

GOOD NEIGHBOR PHARMACY CHILDRENS ALLERGY- diphenhydramine hydrochloride solution
Preferred Pharmaceuticals Inc.

Amerisource Bergen Children's Allergy Drug Facts

Active ingredient (in each 5 mL)

Diphenhydramine HCl 12.5 mg

Purpose

Antihistamine

Uses

- temporarily relieves these symptoms due to hay fever or other upper respiratory allergies:
- sneezing
- itching of the nose or throat
- runny nose
- itchy, watery eyes

Warnings

Do not use

- with any other product containing diphenhydramine, even one used on skin
- to make a child sleepy

Ask a doctor before use if the child has

- a breathing problem such as chronic bronchitis
- glaucoma
- a sodium-restricted diet

Ask a doctor or pharmacist before use if the child is

taking sedatives or tranquilizers

When using this product

- marked drowsiness may occur
- excitability may occur, especially in children
- sedatives and tranquilizers may increase drowsiness

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

- find right dose on chart below
- mL = milliliter
- take every 4 to 6 hours, or as directed by a doctor
- do not take more than 6 doses in 24 hours

Age (yr)	Dose (mL)
children under 2 years	do not use
children 2 to 5 years	do not use unless directed by a doctor
children 6 to 11 years	5 mL to 10 mL

Attention: use only enclosed dosing cup specifically designed for use with this product. Do not use any other dosing device.

Other information

- **each 5 mL (1 tsp) contains:** sodium 15 mg
- store at 20-25°C (68-77°F). Protect from light. Store in outer carton until contents used.
- do not use if printed neckband is broken or missing

Relabeled By: Preferred Pharmaceuticals Inc.

Inactive ingredients

anhydrous citric acid, D&C red #33, FD&C red #40, flavor, glycerin, high fructose corn syrup, poloxamer 407, purified water, sodium benzoate, sodium chloride, sodium citrate, sorbitol solution

Questions or comments?

1-800-719-9260

Principal Display Panel

Compare to Children's Benadryl® Allergy active ingredient

children's

Allergy

Antihistamine

12.5 mg/5 mL

diphenhydramine HCl

oral solution

For Allergy Relief

Runny Nose

Sneezing

Itchy, Watery Eyes

Itchy Throat

4-6 Hours/Dose

Alcohol Free

Cherry Flavored

4 fl oz (118 mL)

Children's Antihistamine Oral Solution



CAUTION: Federal law PROHIBITS transfer of this drug to any person other than the patient for whom it was prescribed.

Children's Antihistamine Oral Solution
Qty: Ins:
Lot: Bat:
Prod# (NDC):

Generic for Children's Benadryl
Active ingredient (in each 5mL):
Diphenhydramine HCL 12.5mg...Antihistamine



Directions English

Take ___ teaspoonful(s) every ___ hours.



GTIN

SN #####
EXP #####

Instrucciones Espanol:
Toma ___ cucharita(s) cada ___ horas

Children's Antihistamine Oral Solution
Qty: Ins:
Lot: Bat:
Prod# (NDC):

Children's Antihistamine Oral Solution
Qty:
Insurance NDC:
Lot: Bat:

Children's Antihistamine Oral Solution
Qty: Ins:
Lot: Bat:
Prod# (NDC):

Log

Chart

Billing

Patient

GOOD NEIGHBOR PHARMACY CHILDRENS ALLERGY

diphenhydramine hydrochloride solution

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68788-7994(NDC:24385-379)
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DIPHENHYDRAMINE HYDROCHLORIDE (UNII: TC2D6JAD40) (DIPHENHYDRAMINE - UNII:8GTS82S83M)	DIPHENHYDRAMINE HYDROCHLORIDE	12.5 mg in 5 mL

Inactive Ingredients

Ingredient Name	Strength
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ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)
D&C RED NO. 33 (UNII: 9DBA0SBB0L)
FD&C RED NO. 40 (UNII: WZB9127XOA)
GLYCERIN (UNII: PDC6A3C0OX)
HIGH FRUCTOSE CORN SYRUP (UNII: XY6UN3QB6S)
POLOXAMER 407 (UNII: TUF2IVW3M2)
WATER (UNII: 059QF0KO0R)
SODIUM BENZOATE (UNII: OJ245FE5EU)
SODIUM CHLORIDE (UNII: 451W47IQ8X)
SODIUM CITRATE, UNSPECIFIED FORM (UNII: 1Q73Q2JULR)
SORBITOL (UNII: 506T60A25R)

Product Characteristics

Color	RED (Bluish-Red)	Score	
Shape		Size	
Flavor	CHERRY	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-7994-1	1 in 1 CARTON	08/09/2021	
1		118 mL in 1 BOTTLE; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	341	08/09/2021	

Labeler - Preferred Pharmaceuticals Inc. (791119022)

Registrant - Preferred Pharmaceuticals Inc. (791119022)

Establishment

Name	Address	ID/FEI	Business Operations
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-7994)