

COUGH AND CONGESTION- dextromethorphan hbr, guaifenesin solution
CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED

CVS 44-030 CC

Active ingredients (in each 20 mL)

Dextromethorphan HBr 20 mg
Guaifenesin 400 mg

Purpose

Cough suppressant
Expectorant

Uses

- temporarily relieves cough due to minor throat and bronchial irritation as may occur with a cold
- helps loosen phlegm (mucus) and thin bronchial secretions to drain bronchial tubes

Warnings

Do not use

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

- cough that occurs with too much phlegm (mucus)
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema

Stop use and ask a doctor if

cough persists more than 7 days, tends to recur, or is accompanied by a 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.

Directions

- **do not take more than directed**
- do not take more than 6 doses in any 24-hour period
- mL = milliliter
- only use the dose cup provided
- adults and children 12 years and over: 20 mL in dosing cup provided every 4 hours
- children under 12 years: do not use

Other information

- **each 20 mL contains:** sodium 16 mg
- store at 25°C (77°F); excursions permitted between 15°-30°C (59°-86°F)
- see end flap for expiration date and lot number

Inactive ingredients

anhydrous citric acid, FD&C blue #1, FD&C red #40, flavors, glycerin, high fructose corn syrup, microcrystalline cellulose, polyethylene glycol, propylene glycol, purified water, sodium benzoate, sodium chloride, sodium citrate dihydrate, sorbitol, sucralose, xanthan gum

Questions or comments?

1-800-426-9391

Principal Display

♥CVSHealth®

NDC 51316-500-19

MAXIMUM STRENGTH

**COUGH &
CONGESTION**

DEXTROMETHORPHAN HBr

Cough Suppressant

GUAIFENESIN

Expectorant

Oral Solution

SYMPTOM RELIEF

Controls cough

Relieves chest
congestion & mucus

For Ages 12 & Over

**Compare to the active ingredients
in Robitussin® Maximum Strength**

Cough + Chest Congestion DM†

**8 FL OZ
(237 mL)**

Menthol-Berry Flavor

♥CVSHealth®

**You have quality
standards. So do we.**

Keep your symptoms in
check with quality products
you can trust.

With our CVS Health® brand,
we perform ongoing tests
and monitor customer
feedback to help us exceed
your expectations.

**TAMPER EVIDENT: DO NOT USE IF IMPRINTED SAFETY
SEAL UNDER CAP IS BROKEN OR MISSING**

Distributed by: CVS Pharmacy, Inc.
One CVS Drive, Woonsocket, RI 02895
© 2024 CVS/pharmacy
CVS.com® 1-800-SHOP CVS V-19849

♥ **100% money back
guaranteed.**

[CVS.com/returnpolicy](https://www.cvs.com/returnpolicy)

†This product is not manufactured or distributed by
GlaxoSmithKline Consumer Healthcare Holdings (US) LLC,
owner of the registered trademark Robitussin®
Maximum Strength Cough + Chest Congestion DM.

50844 ORG012303019

PARENTS:

Learn about teen medicine abuse
www.StopMedicineAbuse.org



KEEP OUTER PACKAGE FOR COMPLETE PRODUCT INFORMATION

Drug Facts

Active ingredients (in each 20 mL)	Purpose
Dextromethorphan HBr 20 mg	Cough suppressant
Guaifenesin 400 mg	Expectorant

Uses

- temporarily relieves cough due to minor throat and bronchial irritation as may occur with a cold
- helps loosen phlegm (mucus) and thin bronchial secretions to drain bronchial tubes

Warnings

Do not use 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

- cough that occurs with too much phlegm (mucus)
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema

Stop use and ask a doctor if cough persists more than 7 days, tends to recur, or is accompanied by a 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.

