DEXTROMETHORPHAN HYDROBROMIDE AND GUAIFENESIN-
dextromethorphan hydrobromide and guaifenesin syrup
OPMX LLC

Histiacil NF
Pentrexicilina NF
Brosolvan

Active Ingredient (in each 5 mL) **Purpose**

Dextromethorphan HBr USP 20 mg..... Cough suppressant

Guaifenesin, USP 300 mg..... Expectorant

Relieves:
• Chest congestion / Mucus
• Cough

Uses

- temporarily relieves cough due to minor throat and bronchial irritation as may occur with a cold
- helps to loosen phlegm (mucus) and thin bronchial secretions to drain bronchial tubes

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

- cough that occurs with too much phlegm (mucus)
- cough that lasts or is chronic such as occurs with smoking, asthma, chronic bronchitis or emphysema

Stop use and ask a doctor if cough lasts more than 7 days, comes back, or is accompanied by 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 6 doses in any 24-hour period
- measure only with dosing cup provided
- ml=milliliter
- this adult product is not intended for use in children under 12 years of age

Age	Dose
Adults and children 12 years and over	5 mL every 4 hours
Children under 12 years	do not use

Other information

- Store at 20°-25°C (68° -77°F).
- Do not refrigerate.
- Retain carton for future reference on full labeling

Inactive ingredients

citric acid, flavor, glycerin, menthol, polyethylene glycol, propylene glycol, purified water, sodium benzoate, sodium saccharin, sorbitol.

Questions or comments?
Call 619-600-5632

Tamper evident: Do not use if inner seal under cap is broken or missing.

Exclusively distributed by
OPMX
Chula Vista, CA91910
Phone: 619-600-5632

Manufactured in
FDA Registered Facility
In the USA

PRINCIPAL DISPLAY PANEL PENTREXCILINA ADULT

PRINCIPAL DISPLAY PANEL BROSOLVAN ADULT

PRINCIPAL DISPLAY PANEL HISTIACIL ADULT

DEXTROMETHORPHAN HYDROBROMIDE AND GUAIFENESIN

dextromethorphan hydrobromide and guaifenesin syrup

Product Information			
Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:69729-062
Route of Administration	ORAL		

Active Ingredient/Active Moiety		
Ingredient Name	**Basis of Strength**	**Strength**

DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 5 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	300 mg in 5 mL

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
GLYCERIN (UNII: PDC6A3C0OX)	
MENTHOL (UNII: L7T10EIP3A)	
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WQ0SDW1A)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
SACCHARIN SODIUM (UNII: SB8ZUX40TY)	
SORBITOL (UNII: 506T60A25R)	

Product Characteristics

Color		**Score**	
Shape		**Size**	
Flavor	CHERRY	**Imprint Code**	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:69729-062-04	118 mL in 1 BOTTLE; Type 0: Not a Combination Product	02/01/2021	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	02/01/2021	

DEXTROMETHORPHAN HYDROBROMIDE AND GUAIFENESIN

dextromethorphan hydrobromide and guaifenesin syrup

Product Information

Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:69729-020
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 5 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	300 mg in 5 mL

Inactive Ingredients

Ingredient Name	Strength
SACCHARIN SODIUM (UNII: SB8ZUX40TY)	
SORBITOL (UNII: 506T60A25R)	
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
GLYCERIN (UNII: PDC6A3C0OX)	
MENTHOL (UNII: L7T10EIP3A)	
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WQ0SDW1A)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	

Product Characteristics

Color		**Score**	
Shape		**Size**	
Flavor	CHERRY	**Imprint Code**	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:69729-020-04	118 mL in 1 BOTTLE; Type 0: Not a Combination Product	02/01/2021	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	02/01/2021	

DEXTROMETHORPHAN HYDROBROMIDE AND GUAIFENESIN

dextromethorphan hydrobromide and guaifenesin syrup

Product Information

Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:69729-040
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 5 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	300 mg in 5 mL

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SODIUM BENZOATE (UNII: OJ245FE5EU)	
SACCHARIN SODIUM (UNII: SB8ZUX40TY)	
SORBITOL (UNII: 506T60A25R)	

Product Characteristics

Color		**Score**	
Shape		**Size**	
Flavor	CHERRY	**Imprint Code**	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:69729-040-04	118 mL in 1 BOTTLE; Type 0: Not a Combination Product	02/01/2021	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	02/01/2021	

Labeler - OPMX LLC (029918743)

Establishment

Name	Address	ID/FEI	Business Operations
KJD Pharma Pvt Ltd		877256314	manufacture(69729-062, 69729-040, 69729-020)