GUAIFENESIN AND DEXTROMETHORPHAN HYDROBROMIDE- guaifenesin and dextromethorphan hydrobromide tablet, extended release
Rite-Aid

Guaifenesin and Dextromethorphan Hydrobromide

Drug Facts

Active ingredients (in each extended-release tablet)	***Purposes***
Dextromethorphan HBr 60 mg	Cough suppressant
Guaifenesin 1200 mg	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

- for children under 12 years of age
- 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 accompanied by 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 persistent headache. These could be signs of a serious illness.

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 (1-800-222-1222).

Directions

- do not crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regard for timing of meals
- adults and children 12 years and older: 1 tablet every 12 hours; not more than 2 tablets in 24 hours
- children under 12 years of age: do not use

Other information

- **Tamper evident: Do not use if carton is open or if printed seal on blister is broken or missing.**
- store between 20-25°C (68-77°F)

Inactive ingredients

carbomer homopolymer type B; hypromellose, USP; magnesium stearate, NF; microcrystalline cellulose, NF; sodium starch glycolate, NF

Questions?

(1-800-406-7984)

You may also report side effects to this phone number.

DISTRIBUTED BY: WALGREEN CO.
200 WILMOT RD., DEERFIELD, IL 60015

PRINCIPAL DISPLAY PANEL - 14 Tablet Blister Pack Carton

Compare to the active ingredients in Maximum Strength Mucinex® DM*

NDC 11822-7156-9

MAXIMUM STRENGTH

MUCUS
RELIEF DM

GUAIFENESIN 1200 mg

DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS
EXPECTORANT & COUGH SUPPRESSANT

Controls cough
Thins & loosens mucus
Immediate & extended release

12
HOUR

ACTUAL SIZE

14
EXTENDED-RELEASE
TABLETS

MAXIMUM STRENGTH

MUCUS RELIEF DM

GUAIFENESIN 1200 mg • DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS • EXPECTORANT & COUGH SUPPRESSANT

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12 HOUR

ACTUAL SIZE

14
EXTENDED-RELEASE
TABLETS

Lot No.

Expiration Date:

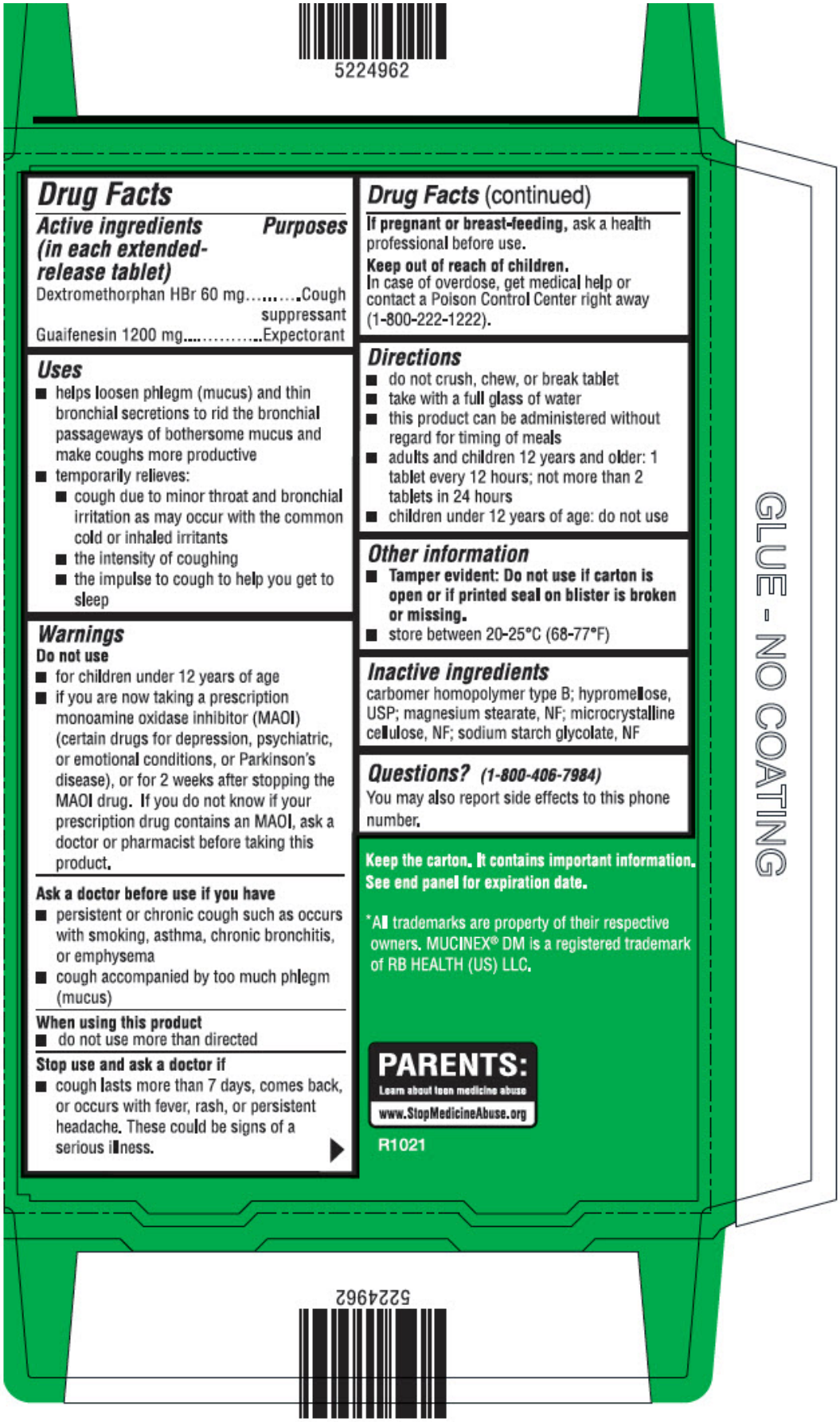
NON VARNISH

MUCUS RELIEF DM
GUAIFENESIN 1200 mg • DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS • EXPECTORANT & COUGH SUPPRESSANT
MAXIMUM STRENGTH

0 11822 71569 0

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

DISTRIBUTED BY:
RITE AID, 30 HUNTER LANE,
CAMP HILL, PA 17011
www.riteaid.com
MADE IN ENGLAND



PRINCIPAL DISPLAY PANEL - 28 Tablet Blister Pack Carton

Compare to the active ingredients in Maximum Strength Mucinex® DM*

NDC 11822-8157-0

MAXIMUM STRENGTH

MUCUS
RELIEF DM

GUAIFENESIN 1200 mg
DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS
EXPECTORANT & COUGH SUPPRESSANT

Controls cough
Thins & loosens mucus
Immediate & extended release

12
HOUR

ACTUAL SIZE

28
EXTENDED-RELEASE
TABLETS

MAXIMUM STRENGTH

MUCUS RELIEF DM

GUAIFENESIN 1200 mg • DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS • EXPECTORANT & COUGH SUPPRESSANT
Controls cough • Thins & loosens mucus • Immediate & extended release

Compare to the active ingredients in **Maximum Strength Mucinex® DM***

NDC 11822-8157-0

MAXIMUM STRENGTH

MUCUS RELIEF DM

GUAIFENESIN 1200 mg
DEXTROMETHORPHAN HBr 60 mg
EXTENDED-RELEASE TABLETS
EXPECTORANT & COUGH SUPPRESSANT
Controls cough
Thins & loosens mucus
Immediate & extended release

