manufactured by:

**Glenmark Pharmaceuticals Ltd.**
Colvale-Bardez, Goa 403 513, India

Manufactured for:

**Glenmark Pharmaceuticals Inc., USA**
Mahwah, NJ 07430

Questions? 1 (888)721-7115
www.glenmarkpharma.com/usa

December 2015

Patient Information

Mupirocin (mue-PIR-oh-sin)
Ointment USP
**What is mupirocin ointment?**

Mupirocin ointment is a prescription medicine used on the skin (topical use) to treat a skin infection called impetigo that is caused by bacteria called *Staphylococcus aureus* and *Streptococcus pyogenes*. It is not known if mupirocin ointment is safe and effective in children under 2 months of age.

**Who should not use mupirocin ointment?**

Do not use mupirocin ointment if:
- you are allergic to mupirocin or any of the ingredients in mupirocin ointment. See the end of this Patient Information leaflet for a complete list of the ingredients in mupirocin ointment.

**What should I tell my healthcare provider before using mupirocin ointment?**

Before using mupirocin ointment, tell your healthcare provider about all of your medical conditions including if you:
- have kidney problems
- are pregnant or plan to become pregnant. It is not known if mupirocin ointment will harm your unborn baby.
- are breastfeeding or plan to breastfeed. It is not known if mupirocin ointment passes into your breast milk. You and your healthcare provider should decide if you can use mupirocin ointment while breastfeeding.

Tell your healthcare provider about all of the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Do not mix mupirocin ointment with other lotions, creams, or ointments.

**How should I use mupirocin ointment?**

- **Mupirocin ointment is for use on the skin (topical).** Do not get mupirocin ointment in your eyes, nose, mouth, or vagina (mucosal surfaces).
- Use mupirocin ointment exactly as your healthcare provider tells you to use it.
- Apply a small amount of mupirocin ointment, with a cotton swab or gauze pad, to the affected area 3 times each day.
- It is important that you take the full course of mupirocin ointment. Do not stop early because your symptoms may disappear before the infection is fully cleared.
- Wash your hands **before and after** applying mupirocin ointment.
- After applying mupirocin ointment, you may cover the treated area with a clean gauze pad, unless your healthcare provider has told you to leave it uncovered.
- Talk to your healthcare provider if your skin does not improve after 3 to 5 days of treatment with mupirocin ointment.

**What are the possible side effects of mupirocin ointment?**

Mupirocin ointment may cause serious side effects, including:
- **severe allergic reactions.** Stop using mupirocin ointment and call your healthcare provider or go to the nearest emergency room right away if you have any of the following signs or symptoms of a severe allergic reaction:
  - hives
  - trouble breathing or wheezing
  - swelling of your face, lips, mouth, or tongue
  - dizziness, fast heartbeat, or pounding in your chest
  - a rash over your whole body
- **eye irritation.** Do not get mupirocin ointment in your eyes. If mupirocin ointment gets in your eyes, rinse your eyes well with water.
- **irritation in the area mupirocin ointment is used.** Stop using mupirocin ointment and call your
healthcare provider if you develop an irritation, severe itching, or a rash while using mupirocin ointment.

- **a type of diarrhea called clostridium difficile-associated diarrhea (CDAD).** CDAD may happen in people who use or have used medicine to treat bacterial infections. The severity of CDAD can range from mild diarrhea to severe diarrhea that may cause death (fatal colitis). Call your healthcare provider or go to the nearest emergency room right away if you have diarrhea while using or after you stop using mupirocin ointment.
- **risk of absorption of polyethylene glycol through the skin.** Mupirocin ointment contains polyethylene glycol, which in large amounts can cause kidney damage. You should not apply mupirocin ointment to open skin wounds or damaged skin, especially if you have kidney problems.
- **increased risk of infection at IV (intravenous) sites.** Mupirocin ointment should not be used on skin that is near an IV (intravenous) site.

