# GUAIFENESIN AND DEXTROMETHORPHAN HYDROBROMIDE- guaifenes in and dextromethorphan hydrobromide tablet, extended release KROGER COMPANY

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# Guaifenes in and Dextromethorphan Hydrobromide

## **Drug Facts**

Active ingredients (in each extended-release tablet)	Purposes
Dextromethorphan HBr 60 mg	Cough suppressant
Guaifenesin 1200 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

- for children under 12 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 illness.

**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 regard for timing of meals
- adults and children 12 years and older: 1 tablet every 12 hours; not more than 2 tablets in 24 hours
- children under 12 years of age: do not use

#### Other information

- Tamper evident: Do not use if carton is open or if printed seal on blister is broken or missing.
- store between 20-25°C (68-77°F)

# **Inactive ingredients**

carbomer homopolymer type B; hypromellose, USP; magnesium stearate, NF; microcrystalline cellulose, NF; sodium starch glycolate, NF

#### Questions or comments?

1-800-632-6900

You may also report side effects to this phone number.

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## PRINCIPAL DISPLAY PANEL - 14 Tablet Blister Pack Carton

COMPARE TO the active ingredients of MAXIMUM STRENGTH MUCINEX® DM \*See back panel

NDC 30142-706-14

Kroger<sub>®</sub>

OUR PHARMACIST RECOMMENDED

Maximum Strength

Mucus Relief ER DM - Max

Guaifenesin 1200 mg &

Dextromethorphan HBr 60 mg

Extended-Release

**Tablets** 

EXPECTORANT & COUGH SUPPRESSANT

# HOUR

- Controls Cough
- Thins & Loosens Mucus
- Immediate & Extended Release

actual size

14 EXTENDED-RELEASE TABLETS



Maximum Strength

# Mucus Relief ER DM-Max

**EXPECTORANT & COUGH SUPPRESSANT** 



**COMPARE TO the active ingredients of** MAXIMUM STRENGTH MUCINEX® DM \*See back panel

NDC 30142-706-14





**Maximum Strength** 

**Mucus Relief** ER DM-Max

Guaifenesin 1200 mg & Dextromethorphan HBr 60 mg Extended-Release **Tablets** 

**EXPECTORANT &** COUGH SUPPRESSANT

> · Controls Cough Thins & Loosens Mucus Immediate & Extended Release

**HOUR** 

actual size



www.StopMedicineAbuse.org PARENTS

1260

NON VARNISH



Maximum Strength

ucus Relief ER DM-Max

**Purposes** 

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KEEP THE CARTON. IT CONTAINS IMPORTANT INFORMATION. SEE END PANEL FOR **EXPIRATION DATE.** 





#### GUAIFENESIN AND DEXTROMETHORPHAN HYDROBROMIDE

Product Information				
Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:30142-706	
Route of Administration	ORAL			

Active Ingredient/Active Moiety			
Ingredient Name	Basis of Strength	Strength	
Guaifenesin (UNII: 495W7451VQ) (Guaifenesin - UNII:495W7451VQ)	Guaifenesin	1200 mg	
<b>DEXTROMETHO RPHAN HYDRO BRO MIDE</b> (UNII: 9 D2RTI9 KYH) (DEXTROMETHO RPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg	

Inactive Ingredients				
Ingredient Name	Strength			
CARBOMER HOMOPOLYMER TYPE B (ALLYL PENTAERYTHRITOL CROSSLINKED) (UNII: HHT01ZNK31)				
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)				
MAGNESIUM STEARATE (UNII: 70097M6I30)				
MICRO CRYSTALLINE CELLULO SE (UNII: OP1R32D61U)				
SODIUM STARCH GLYCOLATE TYPE A POTATO (UNII: 5856J3G2A2)				

Product Characteristics			
Color	WHITE	Score	no score
Shape	OVAL	Size	22mm
Flavor		Imprint Code	xeunciM;1200;
Contains			

P	Packaging					
#	Item Code	Package Description	<b>Marketing Start Date</b>	Marketing End Date		
1	NDC:30142-706-14	1 in 1 CARTON	09/05/2017			
1		14 in 1 BLISTER PACK; Type 0: Not a Combination Product				
2	NDC:30142-706-28	2 in 1 CARTON	09/05/2017			
2		14 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
NDA	NDA021620	09/05/2017	

# Labeler - KROGER COMPANY (006999528)

Establishment			
Name	Address	ID/FEI	Business Operations
RECKITT BENCKISER HEALTHCARE INTERNATIONAL		220700262	MANUFACTURE(30142-706), LABEL(30142-

LTD 230700303 706)

Revised: 2/2020 KROGER COMPANY