PHENAZOPYRIDINE HYDROCHLORIDE - phenazopyridine tablet Carilion Materials Management

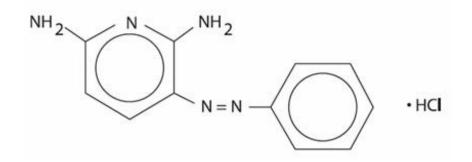
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PHENAZOPYRIDINE HYDROCHLORIDE TABLETS, USP Rx Only

Federal law prohibits dispensing without prescription. **CAUTION:**

DESCRIPTION

Phenazopyridine Hydrochloride is light or dark red to dark violet, odorless, slightly bitter, crystalline powder. It has a specific local analgesic effect in the urinary tract, promptly relieving burning and pain. It has the following structural formula:



Corn Starch, Croscarmellose Sodium, D&C Yellow #10 Aluminum Lake, FD&C Red #40 Aluminum Lake, FD&C Blue #1 Aluminum Lake, FD&C Yellow #6 Aluminum Lake, Microcrystalline Cellulose, Magnesium Stearate, Povidone, Polyvinyl Alcohol, Polyethylene Glycol, Pregelatinized Starch, Silicon Dioxide, Talc, and Titanium Dioxide. **Inactive Ingredients:**

CLINICAL PHARMACOLOGY

Phenazopyridine HCl is excreted in the urine where it exerts a topical analgesic effect on the mucosa of the urinary tract. This action helps to relieve pain, burning, urgency and frequency. The precise mechanism of action is not known.

The pharmacokinetic properties of Phenazopyridine HCl have not been determined. Phenazopyridine HCl is rapidly excreted by the kidneys, with as much as 66% of an oral dose being excreted unchanged in the urine.

INDICATIONS AND USAGE

Phenazopyridine HCl is indicated for the symptomatic relief of pain, burning, urgency, frequency, and other discomforts arising from irritation of the lower urinary tract mucosa caused by infection, trauma, surgery, endoscopic procedures, or the passage of sounds or catheters. The use of Phenazopyridine HCl for relief of symptoms should not delay definitive diagnosis and treatment of causative conditions. Because it provides only symptomatic relief, prompt appropriate treatment of the cause of pain must be instituted and Phenazopyridine HCl should be discontinued when symptoms are controlled.

The analgesic action may reduce or eliminate the need for systemic analgesics or narcotics. It is,

however, compatible with antibacterial therapy and can help to relieve pain and discomfort during the interval before antibacterial therapy controls the infection. Treatment of a urinary tract infection with Phenazopyridine HCl should not exceed 2 days because there is a lack of evidence that the combined administration of Phenazopyridine HCl and an antibacterial provides greater benefit than administration of the antibacterial alone after 2 days. (See section.) DOSAGE AND ADMINISTRATION

CONTRAINDICATIONS

Phenazopyridine HCl should not be used in patients who have previously exhibited hypersensitivity to it. The use of Phenazopyridine HCl is contraindicated in patients with renal insufficiency.

ADVERSE REACTIONS

Headache, rash, pruritus and occasional gastrointestinal disturbance. An anaphylactoid-like reaction has been described. Methemoglobinemia, hemolytic anemia, renal and hepatic toxicity have been reported, usually at overdosage levels (see). OVERDOSAGE Section

PRECAUTIONS

A yellowish tinge of the skin or sclera may indicate accumulation due to impaired renal excretion and the need to discontinue therapy. The decline in renal function associated with advanced age should be kept in mind. **General:**

NOTE: Patients should be informed that Phenazopyridine HCl produces a reddish-orange discoloration of the urine and may stain fabric. Staining of contact lenses has been reported.

Due to its properties as an azo dye, Phenazopyridine HCl may interfere with urinalysis based on spectrometry or color reactions. **Laboratory Test Interaction:**

Long-term administration of Phenazopyridine HCl has induced neoplasia in rats (large intestine) and mice (liver). **Carcinogenesis**, **Mutagenesis**, **Impairment of Fertility:**

Although no association between Phenazopyridine HCl and human neoplasia has been reported, adequate epidemiological studies along these lines have not been conducted.

