

**SEVERE COUGH AND CONGESTION- dextromethorphan hbr, guaifenesin,
phenylephrine hcl solution
CVS PHARMACY**

CVS 44-004

Active ingredients (in each 20 mL)

Dextromethorphan HBr 20 mg
Guaifenesin 400 mg
Phenylephrine HCl 10 mg

Purpose

Cough suppressant
Expectorant
Nasal decongestant

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
 - nasal congestion due to a cold

Warnings

Do not use

- 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

- heart disease
- diabetes
- high blood pressure
- thyroid disease
- difficulty in urination due to enlargement of the prostate gland
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis or emphysema
- cough that occurs with too much phlegm (mucus)

When using this product

do not exceed recommended dosage.

Stop use and ask a doctor if

- nervousness, dizziness, or sleeplessness occur
- symptoms do not get better within 7 days or occur with fever
- cough persists more than 7 days, tends to recur, or is accompanied by a fever, rash, or persistent headache. These could be signs of a serious condition.

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 take more than directed**
- do not take more than 6 doses in any 24-hour period
- mL = milliliter
- only use the dose cup provided
- adults and children 12 years and over: 20 mL in dosing cup provided every 4 hours
- children under 12 years: do not use

Other information

- **each 20 mL contains:** sodium 9 mg
- use by expiration date on package
- store at 25°C (77°F); excursions permitted between 15°-30°C (59°-86°F)

Inactive ingredients

anhydrous citric acid, FD&C blue #1, FD&C red #40, flavors, glycerin, propylene glycol, purified water, sodium benzoate, sodium citrate dihydrate, sodium metabisulfite, sorbitol, sucralose, xanthan gum

Questions or comments?

1-800-426-9391

Principal Display Panel

**♥CVS
Health®**

Compare to the active ingredients
in Mucinex® Fast-Max® Severe

Congestion & Cough*

**Severe Cough
& Congestion**

DEXTROMETHORPHAN HBr - Cough suppressant

GUAIFENESIN - Expectorant

PHENYLEPHRINE HCl - Nasal decongestant

MAXIMUM STRENGTH

Multi-Symptom

- Relieves nasal & chest congestion
- Controls cough
- Thins & loosens mucus

For Ages 12 & Over

6 FL OZ (177 mL)

F-004-45

REV C

**TAMPER EVIDENT: DO NOT USE IF
IMPRINTED SAFETY SEAL UNDER
CAP IS BROKEN OR MISSING**

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V-19849

B-004-45 REV C



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PEEL BACK TAB TO READ COMPLETE
DRUG FACTS AND INFORMATION

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No Print / No Varnish Area
Lot # and Exp. Info

Drug Facts (continued)

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CVS 44-004

SEVERE COUGH AND CONGESTION

dextromethorphan hbr, guaifenesin, phenylephrine hcl solution

Product Information

Product Type

HUMAN OTC DRUG

Item Code (Source)

NDC:69842-942

Route of Administration

ORAL

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RT19KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 20 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	400 mg in 20 mL
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII:1WS297W6MV)	PHENYLEPHRINE HYDROCHLORIDE	10 mg in 20 mL

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
FD&C RED NO. 40 (UNII: WZB9127XOA)	
GLYCERIN (UNII: PDC6A3C0OX)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0K00R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
TRISODIUM CITRATE DIHYDRATE (UNII: B22547B95K)	
SODIUM METABISULFITE (UNII: 4VON5FNS3C)	
SORBITOL (UNII: 506T60A25R)	
SUCRALOSE (UNII: 96K6UQ3ZD4)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics

Color	blue	Score	
Shape		Size	
Flavor	BERRY (Mixed)	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:69842-942-45	177 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product	11/17/2020	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	11/17/2020	

Labeler - CVS PHARMACY (062312574)

Establishment

Name	Address	ID/FEI	Business Operations
LNK International, Inc.		967626305	manufacture(69842-942) , pack(69842-942)

Revised: 12/2023

CVS PHARMACY