

**CVS CHEST CONGESTION RELIEF DM- dextromethorphan hydrobromide /
guaifenesin tablet**

Reese Pharmaceutical Co

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.

Drug Facts CVS Congestion Relief DM

Active ingredient - (per tablet)

Dextromethorphan Hydrobromide 20mg Cough Suppressant

Guaifenesin 400mg Expectorant

Ask doctor before use if you have

persistent or chronic cough, such as occurs with smoking, asthma, bronchitis or emphysema
cough is accompanied by excessive phlegm (mucous)

Stop use and ask doctor if

Symptoms are accompanied by fever, rash or persistent headache

cough persists for more than 1 week or tends to recur

A persistent cough may be a sign of a serious condition

Do not use if you are now taking a prescription monoamine oxidase (inhibitor-MAIO)

Certain drugs for depression, psychiatric or emotional conditions or Parkinson's disease
or for 2 weeks after stopping MAIO drug, If you do not know if your prescription drug contains
an MAIO, ask your doctor or pharmacist before using this product.

Keep out of reach of children, In case of overdose, get medical help or contact a Poison Center
immediately

If pregnant or breastfeeding, ask a health professional before use.

magnesium stearate, microcrystalline cellulose,
colloidal silicon dioxide, (co) povidone, dicalcium
phosphate, maltodextrin, sodium starch glycolate, stearic acid

Directions

• Adults and children 12 years of age and over:

take 1 tablet every 4 hours as needed

• Children 6 to 10 under 12 years of age: take 1/2 tablet every 4 hours as needed

• Children under 6 years of age: consult a doctor

Do not exceed 6 doses in a 24 hour period or as directed by a doctor

Other information store at 15°- 30° C (59°- 86°F) Rev 10/U9 RCCF

Uses. temporarily relieves cough due to minor throat and bronchial irritation
as may occur with a common cold • helps loosen phlegm (mucus) and thin
bronchial secretions to rid the bronchial passageways of bothersome mucus

• helps make coughs more productive

Purpose

Cough Suppressant

Expectorant

Do not use if you are now taking a prescription monoamine oxidase (inhiMor~MAIO)

Certain drugs for depression, psychiatric or emotional conditioners or Parkinson's disease

or for 2 weeks after stopping MAIO drug, If you do not know if your prescription drug contains an MAIO, ask your doctor or pharmacist before using this product.



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CVS CHEST CONGESTION RELIEF DM

dextromethorphan hydrobromide / guaifenesin tablet

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:10956-003
Route of Administration	ORAL		

Caution: do not use if imprinted seal under cap is broken or missing

Drug Facts

Active ingredients (per tablet)
 Dextromethorphan HBr 20mg.....Expectorant
 Guaifenesin 400mg.....Expectorant

Purpose
 Cough suppressant

Uses ■ temporarily relieves cough due to minor throat and bronchial irritation as may occur with a common cold ■ helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus ■ helps make coughs more productive

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 using this product.

Ask a doctor before use if you have

■ a recent fluoro use if you have
 ■ a cough, such as occurs with smoking, asthma, chronic bronchitis or emphysema by excessive phlegm (mucus)
 ■ cough is accompanied by fever, rash or persistent headache
 ■ symptoms are accompanied by fever, rash or persistent headache
 ■ cough persists for more than 1 week or tends to recur
 ■ A persistent cough may be a sign 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 immediately.

Directions

■ Adults and children 12 years of age and over: take 1 tablet every 4 hours as needed
 ■ Children 6 to under 12 years of age: take 1/2 tablet every 4 hours as needed
 ■ Children under 6 years of age: consult a doctor
 Do not exceed 6 uses in a 24 hour period or as directed by a doctor

Other information

store at 15°-30° C (59°-86°F)

Inactive ingredients

magnesium stearate, microcrystalline cellulose. May also contain (colloidal) silicon dioxide, (co) povidone, dicalcium phosphate, maltodextrin, sodium starch glycolate, stearic acid.

REV 8/08 RCCVS



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 www.cvs.com
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Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg
Guaifenesin (UNII: 495W7451VQ) (Guaifenesin - UNII:495W7451VQ)	Guaifenesin	400 mg

Inactive Ingredients

Ingredient Name	Strength
MAGNESIUM STEARATE (UNII: 70097M6I30)	
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)	
SILICON DIOXIDE, COLLOIDAL (UNII: ETJ7Z6XBU4)	
COPOVIDONE (UNII: D9C330MD8B)	
MALTODEXTRIN (UNII: 7CVR7L4A2D)	
STEARIC ACID (UNII: 4ELV7Z65AP)	

Product Characteristics

Color	white	Score	2 pieces
Shape	OVAL	Size	17mm
Flavor		Imprint Code	PH073
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:10956-003-01	1 in 1 CARTON		
1	NDC:10956-003-60	60 in 1 BOTTLE, PLASTIC		
2	NDC:10956-003-01	1 in 1 CARTON		
2	NDC:10956-003-90	90 in 1 BOTTLE, PLASTIC		
3	NDC:10956-003-01	1 in 1 CARTON		
3	NDC:10956-003-30	30 in 1 BOTTLE, PLASTIC		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC monograph final	part341	12/07/2009	

Labeler - Reese Pharmaceutical Co (004172052)**Registrant** - Reese Pharmaceutical Co (004172052)**Establishment**

Name	Address	ID/FEI	Business Operations
Reese Pharmaceutical Co		004172052	relabel, repack

Establishment			
Name	Address	ID/FEI	Business Operations
Pharbest		557054835	manufacture

Revised: 9/2010

Reese Pharmaceutical Co