

**OXYMETAZOLINE HCL- oxymethazoline hcl spray**  
**Preferred Pharmaceuticals Inc.**

*Disclaimer: Most OTC drugs are not reviewed and approved by FDA, however they may be marketed if they comply with applicable regulations and policies. FDA has not evaluated whether this product complies.*

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**12 Hour Decongestant Nasal Spray**

***Drug Facts***

***Active ingredient***

Oxymetazoline HCL 0.05%

***Purpose***

Nasal decongestant

***Uses***

temporarily relieves nasal congestion due to:

- common cold
- hay fever
- upper respiratory allergies

temporarily relieves sinus congestion and pressure

shrinks swollen nasal membranes

**Ask a doctor before use if you have**

heart disease

high blood pressure

thyroid disease

diabetes

trouble urinating due to an enlarged prostate gland

**Stop use and ask a doctor if** symptoms persist

**If pregnant or breast-feeding,** ask a health professional before use.

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

***Directions***

**adults and children 6 to under 12 years of age (with adult supervision):** 2 or 3 sprays in each nostril. Not more often than every 10-12 hours. Do not exceed 2 doses in 24 hours.

**children under 6 years of age:** ask a doctor.

**Instructions for use:** Shake well before use. to open, rotate cap to align the marks. Squeeze cap on both sides in a counter-clockwise turn and pull to remove. To spray, hold bottles with thumb at base and nozzle between first and second fingers. Without tilting the head, insert nozzle into nostril. Fully depress rim with a firm even stroke and sniff deeply. Wipe nozzle clean after use and snap cap back onto bottle.

### ***Other information***

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

retain carton for future reference on full labeling

### ***Inactive ingredients***

benzalkonium chloride, dibasic sodium phosphate, edetate disodium dihydrate, monobasic sodium phosphate, polyethylene glycol, propylene glycol, povidone, purified water

### **Questions or comments?**

call **516-341-0666**, 8:30 am - 4:30 pm ET, Monday - Friday

### ***Warnings***

#### **Ask a doctor before use if you have**

heart disease

high blood pressure

thyroid disease

diabetes

trouble urinating due to an enlarged prostate gland

#### **When using this product**

#### **do not use more than directed**

do not use more than 3 days. Use only as directed. Frequent or prolonged use may cause nasal congestion to recur or worsen.

temporary discomfort such as burning, stinging, sneezing, or an increased nasal discharge may occur

use of this container by more than one person may spread infection

NDC 68788-7516-3

Relabeled By: Preferred Pharmaceuticals Inc.

OXYMETHAZOLINE HCL

oxymethazoline hcl spray

Product Information					
Product Type		HUMAN OTC DRUG	Item Code (Source)		NDC:68788-7516(NDC:69618-050)
Route of Administration		NASAL			
Active Ingredient/Active Moiety					
Ingredient Name			Basis of Strength		Strength
OXYMETAZOLINE HYDROCHLORIDE (UNII: K89MJ0S5VY) (OXYMETAZOLINE - UNII:8VLN5B44ZY)			OXYMETAZOLINE HYDROCHLORIDE		0.05 mg
Inactive Ingredients					
Ingredient Name					Strength
SODIUM PHOSPHATE, MONOBASIC, ANHYDROUS (UNII: KH7I04HPUU)					
EDETATE SODIUM (UNII: MP1J8420LU)					
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)					

<b>BENZALKONIUM CHLORIDE</b> (UNII: F5UM2KM3W7)	
<b>SODIUM PHOSPHATE, DIBASIC, ANHYDROUS</b> (UNII: 22ADO53M6F)	
<b>POLYETHYLENE GLYCOL, UNSPECIFIED</b> (UNII: 3WJQ0SDW1A)	
<b>WATER</b> (UNII: 059QF0KO0R)	
<b>POVIDONE, UNSPECIFIED</b> (UNII: FZ989GH94E)	

### Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-7516-3	1 in 1 CARTON	02/11/2020	
1		1 in 1 BOTTLE, SPRAY; Type 0: Not a Combination Product		

### Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC monograph final	part341	02/11/2020	

**Labeler** - Preferred Pharmaceuticals Inc. (791119022)

**Registrant** - Preferred Pharmaceuticals Inc. (791119022)

### Establishment

Name	Address	ID/FEI	Business Operations
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-7516)

Revised: 8/2023

Preferred Pharmaceuticals Inc.