

**TUSSIN COUGH AND CHEST CONGESTION DM ADULT- dextromethorphan hbr,  
guaifenesin liquid  
Rite Aid Corporation**

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**Drug Facts**

**Active ingredients (in each 10 mL)**

Dextromethorphan HBr 20 mg

Guaifenesin 200 mg

**Purposes**

Cough suppressant

Expectorant

**Uses**

- temporarily relieves cough due to minor throat and bronchial irritation as may occur with a cold
- helps 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 (1-800-222-

1222) right away.

### **Directions**

- do not take more than 6 doses in any 24-hour period
- measure only with the dosing cup provided. Do not use any other dosing device.
- keep dosing cup with product
- mL= milliliter
- this adult product is not intended for use in children under 12 years of age
- adults and children 12 years and over: 10 mL every 4 hours
- children under 12 years: do not use

### **Other information**

- store between 20-25°C(68-77°F). Do not refrigerate

### **Inactive ingredients**

acesulfame potassium, anhydrous citric acid, flavor, glycerin, methylparaben, polyethylene glycol, povidone propylene glycol, purified water, saccharin sodium, sodium benzoate

### **Questions or comments?**

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

### **Principal Display Panel**

Compare to the active ingredients in Robitussin® Peak Cold Sugar-Free Cough-+Chest Congestion DM\*

**FREE ALCOHOL FREE**

**FROM SUGAR FREE**

**TUSSIN**

**COUGH + CHEST CONGESTION**

**ADULT**

**NON-DROWSY • ALCOHOL FREE**

COUGH SUPPRESSANT

EXPECTORANT

DEXTROMETHORPHAN HBr 20 mg

GUAIFENESIN 200 mg

Relieves cough, mucus

Specially formulated for diabetics

For ages 12 years and over

DM SUGAR-FREE

FL OZ (mL)

DOSAGE CUP INCLUDED

\*This product is not manufactured or distributed by Pfizer Consumer Healthcare, distributors of Robitussin® Peak Cold Sugar-Free Cough + Chest Congestion DM.

**TAMPER EVIDENT: DO NOT USE IF PRINTED SAFETY SEAL AROUND BOTTLE OR UNDER CAP IS BROKEN OR MISSING.**

DISTRIBUTED BY:

RITE AID

30 HUNTER LANE,

CAMP HILL, PA 17011

[www.riteaid.com](http://www.riteaid.com)

**Package Label**

**Drug Facts (continued)**

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**PARENTS:**

Learn about teen medicine abuse  
[www.StopMedicineAbuse.org](http://www.StopMedicineAbuse.org)

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**SATISFACTION  
GUARANTEE**

If you're not satisfied, we'll  
happily refund your money.

NDC 11822-1173-7

Compare to the active ingredients in  
Robitussin® Peak Cold Sugar-Free  
Cough+Chest Congestion DM\*

**FREE** ALCOHOL FREE  
F R M SUGAR FREE

# TUSSIN COUGH + CHEST CONGESTION

**ADULT  
NON-DROWSY • ALCOHOL FREE**  
COUGH SUPPRESSANT  
EXPECTORANT

**DEXTROMETHORPHAN  
HBr 20 mg  
GUAIFENESIN 200 mg**

Relieves cough, mucus  
Specially formulated for diabetics  
For ages 12 & over

**DM  
SUGAR-  
FREE**



4 FL OZ (118 mL)

NDC 11822-1173-7

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**DM  
SUGAR-  
FREE**



4 FL OZ (118 mL)



0 11822 11737 1

FD005827  
PLD-K324C

Lot No.:  
Exp. Date:

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(in each 10 mL)

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## RITE AID Tussin Sugar Free Cough and Chest Congestion DM

## TUSSIN COUGH AND CHEST CONGESTION DM ADULT

dextromethorphan hbr, guaifenesin liquid

**Product Information**

<b>Product Type</b>	HUMAN OTC DRUG	<b>Item Code (Source)</b>	NDC:11822-1173
<b>Route of Administration</b>	ORAL		

**Active Ingredient/Active Moiety**

Ingredient Name	Basis of Strength	Strength
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 10 mL
<b>GUAIFENESIN</b> (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	200 mg in 10 mL

## Inactive Ingredients

Ingredient Name	Strength
<b>ANHYDROUS CITRIC ACID</b> (UNII: XF417D3PSL)	
<b>ACESULFAME POTASSIUM</b> (UNII: 23OV73Q5G9)	
<b>METHYLPARABEN</b> (UNII: A2I8C7HI9T)	
<b>GLYCERIN</b> (UNII: PDC6A3C0OX)	
<b>POLYETHYLENE GLYCOL, UNSPECIFIED</b> (UNII: 3WJQ0SDW1A)	
<b>POVIDONE</b> (UNII: FZ989GH94E)	
<b>WATER</b> (UNII: 059QF0KO0R)	
<b>SACCHARIN SODIUM</b> (UNII: SB8ZUX40TY)	
<b>SODIUM BENZOATE</b> (UNII: OJ245FE5EU)	
<b>PROPYLENE GLYCOL</b> (UNII: 6DC9Q167V3)	

## Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:11822-1173-7	1 in 1 BOX	11/19/2021	
1		118 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product		

## Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	11/19/2021	

**Labeler** - Rite Aid Corporation (014578892)