The most common side effects of mupirocin ointment include:
- burning
- stinging or pain
- itching

These are not all the possible side effects of mupirocin ointment. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

**How should I store mupirocin ointment?**
- Store at 20° to 25°C (68° to 77°F).

**Keep mupirocin ointment and all medicines out of the reach of children.**

**General information about the safe and effective use of mupirocin ointment**

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use mupirocin ointment for a condition for which it was not prescribed. Do not give mupirocin ointment to other people, even if they have the same symptoms that you have. It may harm them. You can ask your pharmacist or healthcare provider for information about mupirocin ointment that is written for health professionals.

**What are the ingredients in mupirocin ointment?**

**Active Ingredient:** mupirocin USP

**Inactive Ingredients:** polyethylene glycol 400 and polyethylene glycol 3350

†Bactroban is a registered trademark of the GSK group of companies.

Manufactured by:

**Glenmark Pharmaceuticals Ltd.**
Colvale-Bardez, Goa 403 513, India

Manufactured for:

**Glenmark Pharmaceuticals Inc., USA**
Mahwah, NJ 07430

Questions? 1 (888)721-7115
www.glenmarkpharma.com/usa

December 2015

**Active Ingredient**
Chlorhexidine Gluconate
Purpose
Antiseptic

Uses
- **surgical hand scrub**: significantly reduces the number of microorganisms on the hands and forearms prior to surgery or patient care
- **healthcare personnel handwash**: helps reduce bacteria that potentially can cause disease
- **patient preoperative skin preparation**: for the preparation of the patient's skin prior to surgery
- **skin wound and general skin cleansing**

Warnings
For external use only.

Do not use
- if you are allergic to chlorhexidine gluconate or any other ingredients
- in contact with meninges
- in the genital area
- as a preoperative skin preparation of the head or face

When using this product
- keep out of eyes, ears, and mouth. May cause serious and permanent eye injury if placed or kept in the eye during surgical procedures or may cause deafness when instilled in the middle ear through perforated eardrums.
- if solution should contact these areas, rinse out promptly and thoroughly with water
- wounds which involve more than the superficial layers of the skin should not be routinely treated
- repeated general skin cleansing of large body areas should not be done except when the underlying condition makes it necessary to reduce the bacterial population of skin

Stop use and ask a doctor
if irritation, sensitization or allergic reaction occurs. These may be signs of a serious condition.

Keep out of reach of children
if swallowed, get medical help or contact a Poison Control Center right away.

Direction
- use with care in premature infants and infants under 2 months of age. These products may cause irritation or chemical burns.

Surgical hand scrub:
- wet hands and forearms with water
- scrub for 3 minutes with about 5 ml of product and a wet brush paying close attention to the nails, cuticles and interdigital spaces
- a separate nail cleaner may be used
- rinse thoroughly
- wash for an additional 3 minutes with 5 ml of product and rinse under running water
- dry thoroughly
Healthcare personnel handwash:
- wet hands with water
- dispense about 5 ml of product into cupped hands and wash in a vigorous manner for 15 seconds
- rinse and dry thoroughly

Patient preoperative skin preparation:
- apply product liberally to surgical site and swab for at least 2 minutes and dry with a sterile towel
- repeat procedure for an additional 2 minutes and dry with a sterile towel

Skin wound and general skin cleaning:
- thoroughly rinse the area to be cleaned with water
- apply the minimum amount of product necessary to cover the skin or wound area and wash gently
- rinse again thoroughly

Other information
- store at 20-25°C (68-77°F)
- avoid excessive heat above 40°C (104°F)

Inactive ingredients
- cocamide DEA, fragrance, glucono-delta-lactone, hydroxyethylcellulose, isopropyl alcohol, lauramine oxide, PEG-75 lanolin, purified water, tridecyl alcohol

Questions or comments?
call 1-800-587-3721 Monday through Friday 8:00 AM to 4:30 PM CST

Dimethicone, 118mL (68599-0203-4)

Active ingredient
Dimethicone 5.0%

Purpose
Skin Protectant

Keep out of reach of children
If swallowed, get medical help or contact a Poison Control Center right away.

