

ASSURED MAXIMUM STRENGTH MUCUS RELIEF- acetaminophen, dextromethorphan hydrobromide, guaifenesin, and phenylephrine hydrochloride capsule, gelatin coated
SPIRIT PHARMACEUTICALS LLC

Disclaimer: Most OTC drugs are not reviewed and approved by FDA, however they may be marketed if they comply with applicable regulations and policies. FDA has not evaluated whether this product complies.

ASSURED™ MAXIMUM STRENGTH MUCUS RELIEF

Drug Facts

<i>Active ingredients (in each softgel)</i>	<i>Purpose</i>
Acetaminophen 325 mg	Pain reliever/fever reducer
Dextromethorphan HBr 10 mg	Cough suppressant
Guaifenesin 200 mg	Expectorant
Phenylephrine HCl 5 mg	Nasal decongestant

Uses

- temporarily relieves these common cold and flu symptoms:
 - nasal congestion
 - headache
 - cough
 - minor aches and pains
 - sore throat
- temporarily reduces fever
- helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus and make coughs more productive

Warnings

Liver warning

This product contains acetaminophen. Severe liver damage may occur if you take

- more than 12 liquid gels in 24 hours, which is the maximum daily amount
- with other drugs containing acetaminophen
- 3 or more alcoholic drinks daily while using this product

Allergy alert

Acetaminophen may cause severe skin reactions. Symptoms may include:

- skin reddening
- blisters
- rash

If a skin reaction occurs, stop use and seek medical help right away.

Sore throat warning

If sore throat is severe, persists for more than 2 days, is accompanied or followed by fever, headache, rash, nausea, or vomiting, consult a doctor promptly.

Do not use

- with any other drug containing acetaminophen (prescription or nonprescription). If you are not sure whether a drug contains acetaminophen ask a doctor or pharmacist.
- 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

- liver disease
- heart disease
- diabetes
- high blood pressure
- thyroid disease
- trouble urinating due to an enlarged prostate gland
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema
- cough that occurs with too much phlegm (mucus)

Ask a doctor or pharmacist before use if you are taking the blood thinning drug warfarin.

When using this product, do not use more than directed.

Stop use and ask a doctor if

- nervousness, dizziness, or sleeplessness occur
- pain, nasal congestion, or cough gets worse or lasts more than 7 days
- fever gets worse or lasts more than 3 days
- redness or swelling is present
- new symptoms occur
- cough comes back or occurs with rash or 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.

Overdose warning

Taking more than the recommended dose (overdose) may cause liver damage. In case of overdose, get medical help or contact a Poison Control Center right away. Quick medical attention is critical for adults as well as for children even if you do not notice any signs or symptoms.

Directions

- **do not take more than directed (see Overdose warning)**
- do not take more than 12 liquid gels in any 24-hour period
- adults and children 12 years of age and older: take 2 liquid gels every 4 hours
- children under 12 years of age: do not use

Other information

- store between 20-25°C (68-77°F)
- avoid excessive heat

Inactive ingredients

FD&C yellow no. 6, FD&C red no.40, gelatin, glycerin, polyethylene glycol-400, povidone, propylene

glycol, sorbitol sorbitan solution, titanium dioxide, purified water

Questions or Comments?

Call 1-888-333-9792

PRINCIPAL DISPLAY PANEL - 10 Softgel Blister Pack Carton

COMPARE TO ACTIVE INGREDIENTS IN
MUCINEX[®] FAST-MAX[®] COLD, FLU & SORE THROAT*

ASSURED[™]

MAXIMUM STRENGTH

Mucus Relief

- **Acetaminophen 325 mg**
 - *Pain Reliever / Fever Reducer*
- **Dextromethorphan HBr 10 mg** - *Cough Suppressant*
- **Guaifenesin 200 mg** - *Expectorant*
- **Phenylephrine HCl 5 mg** - *Nasal Decongestant*

*Thins & Loosens Mucus,
Nasal Congestion,
Coughing, Fever & Headache
Non-Drowsy*

Actual Size

AGES 12+
10 softgels

ASSURED[®]

MAXIMUM STRENGTH

Mucus Relief

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Mucus Relief



ORIG 04/16

LOT NO:
EXP DATE:

A 7 1 7 3



C639277337146

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Drug Facts (continued)

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Call 1-888-333-9792

THIS PRODUCT IS PACKAGED IN A CHILD RESISTANT AND TAMPER EVIDENT PACKAGE. USE ONLY IF BLISTERS ARE INTACT

*This product is not manufactured or distributed by Reckitt Benckiser, owner of the registered trademark Mucinex® Fast Max®.

PARENTS:
Learn about teen medicine abuse
www.StopMedicineAbuse.org

ASSURED MAXIMUM STRENGTH MUCUS RELIEF			
acetaminophen, dextromethorphan hydrobromide, guaifenesin, and phenylephrine hydrochloride capsule, gelatin coated			
Product Information			
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68210-0111
Route of Administration	ORAL		
Active Ingredient/Active Moiety			

Ingredient Name	Basis of Strength	Strength
ACETAMINOPHEN (UNII: 362O9ITL9D) (ACETAMINOPHEN - UNII:362O9ITL9D)	ACETAMINOPHEN	325 mg
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	10 mg
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	200 mg
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII:1WS297W6MV)	PHENYLEPHRINE HYDROCHLORIDE	5 mg

Inactive Ingredients

Ingredient Name	Strength
FD&C RED NO. 40 (UNII: WZB9127XOA)	
FD&C YELLOW NO. 6 (UNII: H77VEI93A8)	
GELATIN (UNII: 2G86QN327L)	
GLYCERIN (UNII: PDC6A3C0OX)	
POLYETHYLENE GLYCOL 400 (UNII: B697894SGQ)	
POVIDONE K30 (UNII: U725QWY32X)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SORBITOL (UNII: 506T60A25R)	
TITANIUM DIOXIDE (UNII: 15FIX9V2JP)	

Product Characteristics

Color	ORANGE (LIGHT)	Score	no score
Shape	OVAL (oblong)	Size	21mm
Flavor		Imprint Code	341
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68210-0111-1	1 in 1 CARTON	08/12/2016	
1		10 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC MONOGRAPH FINAL	part341	08/12/2016	

Labeler - SPIRIT PHARMACEUTICALS LLC (179621011)

Establishment

Name	Address	ID/FEI	Business Operations
MEDGEL PRIVATE LTD		872779008	MANUFACTURE(68210-0111)

