MAXIMUM STRENGTH MUCUS RELIEF- guaifenesin tablet, extended release KROGER COMPANY

Kroger Guaifenesin Extended Release Tablets 1200 mg

Drug Facts

Active ingredient (in each extended-release tablet)

Guaifenesin, USP 1200 mg

Purpose

Expectorant

Uses

 helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus and make coughs more productive

Warnings

Do not use

• for children under 12 years of age

Ask a doctor before use if you have

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

Stop use and ask a doctor if

 cough lasts more than 7 days, comes back, or occurs with fever, rash, or persistent headache. These could be signs of a serious illness.

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 (1-800-222-1222) right away.

Directions

- do not crush, chew, or break extended-release tablet
- take with a full glass of water
- this product can be administered without regard for the timing of meals
- adults and children 12 years of age and over: 1 extended-release tablet every 12 hours. Do not exceed 2 extended-release tablets in 24 hours.
- children under 12 years of age: do not use

Other information

store at 20-25°C (68-77°F)

Inactive ingredients colloidal silicon dioxide, copovidone, FD&C blue no. 1 aluminum lake, hypromellose, magnesium stearate, maltodextrin, microcrystalline cellulose,

povidone (K-30), sodium starch glycolate, stearic acid.

Questions or comments? Call 1-800-632-6900



MAXIMUM STRENGTH MUCUS RELIEF

quaifenesin tablet, extended release

Product information				
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:41226-724	

Route of Administration ORAL

Droduct Informatio

Ingredient Name	Basis of Strength	Strength
GUAIFENESIN (UNII: 495W7451VO) (GUAIFENESIN - UNII:495W7451VO)	GUAIFENESIN	1200 ma

Inactive Ingredients		
Ingredient Name	Strength	
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)		
MICROCRYSTALLINE CELLULOSE 102 (UNII: PNR0YF693Y)		
STEARIC ACID (HNIII: 4ELV77.65AP)		

FD&C BLUE NO. 1 ALUMINUM LAKE (UNII: J9EQA3S2JM)	
SODIUM STARCH GLYCOLATE TYPE A (UNII: H8AV0SQX4D)	
MALTODEXTRIN (UNII: 7CVR7L4A2D)	
POVIDONE K30 (UNII: U725QWY32X)	
SILICON DIOXIDE (UNII: ETJ7Z6XBU4)	
COPOVIDONE K25-31 (UNII: D9C330MD8B)	
MAGNESIUM STEARATE (UNII: 70097M6I30)	

Product Characteristics			
Color	white (Blue and White)	Score	no score
Shape	CAPSULE	Size	22mm
Flavor		Imprint Code	41
Contains			

P	Packaging			
#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:41226- 724-89	1 in 1 CARTON	05/27/2024	
1		14 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information			
Marketing Application Number or Monograph Category Citation		Marketing Start Marketing En Date Date	
ANDA	ANDA217780	05/27/2024	

Labeler - KROGER COMPANY (006999528)

Registrant - TIME CAP LABORATORIES, INC. (037052099)

Establishment				
Name	Address	ID/FEI	Business Operations	
MARKSANS PHARMA LIMITED		925822975	manufacture(41226-724)	

Revised: 5/2024 KROGER COMPANY