Uses
- For the treatment and/or prevention of diaper rash
- Temporarily protects and helps relieve chapped or cracked skin

Warnings
For external use only
Do not use on
- deep or puncture wounds
- animal bites
- serious burns

When using this product
- do not get into eyes

Stop use and ask a doctor if
- condition worsens
- symptoms last more than 7 days or clear up and occur again within a few days

Directions
- Cleanse skin with THERA<sup>TM</sup> Moisturizing Body Cleanser or THERA<sup>TM</sup> Foaming Body Cleanser
- Apply cream liberally until entire area is covered
- Apply as needed

Other information
- Protect from freezing. Avoid excessive heat.

Inactive ingredients
Aleurites Moluccana Seed Oil, Aloe Barbadensis (Aloe Vera) Lead Juice, SAFFLEX<sup>TM</sup> (Consisting of: Calcium Pantothenate (Vitamin B<sub>5</sub>), Maltodextrin, Niacinamide (Vitamin B<sub>3</sub>), Pyridoxine HCl (Vitamin B<sub>6</sub>), Silica, Sodium Ascorbyl Phosphate (Vitamin C), Sodium Starch Octenylsuccinate, Tocopheryl Acetate (Vitamin E), Bisabolol, Butylene Glycol, Caprylyl Glycol, Carthamus Tinctorius (Safflower) Oleosomes, Carthamus Tinctorius (Safflower) Seed Oil, Cetyl Alcohol, Chlorphenesin, Dimethicone Crosspolymer, Disodium EDTA, Glycerin, Glyceryl Stearate, Lavender Ylang Fragrance, PEG-100 Stearate, Pentaery Tetra-di-t-Butyl Hydroxyhydrocinnamate, Phenoxyethanol, Purified Water, Sodium Hyaluronate, Stearic Acid, Triethanolamine, Zingiber (Ginger) Root Extract.

Mupirocin Ointment USP
PACKAGE/LABEL PRINCIPAL DISPLAY PANEL
NDC 68462-180-22
Mupirocin Ointment USP, 2% - 22 g
Package label and principal display panel
NDC 0116-1061-08
DYNA-HEX 4®
(Chlorhexidine Gluconate 4% Solution)
Antiseptic
Contains: 4% Chlorhexidine Gluconate
Distributed by: Xtrium Laboratories, Inc., Mount Prospect, IL 60056
FOR EXTERNAL USE ONLY
Net Contents: 4 fl oz (237 ml)
the eye during surgical procedures or may cause
dehiscence when instilled in the middle ear through
perforated eardrums
- if solution should contact these areas, rinse out
promptly and thoroughly with water
- wounds which involve more than the superficial
layers of the skin should not be routinely treated
- repeated general skin cleansing of large body areas
should not be done except when the underlying
condition makes it necessary to reduce the bacterial
population of the skin.

Stop use and ask a doctor if irritation, sensitization or
allergic reaction occurs. These may be signs of a
serious condition.

Keep out of reach of children.
If swallowed, get medical help or contact a Poison
Control Center right away.

Directions
- use with care in premature infants or infants under
2 months of age. These products may cause
irritation or chemical burns.

Surgical hand scrub:
- wet hands and forearms with water
- scrub for 3 minutes with about 5 mL of product and
a wet brush paying close attention to the nails,
cuticles, and interdigital spaces
- a separate nail cleaner may be used
- rinse thoroughly
- wash for an additional 3 minutes with 5 mL of
product and rinse under running water
- dry thoroughly

Healthcare personnel handwash:
- wet hands with water
- dispense about 5 mL of product into cupped hands
and wash in a vigorous manner for 15 seconds
- rinse and dry thoroughly

Patient preoperative skin preparation:
- apply product liberally to surgical site and swab for
at least 2 minutes
- dry with a sterile towel
- repeat procedure for an additional 2 minutes and dry
with a sterile towel

Drug Facts (continued)

Skin wound and general skin cleansing:
- thoroughly rinse the area to be cleaned with water
- apply the minimum amount of product necessary to
cover the skin or wound area and wash gently
- rinse again thoroughly

Other information
- store at 20-25°C (68-77°F)
- avoid excessive heat above 40°C (104°F)

Inactive ingredients: cocamide DEA, fragrance, glycine-
hydroxylated, hydroxyethylultratex, isopropyl alcohol, lauramine
oxides, PEG-75 lanolin, purified water, tridecyl alcohol

Questions or comments?
Call 1-800-687-3121 Monday through Friday 8:00 AM
to 4:30 PM

Laundering/Cleaning Instructions:
Chlorhexidine gluconate skin cleansers will cause
stains if used with chlorine bleaching products. Rinse
completely and use only non-chlorine detergents.

