

**GUAIFENESIN AND CODEINE PHOSPHATE- guaifenesin and codeine phosphate solution**  
**Preferred Pharmaceuticals Inc.**

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**Guaifenesin and Codeine Phosphate**

***Drug Facts***

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***Active ingredients in each 5 mL (teaspoonful) Purposes***

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Codeine Phosphate, USP 10 mg	Cough Suppressant
Guaifenesin, USP 100 mg	Expectorant

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**Uses**

- temporarily relieves cough due to minor throat and bronchial irritations as may occur with the common cold or inhaled irritants
- helps loosen phlegm (mucus) and thin bronchial secretions to make cough more productive

**Warnings**

**Do not use**

- in adults and children who have a chronic pulmonary disease or shortness of breath, or children who are taking other drugs, unless directed by a doctor.

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

- a cough with too much phlegm (mucus)
- a persistent or chronic cough as occurs with smoking, asthma, chronic bronchitis, or emphysema

**Ask a doctor or pharmacist before use if you are** taking sedatives, tranquilizers and drugs used for depression, especially monoamine oxidase inhibitors (MAOIs). These combinations may cause greater sedation (drowsiness) than is caused by the product used alone.

**Stop use and ask a doctor if**

- cough lasts for more than 7 days, comes back, or occurs with fever, rash or headache that lasts. These can be signs of a serious condition.
- may cause or aggravate constipation

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

**Keep out of reach of children.** In case of accidental overdose, seek professional assistance or contact a Poison Control Center immediately.

- Use of codeine-containing preparation is not recommended for children under 2 years of age.

**Directions**

- take every 4 hours
- do not exceed 6 doses in 24 hours
- a special measuring device should be used to give an accurate dose of this product to children under 6 years of age
- giving a higher dose than recommended by a doctor can result in serious side effects for a child

adults and children 12 years and over	10 mL (2 teaspoonfuls)
children 6 to under 12 years of age	5 mL (1 teaspoonful)
children under 6 years of age	Consult a doctor

**Other information**

- *Sodium Content:* 5 mg/5 mL
- Tamper evident: Do not use if seal under cap is broken or missing
- Keep container closed and store away from heat
- Store at 20°- 25°C (68°-77°F)

**Inactive ingredients**

Citric acid, edetate disodium, FD&C Blue No. 1, FD&C Red No. 40, FD&C Yellow No. 6, flavor, glycerin, menthol, propylene glycol, purified water, sodium benzoate, sodium citrate, sodium saccharin and sorbitol.

**Questions or comments?**

Call 1-800-845-8210 or visit [paipharma.com](http://paipharma.com)

Serious side effects associated with use of this product may be reported to this number.

**PRINCIPAL DISPLAY PANEL - 118 mL Bottle Label**

NDC 68788-8361-1

**Guaifenesin and Codeine  
Phosphate Oral Solution USP  
CV**

# 100 mg/10 mg per 5 mL

Expectorant / Cough Suppressant

## Alcohol Free / Sugar Free

Each teaspoonful (5 mL) contains:

