#### GOOD NEIGHBOR PHARMACY MUCUS RELIEF PE PEguaifenesin/phenylephrine tablet AmerisourceBergen Drug Corp

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.

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## DRUG FACTS

Active ingredient - (per tablet)

Guaifenesin 400 mg

Phenylephrine HCl 10 mg

#### Purpose

Guaifenesin.....Expectorant

Phenylephrine HCl.....Nasal decongestant

#### Uses

Temporarily relieves symptoms associated with a cough ,the common cold,hay fever or other upper respiratory allergies.

- helps loosen phlegm (mucus)
- clear nasal passageways
- loosens nasal congestion
- drain bronchial tubes
- shrinks swollen membranes
- clears stuffy nose
- makes coughs more productive

## Warnings

#### Do not exceed recommended dosage

#### Do not use

■ this product 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 are uncertain whether your prescription drug contains an MAOI, ask a

health professional.

# Ask a doctor before use if you have

heart disease
high blood pressure
thyroid disease
diabetes
excessive phlegm;mucus
difficulty in urination due to an enlarged prostate gland
persistent or chronic cough such as occurs with smoking,asthma,chronic bronchitis or emphysema

## Stop use and ask a doctor if

nervousness, dizziness or sleeplessness occurs
 symptoms are accompanied by fever, rash, persistent headache or excessive phlegm (mucus)
 cough and congestion do not improve within 7 days or tend to recur.
 These could be signs of a serious condition.

If pregnant or breast-feeding, ask a health

professional before use.

**Keep out of the reach of children.** In case of overdose, get medical help or contact a Poison

Control Center immediately.

#### Directions

 adults and children 12 years and over: take 1 caplet every 4 hours as needed
 children 6 to under 12 years: take 1/2 caplet every 4 hours as needed
 children under 6 years: consult a doctor
 Do not exceed 6 doses in a 24 hour period or as directed by a doctor.

#### Inactive ingredients

lactose, magnesium silicate, croscarmellose sodium, hypromellose, magnesium stearate, maltodextrin, microcrystalline cellulose, mineral oil, povidone, silica, sodium lauryl sulfate, stearic acid, titanium dioxide and triacetin



# GOOD NEIGHBOR PHARMACY MUCUS RELIEF PE PE

guaifenesin/phenylephrine tablet

Product Information						
Product Type	HUMAN OTC DRUG	Item Code (S	tem Code (Source) NDC:		2:24385-925	
Route of Administration	ORAL					
Active Ingredient/Active	Moiety					
Ingre	ength	Strength				
Guaifenesin (UNII: 495W7451VQ) (Guaifenesin - UNII:495W7451VQ) Guaifenesin					400 mg	
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII: 1WS297W6MV)         PHENYLEPHRINE HYDROCHLORIDE					10 mg	
Inactive Ingredients						
	Sti	Strength				
CROSCARMELLOSE SODIUM (UI	NII: M28OL1HH48)					
LACTOSE (UNII: J2B2A4N98G)						
(e, j,						

	LLULOSE, MICR	OCRYSTA	LLINE (UNI	: OP1R32D61U)					
MI									
POVIDONE (UNII: FZ989GH94E)									
MAGNESIUM SILICATE (UNII: 9B9691B2N9)									
MAGNESIUM STEARATE (UNII: 70097M6I30)									
_			•						
	oduct Chara								
Color		-	white		Score		2 pieces		
Shape		(	OVAL	Size		17mm			
Flavor				Imprint Code	Imprint Code		RCCGPE;C27		
Со	ntains								
Pa	ckaging								
	ackaging Item Code		Package	e Description	Marketing Date	Start	Marketing End Date		
#		1 in 1 CAP	-	e Description	-	Start	-		
# 1	Item Code NDC:24385-925-		RTON	e Description	Date	Start	-		
#	Item Code NDC:24385-925-	50 in 1 B(	RTON		Date	Start	-		
# 1	Item Code NDC:24385-925-	50 in 1 B(	RTON		Date	Start	-		
# 1	Item Code NDC:24385-925-	50 in 1 B0 Product	RTON OTTLE; Type		Date	Start	-		
# 1	Item Code NDC:24385-925- 71	50 in 1 BO Product	RTON OTTLE; Type nation		<b>Date</b> 06/05/2006	g Start	-		
# 1 1	Item Code NDC:24385-925- 71 arketing I Marketing	50 in 1 BC Product	RTON OTTLE; Type <b>nation</b> lication N	e 0: Not a Combination	Date 06/05/2006 Marketin	g Start	Date Marketing End		

Labeler - AmerisourceBergen Drug Corp (007914906)

**Registrant -** Reese Pharmaceutical Co (004172052)

Establishment							
Name	Address	ID/FEI	<b>Business Operations</b>				
Pharbest		557054835	manufacture(24385-925)				

Revised: 12/2022

AmerisourceBergen Drug Corp