Dimethicone

Package Labeling
THERA™ is a specially formulated skin treatment that helps restore skin to a healthy condition.

**Drug Facts**

<table>
<thead>
<tr>
<th>Active ingredient</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dimethicone 5%</td>
<td>Skin Protectant</td>
</tr>
</tbody>
</table>

**Uses**
- for the treatment and/or prevention of diaper rash
- temporarily protects and helps relieve chapped or cracked skin

**Warnings**
- For external use only
- Do not use on:
  - deep or puncture wounds
  - animal bites
  - second or third degree burns

**When using this product**
- do not get into eyes
- stop use and ask a doctor if:
  - condition worsens
  - symptoms last more than 7 days or clear up and occur again within a few days

**Directions**
- Cleanse skin with THERA™ Moisturizing Body Cleanser or THERA™ Foaming Body Cleanser
- Apply cream liberally until entire area is covered
- Apply as needed

**Other information**
- Protect from freezing. Avoid excessive heat.

**Inactive ingredients**
- Aleurites Moluccana Seed Oil, Aloe Barbadensis (Aloe Vera) Leaf Juice, Safflex™ (Consisting of: Calcium Pantothenate (Vitamin B5), Maltodextrin, Nicinamide (Vitamin B3), Pyridoxine HCL (Vitamin B6), Silica, Sodium Ascorbyl Phosphate (Vitamin C), Sodium Sarch Octenylsuccinate, Tocopheryl Acetate (Vitamin E), Bisabolol, Butylene Glycol, Caprylyl Glycol, Carthamus Tintorius (Safflower) Oilsomes, Carthamus Tintorius (Safflower) Seed Oil, Cetyl Alcohol, Chlorphenesin, Dimethicone Crosspolymer, Disodium EDTA, Glycerin, Glyceryl Stearate, Lavender Ylang Fragrance, PEG-100 Stearate, Penterythrityl Tetra-dit-Butyl Hydroxyhydrocinaminate, Phenoxyethanol, Purified Water, Sodium Hyaluronate, Stearic Acid, Triethanolamine, Zingiber Officinale (Ginger) Root Extract.

Distributed By
McKesson Medical-Surgical Inc.
Richmond, VA 23228
Made in the U.S.A.
Call 1-877-611-0081 for clinical support.

**NET WT 4 fl. oz. (118 mL)**

**NuSurgePak Surgical Prep/CarePak**

**Package Labeling**
NUSURGEPAK SURGICAL PREP/CAREPAK
chlorhexidine gluconate, mupirocin, dimethicone kit

Product Information

Product Type: HUMAN PRESCRIPTION DRUG

Item Code (Source): NDC:70859-001

Packaging

<table>
<thead>
<tr>
<th>#</th>
<th>Item Code</th>
<th>Package Description</th>
<th>Marketing Start Date</th>
<th>Marketing End Date</th>
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<td>NDC:70859-001-01</td>
<td>1 in 1 KIT</td>
<td>07/29/2016</td>
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Quantity of Parts

<table>
<thead>
<tr>
<th>Part #</th>
<th>Package Quantity</th>
<th>Total Product Quantity</th>
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<tbody>
<tr>
<td>Part 1</td>
<td>1 BOTTLE, PLASTIC</td>
<td>237 mL</td>
</tr>
<tr>
<td>Part 2</td>
<td>1 TUBE</td>
<td>22 g</td>
</tr>
<tr>
<td>Part 3</td>
<td>1 TUBE</td>
<td>118 mL</td>
</tr>
</tbody>
</table>

Part 1 of 3

ANTISEPTIC SKIN CLEANSER
chlorhexidine gluconate solution

Product Information

Item Code (Source): NDC:0116-1061
Route of Administration: TOPICAL
<table>
<thead>
<tr>
<th>Active Ingredient/Active Moiety</th>
<th>Ingredient Name</th>
<th>Basis of Strength</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHLORHEXIDINE GLUCONATE</td>
<td>(UNII: MOR84MUD8E)</td>
<td>CHLORHEXIDINE GLUCONATE</td>
<td>4 g in 100 mL</td>
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</table>

