MUCUS RELIEF DM EXTENDED RELEASE CAPLETS- guaifenesin, dextromethorphan hbr tablet ATLANTIC BIOLOGICALS CORP.

Mucus Relief DM Extended Release

Active ingredients (in each extended-release tablet)

Dextromethorphan HBr 30 mg

Guaifenesin 600 mg

Purpose

Cough Suppressant

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

Description

Mucus Relief DM ER

Guaifenesin 600 mg (Expectorant)

Dextromethorphan HBr 30 mg (Cough Suppressant)

- 12-hour Relief
- Controls Cough
- Thins & Loosens Mucus

Extended-release tablets, compared to the active ingredients in Mucinex DM.

TAMPER EVIDENT: DO NOT USE IF THE BLISTER UNIT IS TORN, BROKEN, OR SHOWS ANY SIGNS OF TAMPERING

Warnings

Do not use

- for children under12 years of age
- 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 accompanied by 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. 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 (1-800-222-1222).

Directions

- do not crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regards for timing of meals
- adults and children 12 years of age and older: 1 or 2 tablet every 12 hours; not more than 4 tablets in 24 hours
- children under 12 years of age: do not use

Other information

store between 20º to 25ºC (68º to 77ºF)

Inactive ingredients

carbomer, colloidal silicon dioxide, D&Cyellow #10 aluminum lake, hypromellose, lactose monohydrate, magnesium stearate, microcrystalline cellulose, povidone, talc

Questions or comments?

DISTRIBUTED BY:

ATLANTIC BIOLOGICALS CORP.

20101 NE 16TH PL

MIAMI, FL 33179

Call1-800-509-7592

Monday-Friday 9 AM - 5 PM EST

Package Label

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17856-1162-01 Mucinex DM (Guaifenesin/ Dextromethorphan HBr) DELIVERS 30-600mg/1 ER TAB

See package insert for indications and dosage schedule

Helps loosen phlegm (mucus) and thin bronchital secretions to rid the bronchital passageways of bothersome mucus and makes coughs more productive. DO NOT Break, Chew, or Crush tablet. Store at 20°-25°C (68°-77°F) **Keep this and all Medications out of the reach of children**

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17856-1162-01 Dosage 30-600mg/1 TAB

Mucus Relief (Guaifenesin/ Dextromethorphan HBr)



GTIN: 00317856116213 S/N: XXXXXXXXXXXXX Exp: 03/25/25 Lot: XXXXXXXXXXX

Qty: 100 ER TABLETS

OTC

Distributed by: Atlantic Biologicals Corp. Miami, FL 33179

Rev.08/21

Call to Reorder:

MUCUS RELIEF DM EXTENDED RELEASE CAPLETS

guaifenesin, dextromethorphan hbr tablet

Product Information								
Product Type	HUMAN OTC DRUG	Item Code (Source) NDC:17856-1162(NDC:05		0536-1161)				
Route of Administration	ORAL							
Active Ingredient/Active	Mojety							
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)				Strength				
GUAIFENESIN (UNII: 49500/4510Q)	GUAIFENESIN	600 mg						
DEXTROMETHORPHAN HYDROBI (DEXTROMETHORPHAN - UNII:7355X	DEXTROMETHORPHAN HYDROBROMIDE	30 mg						

Inactive Ingre	edients					
		Ingre	dient Name			Strength
SILICON DIOXIDE	(UNII: ETJ7Z	6XBU4)				
MAGNESIUM STE	ARATE (UNII:	70097M6I30)				
CARBOMER 934 (UNII: Z135W	T9208)				
CELLULOSE, MIC	ROCRYSTAL	LINE (UNII: O	P1R32D61U)			
POVIDONE (UNII: F	Z 989GH94E)				
D&C YELLOW NO	. 10 (UNII: 3	5SW5USQ3G)				
HYPROMELLOSE,	UNSPECIFI	ED (UNII: 3NX	W29V3WO)			
LACTOSE MONOH	IYDRATE (U	NII: EWQ57Q8	I5X)			
TALC (UNII: 7SEV7	J4R1U)					
Product Char	acteristi					
Color		yellow		Score no		
Shape		OVAL		Size 16		
Flavor			Imprint Code	Imprint Code		
Contains						
Packaging						
# Item Code		Package D	Description	Marketing Star Date	t I	Marketing End Date
1 NDC:17856- 1162-1	100 in 1 CARTON			03/17/2025		
1	1 in 1 BLISTER PACK; Type 0: Not a Combination Product			on		
Markoting	Inform	ation				
Marketing	Application Number or Monograph Citation			h Marketing Sta	rt	Marketing End
Marketing Category	Аррі			Date		Date

Labeler - ATLANTIC BIOLOGICALS CORP. (047437707)

Registrant - ATLANTIC BIOLOGICALS CORP. (047437707)

Establishment								
Name	Address	ID/FEI	Business Operations					
Unit Dose Solutions		360804194	repack(17856-1162)					

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ATLANTIC BIOLOGICALS CORP.