

ANTI-DIARRHEAL- loperamide hcl tablet
Preferred Pharmaceuticals Inc.

Active ingredient(in each caplet)

Loperamide HCl 2 mg

Purpose

Anti-diarrheal

Uses

- controls symptoms of diarrhea, including Travelers' Diarrhea

Warnings

Allergy alert: Do not use if you have ever had a rash or other allergic reaction to loperamide HCl

Do not use

- if you have bloody or black stool

Ask a doctor before use if you have

- fever
- mucus present in your stool
- a history of liver disease

Ask a doctor or pharmacist before use if you are

- taking antibiotics

When using this product

- tiredness, drowsiness or dizziness may occur. Be careful when driving or operating machinery.

Stop use and ask a doctor if

- diarrhea lasts for more than 2 days
- symptoms get worse
- you get abdominal swelling
- these may 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.

Directions

drink plenty of clear fluids to help prevent dehydration, which may accompany diarrhea

- do not exceed recommended dose
- Adults and children 12 years and over: 2 caplets after the first loose bowel movement; 1 caplet after each subsequent loose bowel movement; do not exceed 4 caplets in 24 hours
- Children under 12 years: Ask a doctor

Other Information

- **TAMPER EVIDENT: Do not use if imprinted seal under cap is missing or broken.**
- store at 20°C-25°C (68°F-77°F)

Inactive Ingredients

cellulose, corn starch, D C Yellow #10, dicalcium phosphate, FD C Blue #1, magnesium stearate, silica gel

Questions or comments? call 1-800-540-3765

package Label

NDC 68788-7369-2

GERICARE

Anti-Diarrheal

Loperamide HCl

Controls the symptoms of diarrhea

*compare to the active ingredient in imodium A-D

24 caplets

2 mg each

Tamper Evident: Do not use if imprinted seal under cap is broken or missing

Relabeled By: Preferred Pharmaceuticals Inc.

Loperamide HCL Tablets, USP 2mg

Generic for Imodium

Each caplet contains: Loperamide HCL, USP 2 mg

Pkg Size: Exp Date:

Lot#:

Batch#:

Ins:

Mfg: Geri-Care, Brooklyn, New York

Prod#:

Warning:

Store at controlled room temperature 20°-25°C (68°-77°F). Keep this and all medications out of the reach of children. Rx Only. Ask a doctor before use if you are taking antibiotics. Do not use if imprinted seal under cap is broken or missing. Do not use if you have ever had a rash or other allergic reaction to loperamide HCL. Do not use if you have bloody or black stool. Caplet is capsule shaped, green, scored and imprinted with 44375

PREFERRED
Pharmaceuticals, Inc. Analytix, Co. 828P

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

Loperamide HCL Tablets, USP 2mg

Qty: Ins:
Lot#: Bat#:

Prod# (NDC):

Loperamide HCL Tablets, USP 2mg

Qty: Ins:

Lot#: Bat#:

Prod# (NDC):

Loperamide HCL Tablets, USP 2mg

Qty:

Insurance NDC:

Lot#: Bat#:

Loperamide HCL Tablets, USP 2mg

Qty: Ins:

Lot#: Bat#:

Prod# (NDC):

Log

Chart

Billing

Patient



Directions English

May cause drowsiness.
Take ___ tablet(s)
every ___ hours.



Instrucciones Espanol:

Puede causar
sommolencia.
Toma ___ tableta(s)
cada ___ horas.

ANTI-DIARRHEAL

loperamide hcl tablet

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68788-7369(NDC:57896-381)
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
LOPERAMIDE HYDROCHLORIDE (UNII: 77TI35393C) (LOPERAMIDE - UNII:6X9OC3H4II)	LOPERAMIDE HYDROCHLORIDE	2 mg

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS DIBASIC CALCIUM PHOSPHATE (UNII: L11K75P92J)	
MICROCRYSTALLINE CELLULOSE (UNII: OP1R32D61U)	
STARCH, CORN (UNII: O8232NY3SJ)	
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
MAGNESIUM STEARATE (UNII: 70097M6I30)	
SILICON DIOXIDE (UNII: ETJ7Z6XBU4)	

Product Characteristics

Color	green (light green)	Score	2 pieces
Shape	CAPSULE	Size	7mm
Flavor		Imprint Code	44375
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-7369-2	24 in 1 BOTTLE; Type 0: Not a Combination Product	08/25/2016	
2	NDC:68788-7369-1	12 in 1 BOTTLE; Type 0: Not a Combination Product	06/21/2017	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA076497	08/25/2016	

Labeler - Preferred Pharmaceuticals Inc. (791119022)

Registrant - Preferred Pharmaceuticals Inc. (791119022)

Establishment

Name	Address	ID/FEI	Business Operations
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-7369)

Revised: 7/2023

Preferred Pharmaceuticals Inc.