

**MEMBERS MARK MUCUS RELIEF DM- dextromethorphan hbr,  
guaifenesin tablet, extended release  
Sam's West Inc**

-----  
**Sam's West, Inc. Mucus Relief DM Drug Facts**

**Active ingredients (in each extended-release tablet)**

Dextromethorphan HBr 60 mg

Guaifenesin 1200 mg

**Purposes**

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

**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**

- **each tablet contains:** magnesium 25 mg
- do not use if printed foil under cap is broken or missing
- store between 20-25°C (68-77°F)

**Inactive ingredients**

carbomer homopolymer type B, copovidone, D&C yellow #10 aluminum lake, hypromellose, magnesium hydroxide, magnesium stearate, microcrystalline cellulose, silicon dioxide

**Questions or comments?**

**1-800-809-0469**

**Package/Label Principal Display Panel**

Member's Mark™

COMPARE TO MAXIMUM STRENGTH MUCINEX® DM ACTIVE INGREDIENTS

MAXIMUM STRENGTH

Mucus Relief DM

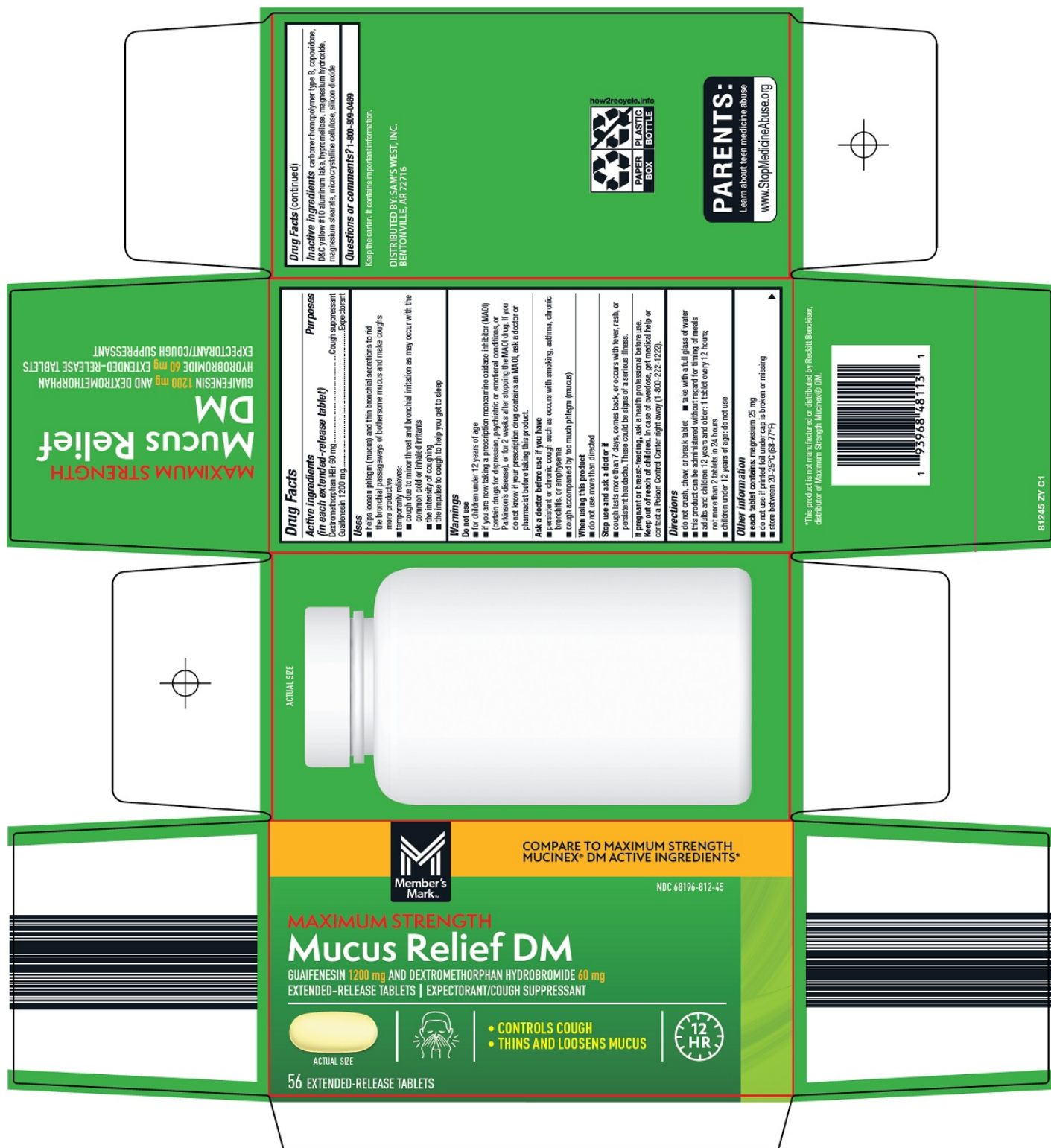
GUAIFENESIN 1200 mg AND DEXTROMETHORPHAN HYDROBROMIDE 60 mg  
EXTENDED-RELEASE TABLETS | EXPECTORANT/COUGH SUPPRESSANT

ACTUAL SIZE

- CONTROLS COUGH
- THINS AND LOOSENS MUCUS

12 HR

56 EXTENDED-RELEASE TABLETS



## MEMBERS MARK MUCUS RELIEF DM

dextromethorphan hbr, guaifenesin tablet, extended release

### Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68196-812
Route of Administration	ORAL		

Active Ingredient/Active Moiety		
Ingredient Name	Basis of Strength	Strength
<b>GUAIFENESIN</b> (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	1200 mg
<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg

Inactive Ingredients	
Ingredient Name	Strength
<b>CARBOMER HOMOPOLYMER TYPE B (ALLYL PENTAERYTHRITOL CROSSLINKED)</b> (UNII: HHT01ZNK31)	
<b>COPOVIDONE K25-31</b> (UNII: D9C330MD8B)	
<b>D&amp;C YELLOW NO. 10 ALUMINUM LAKE</b> (UNII: CQ3XH3DET6)	
<b>HYPROMELLOSE, UNSPECIFIED</b> (UNII: 3NXW29V3WO)	
<b>MAGNESIUM HYDROXIDE</b> (UNII: NBZ3QY004S)	
<b>MAGNESIUM STEARATE</b> (UNII: 70097M6I30)	
<b>MICROCRYSTALLINE CELLULOSE</b> (UNII: OP1R32D61U)	
<b>SILICON DIOXIDE</b> (UNII: ETJ7Z6XBU4)	

Product Characteristics			
<b>Color</b>	YELLOW (light)	<b>Score</b>	no score
<b>Shape</b>	OVAL	<b>Size</b>	22mm
<b>Flavor</b>		<b>Imprint Code</b>	L812
<b>Contains</b>			

Packaging				
#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68196-812-45	1 in 1 CARTON	04/03/2025	
1		56 in 1 BOTTLE; Type 0: Not a Combination Product		

Marketing Information			
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA207602	04/03/2025	

**Labeler** - Sam's West Inc (051957769)