MUCUS RELIEF DM HONEY AND BERRY FLAVOR- dextromethorphan hydrobromide and guaifenesin solution
RARITAN PHARMACEUTICALS INC

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.

DRx Choice® Mucus Relief DM Honey & Berry Flavor

Drug Facts

Active ingredients (in each 20 mL)	***Purposes***
Dextromethorphan HBr 20 mg	Cough suppressant
Guaifenesin 400 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

- 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 that occurs with 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 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.

In case of overdose, get medical help or contact a Poison Control Center right away at 1-800-222-1222.

Directions

- do not take more than 6 doses in any 24-hour period
- measure only with dosing cup provided
- do not use dosing cup with other products
- dose as follows or as directed by a doctor
- **adults and children 12 years of age and over:** 20 mL in dosing cup provided every 4 hours
- **children under 12 years of age:** do not use

Other information

- **each 20 mL contains**: sodium 8 mg
- store at room temperature
- do not refrigerate

Inactive ingredients

citric acid, edetate disodium, flavors, glycerin, propylene glycol, purified water, sodium benzoate, sorbitol, sucralose, xanthan gum

Questions?

1-866-467-2748

PRINCIPAL DISPLAY PANEL - 180 mL Bottle Label

*Compare to the active ingredient in Maximum Strength Mucinex® Fast Max® DM Max Honey & Berry Flavor

NDC 68163-605-06

DRx Choice

maximum Strength

Mucus

relief DM

Dextromethorphan HBr – Cough Suppressant

Guaifenesin – Expectorant

- Controls Cough
- Relieves Chest Congestion
- Thins & Loosens Mucus
- 4 Hour Dosing

Honey& Berry Flavor

Naturally and Artificially Flavored

For Ages 12+

6 FL OZ (180mL)

Manufactured by:

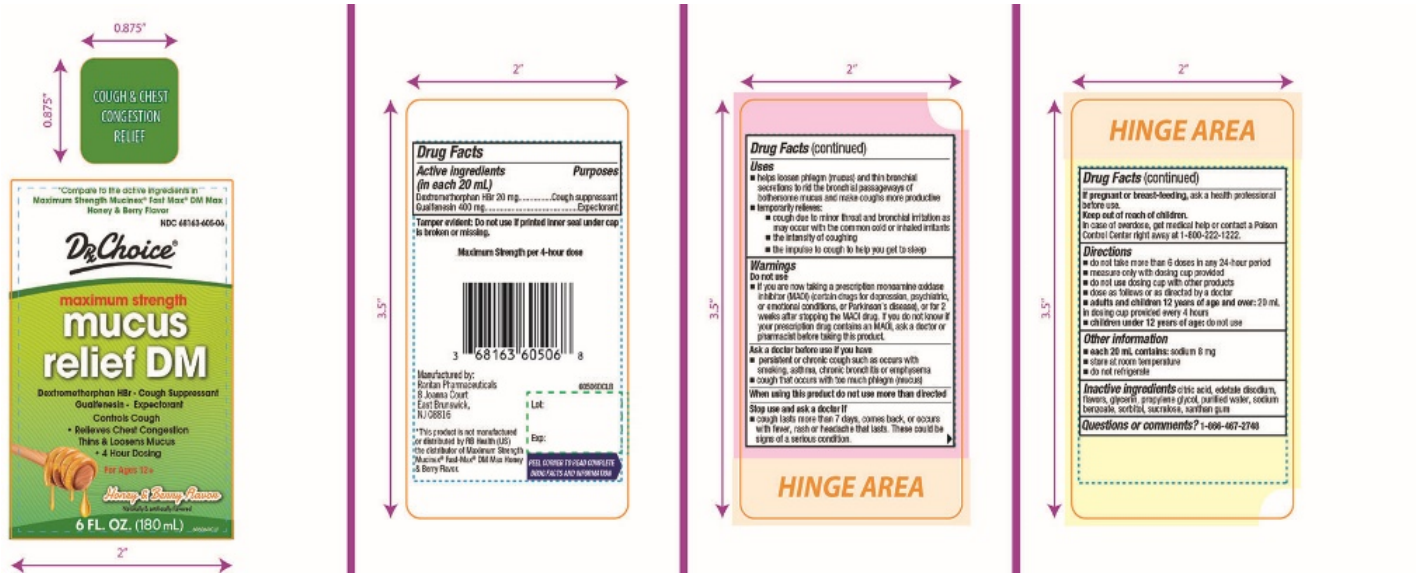
Raritan Pharmaceuticals

8 Joanna Court

East Brunswick,

NJ 08816

*This product is not manufactured or distributed by RB Health (US) the distributor of Maximum Strength Mucinex® Fast-Max® DM Max Honey & Berry Flavor



MUCUS RELIEF DM HONEY AND BERRY FLAVOR

dextromethorphan hydrobromide and guaifenesin solution

Product Information			
Product Type	HUMAN OTC DRUG	**Item Code (Source)**	NDC:68163-605
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)	
edetate disodium (UNII: 7FLD91C86K)	
propylene glycol (UNII: 6DC9Q167V3)	
water (UNII: 059QF0KO0R)	
sodium benzoate (UNII: OJ245FE5EU)	
sorbitol (UNII: 506T60A25R)	
sucralose (UNII: 96K6UQ3ZD4)	
xanthan gum (UNII: TTV12P4NEE)	

Product Characteristics			
Color		**Score**	
Shape		**Size**	
Flavor	HONEY	**Imprint Code**	
Contains			

Packaging				
#	**Item Code**	**Package Description**	**Marketing Start Date**	**Marketing End Date**
1	NDC:68163-605-06	180 mL in 1 BOTTLE; Type 1: Convenience Kit of Co-Package	04/21/2023	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC monograph final	part341	04/21/2023	

Labeler - RARITAN PHARMACEUTICALS INC (127602287)

Revised: 5/2023 RARITAN PHARMACEUTICALS INC