

**MUCUS RELIEF DM MAXIMUM STRENGTH- dextromethorphan hbr,  
guaifenesin liquid  
AmerisourceBergen (Good Neighbor Pharmacy) 46122**

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**Drug Facts**

**Active ingredients (in each 20 mL)**

Dextromethorphan HBr 20 mg

Guaifenesin 400 mg

**Purposes**

Cough suppressant

Expectorant

**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

**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**

- 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 use more than directed**

**Stop use and ask a doctor if**

cough lasts more than 7 days, comes back, or occurs with fever, rash or headache that lasts. 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 dosing cup provided. Do not use any other dosing device.
- keep dosing cup with product
- mL = milliliter
- dose as follows or as directed by a doctor
- adults and children 12 years of age and older: 20 mL every 4 hours
- children under 12 years of age: do not use

**Other information**

- **each 20 mL contains:** sodium 20 mg
- store between 20-25°C (68-77°F). Do not refrigerate

**Inactive ingredients**

anhydrous citric acid, disodium EDTA, FD&C red #40, flavor, glycerin, propyl gallate, propylene glycol, purified water, sodium benzoate, sodium citrate, sorbitol, sucralose, xanthan gum

**Principal Display Panel**

Compare to Maximum Strength Mucinex® Fast-Max® DM Max active ingredients\*

Maximum Strength Mucus Relief

DM Max

Cough Suppressant

(Dextromethorphan HBr)

Expectorant

(Guaifenesin)

- Mucus
- Cough
- Chest Congestion

For Ages 12 Years & Over

FL OZ (mL)

\*This product is not manufactured or distributed by Reckitt Benckiser, distributor of Maximum Strength Mucinex® Fast-Max® DM Max.

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

Distributed By AmerisourceBergen

1 West First Avenue, Conshohocken, PA 19428

Questions or Concerns? Visit us at [www.mygnp.com](http://www.mygnp.com)

Questions or comments? Call 1-877-753-3935 Monday-Friday 9AM-5PM EST

**Package Label**



Compare to Maximum Strength Mucinex® Fast-Max® DM Max active ingredients \*

NDC 46122-371-30

# Maximum Strength Mucus Relief

**DM Max**

**Cough Suppressant**  
(Dextromethorphan HBr)  
**Expectorant**  
(Guaifenesin)

- Mucus • Cough
- Chest Congestion

For Ages 12 Years & Over

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6 fl oz (177 mL)

ABC# 10164572



0 87701 42824 1

PLD-9409A LB004027

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PLD-D409A  
LB004108

## Drug Facts

Active ingredients (in each 20 mL)	Purposes
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Guaifenesin 400 mg	Expectorant

PEEL CORNER FOR MORE DRUG FACTS

## Drug Facts (continued)

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## Drug Facts (continued)

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## Drug Facts (continued)

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PEEL CORNER FOR MORE DRUG FACTS

**GOOD NEIGHBOR PHARMACY Mucus Relief DM Max**

## MUCUS RELIEF DM MAXIMUM STRENGTH

dextromethorphan hbr, guaifenesin liquid

**Product Information**

<b>Product Type</b>	HUMAN OTC DRUG	<b>Item Code (Source)</b>	NDC:46122-371
<b>Route of Administration</b>	ORAL		

**Active Ingredient/Active Moiety**

<b>Ingredient Name</b>	<b>Basis of Strength</b>	<b>Strength</b>
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 20 mL
<b>GUAIFENESIN</b> (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	400 mg in 20 mL

**Inactive Ingredients**

<b>Ingredient Name</b>	<b>Strength</b>
<b>ANHYDROUS CITRIC ACID</b> (UNII: XF417D3PSL)	
<b>EDETATE DISODIUM</b> (UNII: 7FLD91C86K)	
<b>PROPYL GALLATE</b> (UNII: 8D4SNN7V92)	
<b>SODIUM BENZOATE</b> (UNII: OJ245FE5EU)	
<b>SODIUM CITRATE</b> (UNII: 1Q73Q2JULR)	
<b>SORBITOL</b> (UNII: 506T60A25R)	
<b>FD&amp;C RED NO. 40</b> (UNII: WZB9127XOA)	
<b>GLYCERIN</b> (UNII: PDC6A3C0OX)	
<b>PROPYLENE GLYCOL</b> (UNII: 6DC9Q167V3)	
<b>WATER</b> (UNII: 059QF0KO0R)	
<b>SUCRALOSE</b> (UNII: 96K6UQ3ZD4)	
<b>XANTHAN GUM</b> (UNII: TTV12P4NEE)	

**Packaging**

<b>#</b>	<b>Item Code</b>	<b>Package Description</b>	<b>Marketing Start Date</b>	<b>Marketing End Date</b>
1	NDC:46122-371-30	177 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product	05/31/2016	05/31/2025

**Marketing Information**

<b>Marketing Category</b>	<b>Application Number or Monograph Citation</b>	<b>Marketing Start Date</b>	<b>Marketing End Date</b>
OTC Monograph Drug	M012	05/31/2016	05/31/2025

**Labeler** - AmerisourceBergen (Good Neighbor Pharmacy) 46122 (007914906)