Directions

- do not take more than directed
- do not take more than 6 doses in any 24-hour period
- mL = milliliter
- only use the dose cup provided
- adults and children 12 years and over: 20 mL in dosing cup provided every 4 hours
- children under 12 years: do not use

Other information

- each 20 mL contains: sodium 16 mg
- store at 25°C (77°F); excursions permitted between 15°-30°C (59°-86°F)
- see end flap for expiration date and lot number

Inactive ingredients anhydrous citric acid, FD&C blue #1, FD&C red #40, flavors, glycerin, high fructose corn syrup, microcrystalline cellulose, polyethylene glycol, propylene glycol, purified water, sodium benzoate, sodium chloride, sodium citrate dihydrate, sorbitol, sucralose, xanthan gum

Questions or comments? 1-800-426-9391

This product is not manufactured or distributed by GlaxoSmithKline Consumer Healthcare Holdings (US) LLC, owner of the registered trademark Robitussin® Maximum Strength Cough + Chest Congestion DM.
50844 ORG012303019

CVS Health.

You have quality standards. So do we.

Keep your symptoms in check with quality products you can trust.

With our CVS Health® brand, we perform ongoing tests and monitor customer feedback to help us exceed your expectations.

MAXIMUM STRENGTH COUGH & CONGESTION

DEXTROMETHORPHAN HBr
Cough Suppressant

GUAIFENESIN
Expectorant

Oral Solution

SYMPTOM RELIEF

Controls cough

Relieves chest congestion & mucus

TAMPER EVIDENT: DO NOT USE IF IMPRINTED SAFETY SEAL UNDER CAP IS BROKEN OR MISSING

Distributed by: CVS Pharmacy, Inc.
One CVS Drive, Woonsocket, RI 02895
© 2024 CVS pharmacy
CVS.com® 1-800-SHOP CVS V-19849

100% money back guaranteed.
CVS.com/returnpolicy

CVS Health.

MAXIMUM STRENGTH COUGH & CONGESTION

DEXTROMETHORPHAN HBr
Cough Suppressant

GUAIFENESIN
Expectorant

SYMPTOM RELIEF

CVS Health.

NDC 51316-500-19

MAXIMUM STRENGTH COUGH & CONGESTION

DEXTROMETHORPHAN HBr
Cough Suppressant

GUAIFENESIN
Expectorant

Oral Solution

SYMPTOM RELIEF

For Ages 12 & Over

Compare to the active ingredients in Robitussin® Maximum Strength Cough + Chest Congestion DM¹

8 FL OZ (237 mL)

Menthol-Berry Flavor

PARENTS:
Learn about teen medicine abuse
www.StopMedicineAbuse.org

Package Contains One Bottle

Actual Size

B-0231-030-19-CC
ORG012303019

#541468

FPO 100%
UPC# 050428073353

X XXXXXX XXXXXX X

OMIT A

CVS 44-030

COUGH AND CONGESTION
dextromethorphan hbr, guaifenesin solution

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:51316-500
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	20 mg in 20 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	400 mg in 20 mL

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
FD&C RED NO. 40 (UNII: WZB9127XOA)	
GLYCERIN (UNII: PDC6A3C0OX)	
HIGH FRUCTOSE CORN SYRUP (UNII: XY6UN3QB6S)	
MICROCRYSTALLINE CELLULOSE (UNII: OP1R32D61U)	
POLYETHYLENE GLYCOL, UNSPECIFIED (UNII: 3WJQ0SDW1A)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
SODIUM CHLORIDE (UNII: 451W47IQ8X)	
TRISODIUM CITRATE DIHYDRATE (UNII: B22547B95K)	
SORBITOL (UNII: 506T60A25R)	
SUCRALOSE (UNII: 96K6UQ3ZD4)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics

Color	red (MAROON)	Score	
Shape		Size	
Flavor	MENTHOL, BERRY	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:51316-500-19	1 in 1 CARTON	04/08/2024	
1		237 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product		

Marketing Information

Marketing	Application Number or Monograph	Marketing Start	Marketing End
-----------	---------------------------------	-----------------	---------------

Category	Citation	Date	Date
OTC Monograph Drug	M012	04/08/2024	

Labeler - CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED (062312574)

Establishment

Name	Address	ID/FEI	Business Operations
LNK International, Inc.		967626305	manufacture(51316-500) , pack(51316-500)

Revised: 4/2025

CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED