

ROBITUSSIN MAXIMUM STRENGTH COUGH PLUS CHEST CONGESTION DM-
dextromethorphan hydrobromide, guaifenesin solution
Haleon US Holdings LLC

Drug Facts

Active ingredients (in each 20 ml)

Dextromethorphan HBr, USP 20 mg

Guaifenesin, USP 400 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 right away.

Directions

- do not take more than 6 doses in any 24-hour period

- measure only with dosing cup provided
- keep dosing cup with product
- 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	20 ml every 4 hours
children under 12 years	do not use

Other information

- **each 20 ml contains:**sodium 12 mg
- store at 20-25°C (68-77°F). Do not refrigerate.

Inactive ingredients

anhydrous citric acid, carboxymethylcellulose sodium, FD&C blue no. 1, FD&C red no. 40, glycerin, liquid glucose, menthol, natural and artificial flavors, polyethylene glycol, propylene glycol, purified water, sodium benzoate, sodium citrate, sucralose, triacetin, xanthan gum

Questions or comments?

call weekdays from 9 AM to 5 PM EST at **1-800-762-4675**

Made in Canada

For most recent product information, **visit www.robitussin.com**

Distributed by:

Pfizer, Madison, NJ 07940 USA

Principal Display Panel

**See
New
Dosing**

ADULT
Robitussin®

MAXIMUM STRENGTH

**Cough+Chest
Congestion DM**

**DEXTROMETHORPHAN HBr (Cough Suppressant)
GUAIFENESIN (Expectorant)**

- **Controls Cough**
- **Relieves Chest Congestion**

- **Thins & Loosens Mucus**

Non-Drowsy

**BETTER
TASTING!
Same Effective
Cough Relief***

**DM
MAX**

For Ages 12 & Over

4 FL OZ (118 ml)



ROBITUSSIN MAXIMUM STRENGTH COUGH PLUS CHEST CONGESTION DM

dextromethorphan hydrobromide, guaifenesin solution

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:0031-8739
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 20 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	400 mg in 20 mL

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
CARBOXYMETHYLCELLULOSE SODIUM, UNSPECIFIED (UNII: K679OBS311)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
FD&C RED NO. 40 (UNII: WZB9127XOA)	
GLYCERIN (UNII: PDC6A3C0OX)	
DEXTROSE, UNSPECIFIED FORM (UNII: IY9XDZ35W2)	
MENTHOL, UNSPECIFIED FORM (UNII: L7T10EIP3A)	
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WJQ0SDW1A)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
SODIUM CITRATE, UNSPECIFIED FORM (UNII: 1Q73Q2JULR)	
SUCRALOSE (UNII: 96K6UQ3ZD4)	
TRIACETIN (UNII: XHX3C3X673)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics

Color	red	Score	
Shape		Size	
Flavor		Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:0031-8739-12	1 in 1 CARTON	06/01/2016	
1		118 mL in 1 BOTTLE; Type 1: Convenience Kit of Co-Package		
2	NDC:0031-8739-18	1 in 1 CARTON	06/01/2016	
2		237 mL in 1 BOTTLE; Type 1: Convenience Kit of Co-Package		
3	NDC:0031-8739-42	1 in 1 CARTON	06/01/2016	
3		355 mL in 1 BOTTLE; Type 1: Convenience Kit of Co-Package		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	06/01/2016	

Labeler - Haleon US Holdings LLC (079944263)

Establishment

Name	Address	ID/FEI	Business Operations
Pf Soins De Sante Sri		203812479	analysis(0031-8739) , label(0031-8739) , manufacture(0031-8739) , pack(0031-8739)

Revised: 3/2024

Haleon US Holdings LLC