MAXIMUM STRENGTH NIGHT TIME COLD AND FLU RELIEF- acetaminophen, dextromethorphan hydrobromide, doxylamine succinate, phenylephrine hydrochloride capsule, liquid filled

PuraCap Pharmaceutical LLC

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.

Maximum Strength Night Time Cold&Flu Relief

Drug Facts

Active ingredient (in each softgel)

Acetaminophen 325 mg

Dextromethorphan HBr 10 mg

Doxylamine succinate 6.25 mg

Phenylephrine HCl 5 mg

Purposes

Pain reliever/fever reducer

Cough suppressant

Antihistamine

Nasal decongestant

Uses

- temporarily relieves these common cold and flu symptoms:
- nasal congestion
- cough
- headache
- sore throat
- minor aches & pains
- runny nose
- sneezing
- temporarily reduces fever
- controls cough to help you get to sleep

Warnings

Liver warning

This product contains acetaminophen. Severe liver damage may occur if you take:

- more than 12 liquid gels in 24 hours, which is the maximum daily amount for this product
- with other drugs containing acetaminophen
- 3 or more alcoholic drinks every day while using this product

Allergy alert

Acetaminophen may cause severe skin reactions. Symptoms may include:

- skin reddening
- blisters
- rash

If a skin reaction occurs, stop use and seek medical help right away.

Sore throat warning

If sore throat is severe, persists for more than 2 days, is accompanied or followed by fever, headache, rash, nausea, or vomiting, consult a doctor promptly.

Do not use

- with any other drug containing acetaminophen (prescription or nonprescription). If you are not sure whether a drug contains acetaminophen, ask a doctor or pharmacist.
- 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

- liver disease
- heart disease
- high blood pressure
- thyroid disease
- diabetes
- trouble urinating due to an enlarged prostate gland
- glaucoma
- cough that occurs with too much phlegm (mucus)
- breathing problems such as emphysema or chronic bronchitis
- persistent or chronic cough such as occurs with smoking, asthma or emphysema

Ask a doctor or pharmacist before use if you are

- taking the blood thinning drug warfarin
- taking sedatives or tranquilizers

When using this product

- do not use more than directed
- excitability may occur, especially in children
- marked drowsiness may occur
- alcohol, sedatives, and tranquilizers may increase drowsiness
- avoid alcoholic drinks
- be careful when driving a motor vehicle or operating machinery

Stop use and ask a doctor if

- nervousness, dizziness, or sleeplessness occur
- pain, nasal congestion, or cough gets worse or lasts more than 7 days
- fever gets worse or lasts more than 3 days
- redness or swelling is present
- new symptoms occur
- cough comes back, or occurs with rash or 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.

Overdose warning

Taking more than the recommended dose (overdose) may cause liver damage. In case of overdose, get medical help or contact a Poison Control Center right away. Quick medical attention is critical for adults as well as for children even if you do not notice any signs or symptoms.

Directions

- do not take more than directed (see Overdose warning)
- do not take more than 12 liquid gels in any 24-hour period
- adults and children 12 years of age and older: take 2 liquid gels every 4 hours
- children under 12 years of age: do not use

Other information

- store between 20-25°C (68-77°F)
- avoid excessive heat

Inactive ingredients

D&C yellow #10, FD&C blue #1, gelatin, glycerin, polyethylene glycol, povidone, propylene glycol, purified water, sorbitol special, and white edible ink

Questions or Comments?

Call toll free: 1-888-309-9030

Principal Display Panel - Carton Label

Maximum Strength Night Time Cold & Flu Relief 16Softgels

NDC 51013-171-14



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acetaminophen, dextromethorphan hydrobromide, doxylamine succinate, phenylephrine hydrochloride capsule, liquid filled

Product Information			
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:51013-171
Route of Administration	ORAL		

Active Ingredient/Active Moiety			
Ingredient Name	Basis of Strength	Strength	
ACETAMINO PHEN (UNII: 36209 ITL9D) (ACETAMINO PHEN - UNII: 36209 ITL9D)	ACETAMINOPHEN	325 mg	
DEXTRO METHO RPHAN HYDRO BRO MIDE (UNII: 9 D2RTI9 KYH) (DEXTRO METHO RPHAN - UNII: 7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	10 mg	
DOXYLAMINE SUCCINATE (UNII: V9BI9B5YI2) (DOXYLAMINE - UNII:95QB77JKPL)	DOXYLAMINE SUCCINATE	6.25 mg	
PHENYLEPHRINE HYDRO CHLO RIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII:1WS297W6MV)	PHENYLEPHRINE	5 mg	

Inactive Ingredients		
Ingredient Name	Strength	
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)		
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)		
GELATIN (UNII: 2G86QN327L)		
GLYCERIN (UNII: PDC6A3C0OX)		
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WJQ0SDW1A)		
PO VIDO NE (UNII: FZ989 GH94E)		
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)		
WATER (UNII: 059QF0KO0R)		
SORBITOL (UNII: 506T60A25R)		

Product Characteristics			
Color	green (clear)	Score	no score
Shape	capsule (oblong)	Size	20 mm
Flavor		Imprint Code	PC22
Contains			

l	Packaging				
ı	# Item Code	Package Description	Marketing Start Date	Marketing End Date	
	1 NDC:51013-171-14	2 in 1 CARTON	06/10/2016		
	1	8 in 1 BLISTER PACK; Type 0: Not a Combination Product			

Marketing Information			
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC monograph final	part341	06/10/2016	

Labeler - PuraCap Pharmaceutical LLC (962106329)

Establishment			
Name	Address	ID/FEI	Business Operations
Humanwell PuraCap Pharmaceutical (Wuhan) Co., Ltd.		421293287	manufacture(51013-171), analysis(51013-171)

Revised: 11/2019 PuraCap Pharmaceutical LLC