#### KROGER MUCUS RELIEF DM MAXIMUM STRENGTH- dextromethorphan hbr and guaifenesin solution KROGER COMPANY

\_\_\_\_\_

#### **KROGER Mucus Relief DM Maximum Strength**

### **Drug Facts**

Active ingredients (in each 20 mL)	Purposes
Dextromethorphan HBr 20 mg	Cough suppressant
Guaifenesin 400 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

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

persistent 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 right away at 1-800-222-2222.

# Directions

- do not take more than 6 doses in any 24-hour period
- measure only with dosing cup provided
- do not use dosing cup with other products
- dose as follows or as directed by a doctor
- mL = milliliter
- adults and children 12 years and older: 20 mL every 4 hours
- children under 12 years of age: Do not use

# Other information

- each 20 mL contains: sodium 8 mg
- low sodium
- store at room temperature
- do not refrigerate
- dosing cup provided

# Inactive ingredients

anhydrous citric acid, edetate disodium, FD&C Blue No. 1, FD&C Red No. 40, flavors, potassium citrate, propylene glycol, propyl gallate, purified water, sodium benzoate, sorbitol, sucralose, xanthan gum.

# **Questions or comments?**

1-866-467-2748

# PRINCIPAL DISPLAY PANEL

# NDC# 41226-739-06

\*Compare to the active ingredients in Maximum Strength Mucinex<sup>®</sup> Fast-Max<sup>®</sup> DM Max

# Mucus Relief DM

**Dextromethorphan HBr -** COUGH SUPPRESSANT **Guaifenesin -** EXPECTORANT

# **Maximum Strength**

Controls Cough

- Relieves Chest Congestion
- Thins & loosens Mucus
- 4 Hour Dosing

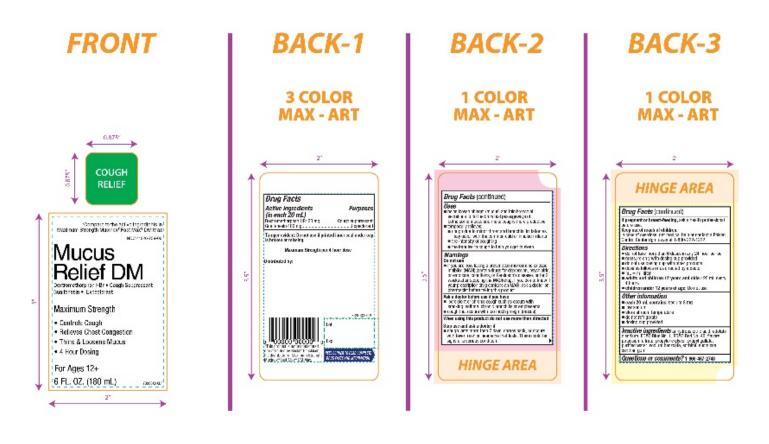
For Ages 12+

6 FL. OZ. (180 mL)

# Tamper evident: Do not use if printed inner seal under cap is broken or missing.

# Distributed by:

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



KROGER MUCUS RELIEF DM MAXIMUM STRENGTH dextromethorphan hbr and guaifenesin solution						
Product Information						
Product Type	HUMAN OTC DRUG	ltem Code (	Source)	NDC:41	.226-739	
Route of Administration	ORAL					
Active Ingredient/Active	Moiety					
Ingred	lient Name		<b>Basis of Stre</b>	ngth	Strength	
dextromethorphan hydrobromic	le (UNII: 9D2RTI9KYH) (dext	romethorphan	dextromethorphan		20 mg	

-	UNII:7355X3ROTS)	hydrobromide	in 20 mL
ç	juaifenesin (UNII: 495W7451VQ) (guaifenesin - UNII:495W7451VQ)	guaifenes in	400 mg in 20 mL

Inactive Ingred	ients		
	Ingredient Name		Strength
anhydrous citric aci	d (UNII: XF417D3PSL)		
edetate disodium (l	JNII: 7FLD91C86K)		
FD&C BLUE NO. 1 (U	JNII: H3R47K3TBD)		
FD&C red No. 40 (U	NII: WZB9127XOA)		
POTASSIUM CITRAT	E (UNII: EE90ONI6FF)		
oropylene glycol (U	NII: 6DC9Q167V3)		
propyl gallate (UNII:	8D4SNN7V92)		
water (UNII: 059QF0K	OOR)		
sodium benzoate (ປ	INII: OJ245FE5EU)		
sorbitol (UNII: 506T6	DA25R)		
sucralose (UNII: 96K	5UQ3ZD4)		
<b>xanthan gum</b> (UNII: <sup>-</sup>	TV12P4NEE)		
Packaging			
# Item Code	Package Description	Marketing Start Date	Marketing End Date
	30 mL in 1 BOTTLE; Type 0: Not a Combination roduct	04/05/2024	
Marketing Ir	nformation		
Marketing Ir Marketing Category	<b>Iformation</b> Application Number or Monograph Citation	Marketing Start Date	Marketing End Date

# Labeler - KROGER COMPANY (006999528)

Revised: 4/2024

**KROGER COMPANY**