# GOOD SENSE CHILDRENS ALL DAY ALLERGY- cetirizine hcl solution Preferred Pharmaceuticals Inc.

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#### Perrigo Children's All Day Allergy Drug Facts

#### Active ingredient (in each 5 mL)

Cetirizine HCl 5 mg

#### **Purpose**

**Antihistamine** 

#### Uses

temporarily relieves these symptoms due to hay fever or other upper respiratory allergies:

- runny nose
- sneezing
- itchy, watery eyes
- itching of the nose or throat

#### **Warnings**

#### Do not use

if you have ever had an allergic reaction to this product or any of its ingredients or to an antihistamine containing hydroxyzine.

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

liver or kidney disease. Your doctor should determine if you need a different dose.

#### Ask a doctor or pharmacist before use if you are

taking tranquilizers or sedatives.

#### When using this product

- drowsiness may occur
- avoid alcoholic drinks
- alcohol, sedatives, and tranquilizers may increase drowsiness
- be careful when driving a motor vehicle or operating machinery

#### Stop use and ask a doctor if

an allergic reaction to this product occurs. Seek medical help right away.

#### If pregnant or breast-feeding:

- if breast-feeding: not recommended
- if pregnant: 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**

- use only with enclosed dosing cup
- find right dose on chart below
- mL = milliliter

adults and children 6 years and over	5 mL or 10 mL once daily depending upon severity of symptoms; do not take more than 10 mL in 24 hours.
adults 65 years and over	5 mL once daily; do not take more than 5 mL in 24 hours.
children 2 to under 6 years of age	2.5 mL once daily. If needed, dose can be increased to a maximum of 5 mL once daily or 2.5 mL every 12 hours. Do not give more than 5 mL in 24 hours.
children under 2 years of age	ask a doctor
consumers with liver or kidney disease	ask a doctor

#### Other information

- store between 20° to 25°C (68° to 77°F)
- do not use if carton is opened, or if printed neckband is broken or missing
- see bottom panel for lot number and expiration date

#### Inactive ingredients

anhydrous citric acid, artificial bubble gum flavor, propylene glycol, purified water, sodium benzoate, sorbitol solution, sucralose

#### **Questions or comments?**

1-800-719-9260

#### Package/Label Principal Display Panel

2 Yrs. & Older

Children's All Day Allergy

Cetirizine Hydrochloride Oral Solution 1 mg/mL

**Antihistamine** 

24 Hour Relief of:

Sneezing

Itchy, Watery Eyes

Runny Nose

Itchy Throat or Nose

Indoor & Outdoor Allergies

Dye-Free

Sugar-Free

Dosing Cup Included

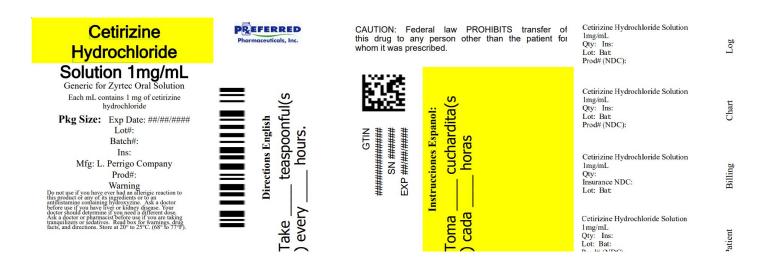
**Bubble Gum Flavor** 

Compare to active ingredient of Children's Zyrtec®

100% SATISFACTION GUARANTEED

Relabeled By: Preferred Pharmaceuticals Inc.

4 FL OZ (118 mL)



# GOOD SENSE CHILDRENS ALL DAY ALLERGY cetirizine hcl solution Product Information Product Type HUMAN OTC DRUG Route of Administration HUMAN OTC DRUG ORAL

# Active Ingredient/Active Moiety Ingredient Name Basis of Strength CETIRIZINE HYDROCHLORIDE (UNII: 640047KTOA) (CETIRIZINE UNII:YO7261ME24) CETIRIZINE HYDROCHLORIDE 5 mg in 5 mL

Inactive Ingredients		
Ingredient Name	Strength	
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)		
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)		
WATER (UNII: 059QF0KO0R)		
SODIUM BENZOATE (UNII: OJ245FE5EU)		
SORBITOL (UNII: 506T60A25R)		
SUCRALOSE (UNII: 96K6UQ3ZD4)		

Product Characteristics			
Color	YELLOW (Clear to light yellow)	Score	
Shape		Size	
Flavor	BUBBLE GUM	Imprint Code	
Contains			

P	Packaging			
#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788- 8803-1	1 in 1 CARTON	01/20/2025	
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
ANDA	ANDA204226	01/20/2025	

## Labeler - Preferred Pharmaceuticals Inc. (791119022)

## Registrant - Preferred Pharmaceuticals Inc. (791119022)

Establishment				
Name	Address	ID/FEI	<b>Business Operations</b>	
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-8803)	

Revised: 1/2025 Preferred Pharmaceuticals Inc.