MEIJER MUCUS RELIEF DM MAXIMUM STRENGTH- dextromethorphan hbr and guaifenesin solution
MEIJER, INC.

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.

Meijer 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# 41250-748-06

*Compare to the active ingredients in Maximum Strength Mucinex® Fast-Max® DM max

Mucus Relief DM

DEXTROMETHORPHAN HBr/COUGH SUPPRESSANT
GUAIFENESIN/ EXPECTORANT

Maximum Strength

- **Controls Cough**
- **Relieves Chest Congestion**
- **Thins & Loosens Mucus**
- **4 Hour Dosing**

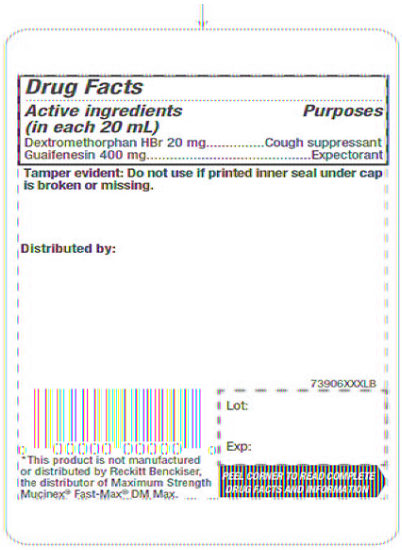
For Ages 12+

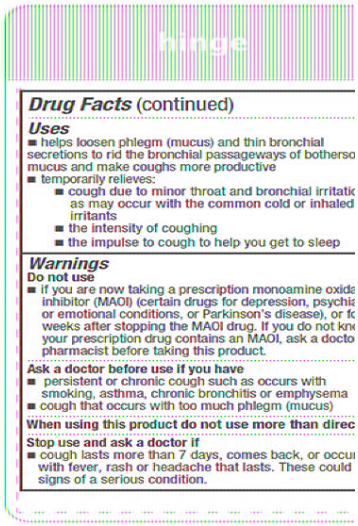
6 FL OZ (180 mL)

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® Fast -Max® DM Max.





MEIJER MUCUS RELIEF DM MAXIMUM STRENGTH

dextromethorphan hbr and guaifenesin solution

Product Information			
Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:41250-748
Route of Administration	ORAL		

Active Ingredient/Active Moiety		
Ingredient Name	**Basis of Strength**	**Strength**
dextromethorphan hydrobromide (UNII: 9D2RTI9KYH) (dextromethorphan - UNII:7355X3ROTS)	dextromethorphan hydrobromide	20 mg in 20 mL
guaifenesin (UNII: 495W7451VQ) (guaifenesin - UNII:495W7451VQ)	guaifenesin	400 mg in 20 mL

Inactive Ingredients	
Ingredient Name	**Strength**
anhydrous citric acid (UNII: XF417D3PSL)	
edetate disodium (UNII: 7FLD91C86K)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
FD&C red No. 40 (UNII: WZB9127XOA)	
POTASSIUM CITRATE (UNII: EE90ONI6FF)	
propylene glycol (UNII: 6DC9Q167V3)	

propyl gallate (UNII: 8D4SNN7V92)	
water (UNII: 059QF0KO0R)	
sodium benzoate (UNII: OJ245FE5EU)	
sorbitol (UNII: 506T60A25R)	
sucralose (UNII: 96K6UQ3ZD4)	
xanthan gum (UNII: TTV12P4NEE)	

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:41250-748-06	180 mL in 1 BOTTLE; Type 0: Not a Combination Product	04/20/2020	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC monograph final	part341	04/20/2020	

Labeler - MEIJER, INC. (006959555)

Revised: 5/2020 MEIJER, INC.