Guaifenesin, USP 100 mg

Codeine Phosphate, USP 10 mg

*Dispense in a tight, light-resistant container with a child-resistant closure.*

DO NOT ACCEPT IF SEAL

AROUND CAP IS BROKEN OR MISSING

118mL

**pai**  
**Pharmaceutical**  
**Associates, Inc.**

Greenville, SC 29605

**Relabeled By: Preferred Pharmaceuticals Inc.**

<b>Guaifenesin &amp; Codeine Oral Sol.</b> <b>10-100mg/5mL CV</b> Generic for Robitussin AC Each teaspoonful (5mL) contains: Codeine Phosphate USP 10mg / Guaifenesin, USP 100 mg <b>Pkg Size:</b> Exp Date: Lot#: Batch#: Ins: Mfg: Pharmaceutical Associates, Inc. Prod#: Warning <small>Store at controlled room temperature 20°-25°C (68°-77°F). Store away from heat. Keep this and all drugs out of the reach of children. In case of overdose, get medical help or contact a Poison Control Center right away. Sugar Free, Alcohol Free. Do not accept if imprinted seal around cap is broken or missing. If you are pregnant or nursing a baby, ask a health professional before use. See bottle for additional information.</small>	 <b>Directions English</b> Take ___ teaspoonful(s) ) every ___ hours. Take as Directed	 <b>Instrucciones Espanol:</b> Toma ___ cucharadita(s) ) cada ___ horas Tomelo como se indica	<p>CAUTION: Federal law PROHIBITS transfer of this drug to any person other than the patient for whom it was prescribed</p> <p>Guaifenesin &amp; Codeine Oral Sol. 10-100mg/5mL CV Qty: Ins: Lot#: Bat#: Prod# (NDC):</p> <p>Guaifenesin &amp; Codeine Oral Sol. 10-100mg/5mL CV Qty: Ins: Lot#: Bat#: Prod# (NDC):</p> <p>Guaifenesin &amp; Codeine Oral Sol. 10-100mg/5mL CV Qty: Insurance NDC: Lot#: Bat#:</p> <p>Guaifenesin &amp; Codeine Oral Sol. 10-100mg/5mL CV Qty: Ins: Lot#: Bat#: Prod# (NDC):</p>	<p>Log</p> <p>Chart</p> <p>Billing</p> <p>Patient</p>
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GUAIFENESIN AND CODEINE PHOSPHATE			
guaifenesin and codeine phosphate solution			
Product Information			
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68788-8361(NDC:0121-0775)
Route of Administration	ORAL	DEA Schedule	CV
Active Ingredient/Active Moiety			
Ingredient Name	Basis of Strength	Strength	

<b>GUAIFENESIN</b> (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	100 mg in 5 mL
<b>CODEINE PHOSPHATE</b> (UNII: GSL05Y1MN6) (CODEINE ANHYDROUS - UNII:UX6OWY2V7J)	CODEINE PHOSPHATE	10 mg in 5 mL

### Inactive Ingredients

Ingredient Name	Strength
<b>SODIUM CITRATE, UNSPECIFIED FORM</b> (UNII: 1Q73Q2JULR)	
<b>EDETATE DISODIUM</b> (UNII: 7FLD91C86K)	
<b>FD&amp;C BLUE NO. 1</b> (UNII: H3R47K3TBD)	
<b>FD&amp;C RED NO. 40</b> (UNII: WZB9127XOA)	
<b>FD&amp;C YELLOW NO. 6</b> (UNII: H77VEI93A8)	
<b>GLYCERIN</b> (UNII: PDC6A3C0OX)	
<b>MENTHOL, UNSPECIFIED FORM</b> (UNII: L7T10EIP3A)	
<b>PROPYLENE GLYCOL</b> (UNII: 6DC9Q167V3)	
<b>WATER</b> (UNII: 059QF0KO0R)	
<b>SODIUM BENZOATE</b> (UNII: OJ245FE5EU)	
<b>ANHYDROUS CITRIC ACID</b> (UNII: XF417D3PSL)	
<b>SACCHARIN SODIUM</b> (UNII: SB8ZUX40TY)	
<b>SORBITOL</b> (UNII: 506T60A25R)	

### Product Characteristics

<b>Color</b>	red	<b>Score</b>	
<b>Shape</b>		<b>Size</b>	
<b>Flavor</b>	CHERRY	<b>Imprint Code</b>	
<b>Contains</b>			

### Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-8361-1	118 mL in 1 BOTTLE; Type 0: Not a Combination Product	02/01/2023	

### Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	MO12	02/01/2023	

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

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

### Establishment

Name	Address	ID/FEI	Business Operations
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Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-8361)
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Revised: 5/2024

Preferred Pharmaceuticals Inc.