12 HOUR

ACTUAL SIZE

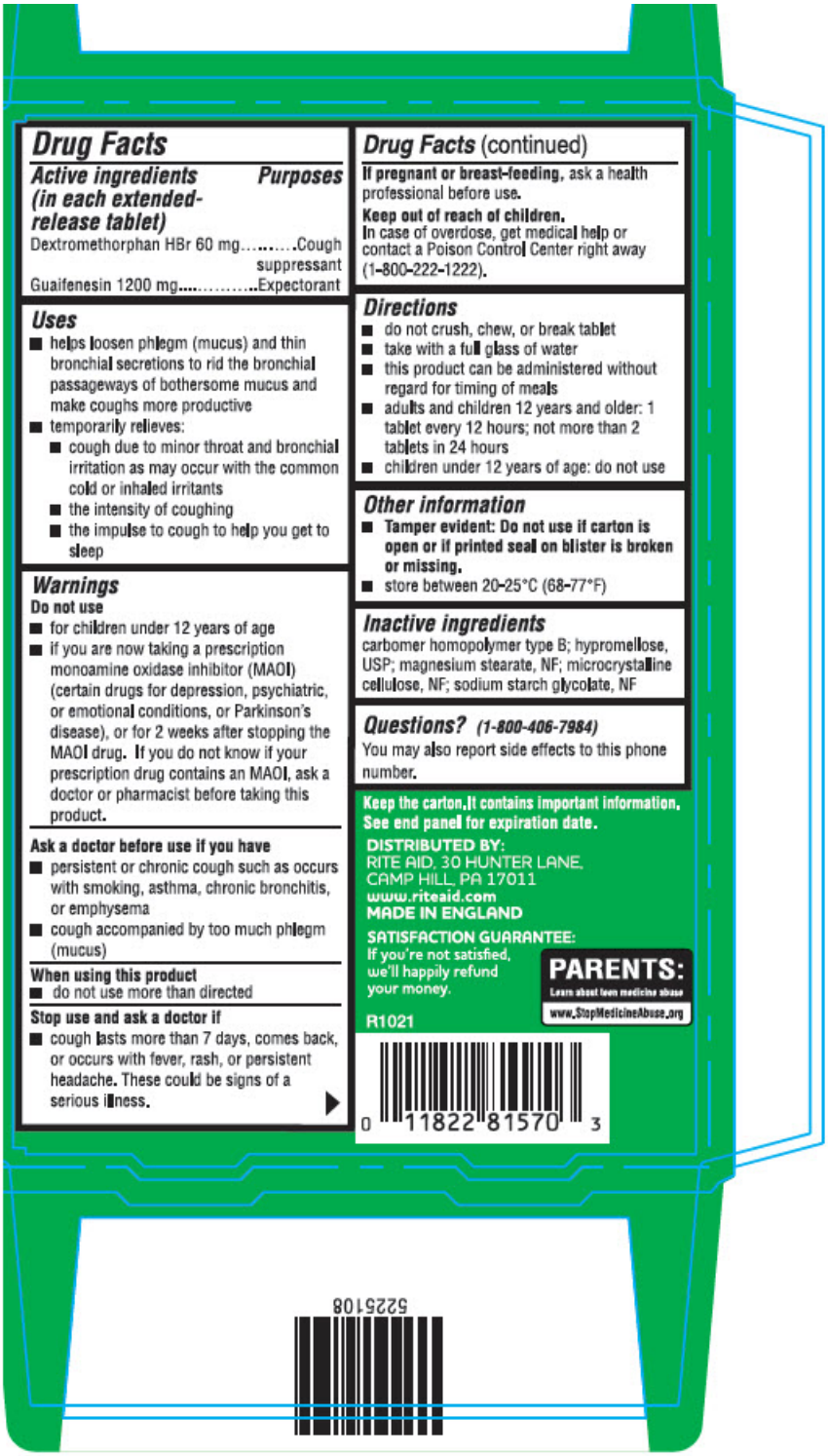
28
EXTENDED-RELEASE
TABLETS

*All trademarks are property of their respective owners. MUCINEX® DM is a registered trademark of RB HEALTH (US) LLC.

Lot No.

Expiration Date:

5225108



Drug Facts

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Guaifenesin 1200 mg ..... Expectorant

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Drug Facts (continued)

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Inactive ingredients

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Questions? (1-800-406-7984)

You may also report side effects to this phone number.

Keep the carton. It contains important information.
See end panel for expiration date.

DISTRIBUTED BY:
RITE AID, 30 HUNTER LANE,
CAMP HILL, PA 17011
www.riteaid.com
MADE IN ENGLAND

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

PARENTS:
Learn about teen medicine abuse
www.StopMedicineAbuse.org

R1021

0 11822 81570 3

5225108

GUAIFENESIN AND DEXTROMETHORPHAN HYDROBROMIDE

guaifenesin and dextromethorphan hydrobromide tablet, extended release

Product Information			
Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:11822-7156
Route of Administration	ORAL		

Active Ingredient/Active Moiety		
Ingredient Name	**Basis of Strength**	**Strength**
Guaifenesin (UNII: 495W7451VQ) (Guaifenesin - UNII:495W7451VQ)	Guaifenesin	1200 mg
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg

Inactive Ingredients	
Ingredient Name	**Strength**
CARBOMER HOMOPOLYMER TYPE B (ALLYL PENTAERYTHRITOL CROSSLINKED) (UNII: HHT01ZNK31)	
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)	
MAGNESIUM STEARATE (UNII: 70097M6I30)	
MICROCRYSTALLINE CELLULOSE (UNII: OP1R32D61U)	
SODIUM STARCH GLYCOLATE TYPE A POTATO (UNII: 5856J3G2A2)	

Product Characteristics			
Color	WHITE	**Score**	no score
Shape	OVAL	**Size**	22mm
Flavor		**Imprint Code**	xeunciM;1200
Contains			

Packaging				
#	**Item Code**	**Package Description**	**Marketing Start Date**	**Marketing End Date**
1	NDC:11822-7156-9	1 in 1 CARTON	09/05/2017	
1		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		
2	NDC:11822-7156-0	1 in 1 CARTON	09/07/2017	
2		28 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
NDA	NDA021620	09/05/2017	

GUAIFENESIN AND DEXTROMETHORPHAN HYDROBROMIDE

guaifenesin and dextromethorphan hydrobromide tablet, extended release

Product Information			
Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:11822-8157
Route of Administration	ORAL		

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Ingredient Name	Basis of Strength	Strength
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DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg

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Ingredient Name	Strength
CARBOMER HOMOPOLYMER TYPE B (ALLYL PENTAERYTHRITOL CROSSLINKED) (UNII: HHT01ZNK31)	
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SODIUM STARCH GLYCOLATE TYPE A POTATO (UNII: 5856J3G2A2)	

Product Characteristics

Color	WHITE	**Score**	no score
Shape	OVAL	**Size**	22mm
Flavor		**Imprint Code**	xeunciM;1200
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:11822-8157-0	1 in 1 CARTON	09/05/2017	09/06/2017
1		28 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
NDA	NDA021620	09/05/2017	09/06/2017

Labeler - Rite-Aid (014578892)

Establishment

Name	Address	ID/FEI	Business Operations
RECKITT BENCKISER HEALTHCARE INTERNATIONAL LTD		230780363	MANUFACTURE(11822-7156, 11822-8157) , PACK(11822-7156, 11822-8157) , LABEL(11822-7156, 11822-8157)