

**GOOD NEIGHBOR PHARMACY EARWAX REMOVAL DROPS- carbamide peroxide liquid**  
**Preferred Pharmaceuticals Inc.**

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**Good Neighbor Pharmacy Earwax Removal Drops**

***Drug Facts***

***Active ingredient***

Carbamide peroxide 6.5%

***Purpose***

Earwax removal aid

***Uses***

for occasional use as an aid to soften, loosen, and remove excessive earwax

***Warnings***

**For use in the ear only**

**Ask a doctor before use if you have**

- ear drainage or discharge
- ear pain
- irritation, or rash in the ear
- dizziness
- an injury or perforation (hole) of the ear drum
- recently had ear surgery

**When using this product**

avoid contact with the eyes

**Stop use and ask a doctor if**

- you need to use for more than 4 days
- excessive earwax remains after use of this product

**Keep out of reach of children.**

If swallowed get medical help or contact a Poison Control Center right away.

***Directions***

# FOR USE IN THE EAR ONLY

## Adults and children over 12 years of age:

- Tilt head sideways and place 5 to 10 drops into ear
- Tip of applicator should not enter ear canal
- Keep drops in ear for several minutes by keeping head tilted or placing cotton in the ear
- Use twice daily for up to 4 days if needed, or as directed by a doctor
- Any wax remaining after treatment may be removed by gently flushing the ear with warm water, using a soft rubber bulb ear syringe
- consult a doctor **Children under 12 years:**

## Other information

- Avoid exposing bottle to excessive heat and direct sunlight
- Store bottle in the outer carton
- Keep cap on bottle when not in use
- Product foams on contact with earwax due to release of oxygen. There may be an associated crackling sound.
- Do not use if tamper-evident safety seal is broken or missing




## Inactive ingredients

anhydrous citric acid, glycerin, propylene glycol, sodium citrate, sodium lauryl sulfate, water

## Questions?

1-800-328-5890

## Package Labeling:

<p><b>Earwax Removal Drops</b> Generic for Debrox Active ingredient: Carbamide Peroxide 6.5%... ...earwax removal aid</p> <p><b>Pkg Size:</b>    <b>Exp Date:</b> #####</p> <p><b>Ins:</b> Mfg: Amerisource Bergen Prod#:</p> <p><b>Warning</b> Ear Wax Removal Aid. Do not use if you have ear drainage or discharge, ear pain, irritation or rash in the ear, dizziness, an injury or perforation (hole) of the ear drum, or recently had ear surgery. When using this product, avoid contact with eyes. Keep out of reach of children. Do not use if you need to use more than four days, or excessive earwax remains after use of this product. For use in the ears only. Avoid exposing bottle to excessive heat or direct sunlight. Product foams on contact with earwax due to release of oxygen. Keep cap on bottle when not in use.</p>	<p></p> <p></p> <p><b>Directions English</b> Place <u>    </u> drop(s) in affected ear <u>    </u> times a day. Take as Directed</p>	<p>CAUTION: Federal law PROHIBITS transfer of this drug to any person other than the patient for whom it was prescribed.</p> <p></p> <p>GTIN ##### SN ##### EXP #####</p> <p><b>Instrucciones Espanol:</b> Pongo <u>    </u> gota(s) en oido <u>    </u> veces al dia. Tomelo como se indica</p>	<p>Earwax Removal Drops Qty: Ins: Lot: Bat: Prod# (NDC):</p> <p>Earwax Removal Drops Qty: Ins: Lot: Bat: Prod# (NDC):</p> <p>Earwax Removal Drops Qty: Insurance NDC: Lot: Bat:</p> <p>Earwax Removal Drops Qty: Ins: Lot: Bat: Prod# (NDC):</p> <p>Patient    Billing    Chart</p>
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# GOOD NEIGHBOR PHARMACY EARWAX REMOVAL DROPS

carbamide peroxide liquid

## Product Information

<b>Product Type</b>	HUMAN OTC DRUG	<b>Item Code (Source)</b>	NDC:68788-8586(NDC:46122-557)
<b>Route of Administration</b>	TOPICAL		

## Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
<b>CARBAMIDE PEROXIDE</b> (UNII: 31PZ2VAU81) (HYDROGEN PEROXIDE - UNII:BBX060AN9V)	CARBAMIDE PEROXIDE	65 mg in 1 mL

## Inactive Ingredients

Ingredient Name	Strength
<b>ANHYDROUS CITRIC ACID</b> (UNII: XF417D3PSL)	
<b>GLYCERIN</b> (UNII: PDC6A3C0OX)	
<b>PROPYLENE GLYCOL</b> (UNII: 6DC9Q167V3)	
<b>SODIUM CITRATE, UNSPECIFIED FORM</b> (UNII: 1Q73Q2JULR)	
<b>SODIUM LAURYL SULFATE</b> (UNII: 368GB5141J)	
<b>WATER</b> (UNII: 059QF0KO0R)	

## Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-8586-1	1 in 1 CARTON	02/20/2024	
1		15 mL in 1 BOTTLE, DISPENSING; Type 0: Not a Combination Product		

## Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M014	01/01/2019	

**Labeler** - Preferred Pharmaceuticals Inc. (791119022)

**Registrant** - Preferred Pharmaceuticals Inc. (791119022)

## Establishment

Name	Address	ID/FEI	Business Operations
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-8586)