<table>
<thead>
<tr>
<th>Inactive Ingredients</th>
<th>Ingredient Name</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>HYDROXYETHYL CELLULOSE</td>
<td>(2000 CPS AT 1%) (UNII: S38J6RZN16)</td>
<td></td>
</tr>
<tr>
<td>ISO PROPYL ALCOHOL</td>
<td>(UNII: ND2M416302)</td>
<td></td>
</tr>
<tr>
<td>LAURAMINE OXIDE</td>
<td>(UNII: 4F6FC4MBW)</td>
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</tr>
<tr>
<td>WATER</td>
<td>(UNII: 059QF0KO0R)</td>
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</tr>
<tr>
<td>TRIDECYL ALCOHOL</td>
<td>(UNII: 8B9428HB68)</td>
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<tr>
<td>GLUCONOLACTONE</td>
<td>(UNII: WQ29KQ9POT)</td>
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<tr>
<td>COCO DIETHANOLAMIDE</td>
<td>(UNII: 92005F972D)</td>
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</tr>
<tr>
<td>PEG-75 LANOLIN</td>
<td>(UNII: 09179OX7TB)</td>
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</table>

<table>
<thead>
<tr>
<th>Packaging</th>
<th>#</th>
<th>Item Code</th>
<th>Package Description</th>
<th>Marketing Start Date</th>
<th>Marketing End Date</th>
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<td></td>
<td>1</td>
<td>NDC:0116-1061-08</td>
<td>237 mL in 1 BOTTLE, PLASTIC; Type 1: Convenience Kit of Co-Package</td>
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<table>
<thead>
<tr>
<th>Marketing Information</th>
<th>Marketing Category</th>
<th>Application Number or Monograph Citation</th>
<th>Marketing Start Date</th>
<th>Marketing End Date</th>
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<tr>
<td></td>
<td>NDA</td>
<td>NDA019125</td>
<td>08/31/2011</td>
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</table>

Part 2 of 3

MUPIROCIN
mupirocin ointment

<table>
<thead>
<tr>
<th>Product Information</th>
<th>Item Code (Source)</th>
<th>Route of Administration</th>
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<tbody>
<tr>
<td></td>
<td>NDC:68462-180</td>
<td>TOPICAL</td>
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</table>

<table>
<thead>
<tr>
<th>Active Ingredient/Active Moiety</th>
<th>Ingredient Name</th>
<th>Basis of Strength</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>MUPIROCIN</td>
<td>(UNII: D0GX8630A5)</td>
<td>MUPIROCIN</td>
<td>20 mg in 1 g</td>
</tr>
</tbody>
</table>
### Inactive Ingredients

<table>
<thead>
<tr>
<th>Ingredient Name</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLYETHYLENE GLYCOL 400 (UNII: B697894SGQ)</td>
<td></td>
</tr>
<tr>
<td>POLYETHYLENE GLYCOL 3350 (UNII: G2M7P15E5P)</td>
<td></td>
</tr>
</tbody>
</table>

### Packaging

<table>
<thead>
<tr>
<th>#</th>
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<th>Marketing Start Date</th>
<th>Marketing End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NDC:68462-180-22</td>
<td>22 g in 1 TUBE; Type 0: Not a Combination Product</td>
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<td></td>
</tr>
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</table>

### Marketing Information

<table>
<thead>
<tr>
<th>Marketing Category</th>
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</thead>
<tbody>
<tr>
<td>ANDA</td>
<td>ANDA090480</td>
<td>06/08/2011</td>
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</tr>
</tbody>
</table>

### Part 3 of 3

**THERA DIMETHICONE BODY SHIELD**

dimethicone cream

### Product Information

<table>
<thead>
<tr>
<th>Item Code (Source)</th>
<th>NDC:68599-0203</th>
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</thead>
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<tr>
<td>Route of Administration</td>
<td>TOPICAL</td>
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</tbody>
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### Active Ingredient/Active Moiety

<table>
<thead>
<tr>
<th>Ingredient Name</th>
<th>Basis of Strength</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIMETHICONE (UNII: 92RU3N3Y1O) (DIMETHICONE - UNII:92RU3N3Y1O)</td>
<td>DIMETHICONE</td>
<td>50 mg in 1 mL</td>
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</table>

### Inactive Ingredients

<table>
<thead>
<tr>
<th>Ingredient Name</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>KUKUI NUT OIL (UNII: TP11QR7B8R)</td>
<td></td>
</tr>
<tr>
<td>ALOE VERA LEAF (UNII: ZY81Z83H0X)</td>
<td></td>
</tr>
<tr>
<td>CALCIUM PANTOTHENATE (UNII: 568ET80C3D)</td>
<td></td>
</tr>
<tr>
<td>MALTODEXTRIN (UNII: 7CVR7L4A2D)</td>
<td></td>
</tr>
<tr>
<td>NIACINAMIDE (UNII: 25X518RD4)</td>
<td></td>
</tr>
<tr>
<td>PYRIDOXINE HYDROCHLORIDE (UNII: 68Y4CF58BV)</td>
<td></td>
</tr>
<tr>
<td>SILICON DIOXIDE (UNII: ETJ7Z6XBU4)</td>
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</tr>
<tr>
<td>SODIUM ASCORBYL PHOSPHATE (UNII: 836SJG51DR)</td>
<td></td>
</tr>
<tr>
<td>ALPHA-TOCOPHEROL ACETATE, DL- (UNII: WR1WP7EW8)</td>
<td></td>
</tr>
<tr>
<td>LEVOMENOL (UNII: 24WE03BX2T)</td>
<td></td>
</tr>
<tr>
<td>BUTYLENE GLYCOL (UNII: 3XUS85K0RA)</td>
<td></td>
</tr>
<tr>
<td>CAPRYLYL GLYCOL (UNII: 00YIU5438U)</td>
<td></td>
</tr>
</tbody>
</table>
**SAFFLOWER OIL** (UNII: 65UEH262IS)  
**CETYL ALCOHOL** (UNII: 936JST6JCN)  
**CHLORPHENESIN** (UNII: I670DAL4SZ)  
**EDETATE DISODIUM** (UNII: 7FLD91C86K)  
**GLYCERIN** (UNII: PDC6A3C0OX)  
**GLYCERYL MONOSTEARATE** (UNII: 230OU9XXE4)  
**PEG-100 STEARATE** (UNII: YD01N1999R)  
**PHENOXYETHANOL** (UNII: HIE492ZZ3T)  
**WATER** (UNII: 059QF0KO0R)  
**HYALURONATE SODIUM** (UNII: YSE9PPT4TH)  
**STEARIC ACID** (UNII: 4ELV7Z65AP)  
**TROLAMINE** (UNII: 9O3K93S3TK)  
**GINGER** (UNII: C5529G5JPQ)

### Packaging

<table>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NDC:68599-0203-4 118 mL in 1 TUBE; Type 1: Convenience Kit of Co-Package</td>
<td></td>
<td></td>
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</tbody>
</table>

### Marketing Information

**Marketing Category** : OTC monograph final  
**Application Number or Monograph Citation** : part347  
**Marketing Start Date** : 09/01/2011

**Marketing Category** : ANDA  
**Application Number or Monograph Citation** : ANDA090480  
**Marketing Start Date** : 07/29/2016

### Labeler - Nucare Pharmaceuticals Inc (010632300)

### Establishment

**Name**     | **Address** | **ID/FEI** | **Business Operations**               
--------------|-------------|------------|---------------------------------------|
Nucare Pharmaceuticals Inc | 010632300 | repack(70859-001) , relabel(70859-001) |
Xtrium Laboratories, Inc.     |            | 007470579  | manufacture(0116-1061)                |
Glenmark Pharmaceuticals Ltd  |            | 677318665  | manufacture(68462-180)                |
| PureTek Corporation | 785961046 | manufacture(68599-0203) |

Revised: 12/2018  Nucare Pharmaceuticals Inc