Reproduction studies have been performed in rats at doses up to 50 mg/kg/day and have revealed no evidence of impaired fertility or harm to the fetus due to Phenazopyridine HCl. There are, however, no adequate and well controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human response, this drug should be used during pregnancy only if clearly needed. **Pregnancy Category B:**

No information is available on the appearance of Phenazopyridine HCl, or its metabolites in human milk. **Nursing mothers:**

DOSAGE AND ADMINISTRATION

100 mg Tablets: Average adult dosage is two tablets 3 times a day after meals.

200 mg Tablets: Average adult dosage is one tablet 3 times a day after meals.

When used concomitantly with an antibacterial agent for the treatment of a urinary tract infection, the administration of Phenazopyridine HCl should not exceed 2 days.

OVERDOSAGE

Exceeding the recommended dose in patients with good renal function or administering the usual dose to patients with impaired renal function (common in elderly patients) may lead to increased serum levels

and toxic reactions. Methemoglobinemia generally follows a massive, acute overdose. Methylene blue, 1 to 2 mg/kg/body weight intravenously or ascorbic acid 100 to 200 mg given orally should cause prompt reduction of the methemoglobinemia and disappearance of the cyanosis which is an aid in diagnosis. Oxidative Heinz body hemolytic anemia may also occur, and "bite cells" (degmacytes) may be present in a chronic overdosage situation. Red blood cell G-6-PD deficiency may predispose to hemolysis. Renal and hepatic impairment and occasional failure, usually due to hypersensitivity, may also occur.

HOW SUPPLIED

NDC:68151-1992-0 in a PACKAGE of 1 TABLETS

Manufactured by: ECI Pharmaceuticals, LLC Fort Lauderdale, FL 33309

Phenazopyridine 100 mg tabs



PHENAZOPYRIDINE HYDROCHLORIDE

phenazopyridine tablet

Product Information

Product T ype	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:68151-1992(NDC:51293-611)
Route of Administration	ORAL		

Active Ingredient/Active Moiety						
Ingredient Name	Basis of Strength		Strengt			
PHENAZO PYRIDINE HYDRO CHLO RIDE (UNII: 0 EWG668 W17) (PHENAZO PYRIDINE - UNII:K2J09 EMJ52)	PHENAZO PYRIDINE HYDRO CHLO RIDE		100 mg			
Inactive Ingredients						
Ingredient Name			ength			
STARCH, CORN (UNII: 08232NY3SJ)						
CROSCARMELLOSE SODIUM (UNII: M28OL1HH48)						
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)						

FD&C RED NO. 40 (UNII: WZB9127XOA)						
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)						
FD&C YELLOW NO.6 (UNII: H77VEI93A8)						
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)						
MAGNESIUM STEARATE (UNII: 70097M6130)						
POVIDONES (UNII: FZ989GH94E)						
POLYVINYL ALCOHOL (UNII: 532B59J990)						
POLYETHYLENE GLYCOLS (UNII: 3WJQ0SDW1A)						
SILICON DIO XIDE (UNII: ETJ7Z6 XBU4)						
TALC (UNII: 7SEV7J4R1U)						
TITANIUM DIO XIDE (UNII: 15FIX9 V2JP)						
Product Characteristics						
Color BROWN Score no score	no score					
ShapeROUNDSize7mm	7mm					
FlavorImprint Code611	611					
Contains						
Packaging						
# Item Code Package Description Marketing Start Date Marketing End	l Date					
1 NDC:68151-1992-0 1 in 1 PACKAGE						
Marketing Information						
Marketing Category Application Number or Monograph Citation Marketing Start Date Marketing	End Date					
Unapproved drug other 08/23/2011						

Labeler - Carilion Materials Management (079239644)

Registrant - Carilion Materials Management (079239644)

Establishment					
Name	Address	ID/FEI	Business Operations		
Carilion Materials Management		079239644	REPACK(68151-1992)		

Revised: 1/2014

Carilion Materials Management