ROBAFEN DM- dextromethorphan hydrobromide, guaifenesin solution Preferred Pharmaceuticals Inc.

Major Pharmaceuticals Robafen[®] DM Drug Facts

Active ingredients (in each 20 mL)

Dextromethorphan HBr, USP 20 mg Guaifenesin, USP 200 mg

Purposes

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)
- cough that lasts or is chronic such as occurs with smoking, asthma, chronic bronchitis, or emphysema

Stop use and ask a doctor if

cough lasts for more than 7 days, comes back, or is accompanied by fever, rash, or persistent headache. A persistent cough may be a sign 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 (1-800-222-1222).

Directions

- do not take more than 6 doses in any 24-hour period
- measure only with dosing cup provided
- keep dosing cup with product
- mL = milliliter
- this adult product is not intended for use in children under 12 years of age

age	dose
adults and children 12 years and over	20 mL every 4 hours
children under 12 years	do not use

Other information

- each 20 mL contains: sodium 14 mg
- store at 20-25°C (68-77°F). Do not refrigerate.

Inactive ingredients

anhydrous citric acid, FD&C red no. 40, flavor, glycerin, propylene glycol, purified water, sodium benzoate, sodium citrate, sorbitol solution, sucralose, xanthan gum

Questions or comments?

1-800-616-2471

Package/Label Principal Display Panel

MAJOR®

Relabeled By: Preferred Pharmaceuticals Inc.

Compare to Robitussin[®] Cough + Chest Congestion DM active ingredients

Robafen[®] DM Cough and Chest Congestion

Dextromethorphan HBr, USP 20 mg

Guaifenesin, USP 200 mg

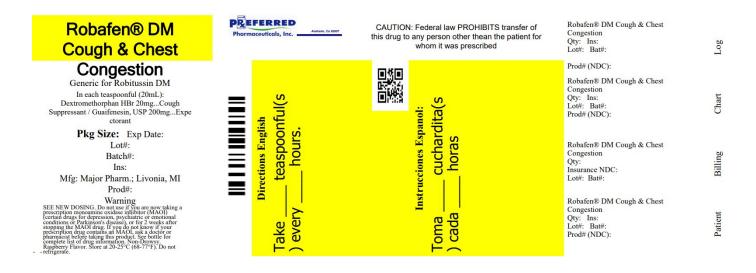
Cough Suppressant

Expectorant

Controls Cough

Relieves Chest Congestion

Thins and Loosens Mucus SEE NEW DOSING Raspberry Flavor Non-Drowsy For Adults Ages 12 and Over 4 FL. OZ. (118 mL)



ROBAFEN DM dextromethorphan hydrobromide, guaifenesin solution						
Product Information						
Product Type	HUMAN OTC DRUG	Item Code (Source) NDC:68788-8268		B(NDC:0904-7223)		
Route of Administration	ORAL					
Active Ingredient/Active Moiety						
Ingredient Name Basis of Streng			Jth	Strength		
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)			DEXTROMETHORPHAN HYDROBROMIDE		20 mg in 20 mL	
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ) GUAIFENESIN				200 mg in 20 mL		
Inactive Ingredients						
Ingredient Name					trength	
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)						
FD&C RED NO. 40 (UNII: WZB912	7XOA)					
GLYCERIN (UNII: PDC6A3C0OX)						

PROPYLENE GLYCOL (UNII: 6DC9Q167V3) WATER (UNII: 059QF0K00R)

SODIUM BENZOATE (UNII: OJ245FE5EU)

so			FORM (UNII: 1Q73Q	211 II D)			
	-			ZJULK)			
	SORBITOL (UNII: 506T60A25R)						
	SUCRALOSE (UNII: 96K6UQ3ZD4) XANTHAN GUM (UNII: TTV12P4NEE)						
ла		NII: TIVIZP4NEE)					
Pr	roduct Chara	acteristics					
Co	olor		RED	Score			
Shape			Size				
Flavor		FRUIT	Imprint Code				
Contains							
Pa	ackaging						
#	ltem Code	Pac	kage Description		Marketing Start Date	Marketing End Date	
	NDC:68788- 8268-1	1 in 1 CARTON			09/23/2022		
1		118 mL in 1 BO ⁻ Product	TTLE; Type 0: Not a	Combination			
Marketing Information							
	Marketing Category	Applicati	ion Number or Monograph Citation		Marketing Start Date	Marketing End Date	
от	C Monograph Dru	ug part341			09/23/2022		

Labeler - Preferred Pharmaceuticals Inc. (791119022)

Registrant - Preferred Pharmaceuticals Inc. (791119022)

Establishment							
Name	Address	ID/FEI	Business Operations				
Preferred Pharmaceuticals Inc.		791119022	RELABEL(68788-8268)				

Revised: 8/2024

Preferred Pharmaceuticals Inc.