# PECGEN DMX- dextromethorphan hbr, guaifenes in solution KRAMER NOVIS

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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# PECGEN<sup>®</sup> DMX

**Drug** Facts

Active Ingredients (in each 5 mL tsp)

Dextromethorphan HBr, 10 mg

Guaifenesin, 187 mg

#### Purposes

Antitussive

Expectorant

#### Uses

• suppresses cough due to minor throat and bronchial irritation associated with a cold or inhaled irritants.

• helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passages of bothersome mucus, drain bronchial tubes, and make coughs more productive.

# 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)

• a cough that lasts or is chronic such as occurs with smoking, asthma, chronic bronchitis or emphysema.

# When using this product, do not use more than directed.

# Stop use and ask a doctor if

• symptoms do not get better within 7 days or are accompanied by fever

• cough lasts more than 7 days, comes back, or is accompanied by 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 accidental overdose, get medical help or contact a Poison Control Center right away.

# Directions

Take every 4 hours, or as directed by a doctor.

Adults and children 12 years of	Take two teaspoonfuls (10 mL). Do not exceed 8
age and older	teaspoonfuls in 24 hours
Children 6 to under 12 years	Take one teaspoonful (5 mL), Do not exceed 4
of age	teaspoonfuls in 24 hours
Children 2 to under 6 years of age	Take 1/2 teaspoon (2.5 mL). Do not exceed 2 teaspoonfuls in 24 hours
Children under 2 years of age	DO NOT USE

# Inactive ingredients

Citric acid, flavors, menthol, methylparaben, polyethylene glycol, propylene glycol, propylparaben, purified water, sodium citrate, sucralose.

# Other information

- Store at controlled room temperature 15°-30°C (59°-86°F).
- Avoid excessive heat or humidity.
- Tamper Evident Feature: Do not use if inner seal is torn, broken or missing.

# Questions or comments?

Call weekdays from 8 AM to 4 PM AST at **1-787-767-2072**. San Juan, PR 00917 www.kramernovis.com

# Contains the same active ingredients as Trispec® DMX\*

Sugar, Alcohol, Dye and Gluten **FREE** 

# **CHERRY RASPBERRY FLAVOR**

# Manufactured in the USA for Kramer Novis

\*Trispec® DMX is a registered trademark of Deliz Pharmaceutical Corp. This product is not manufactured, distributed or marketed by Deliz Pharmaceutical Corp.

Packaging

		NDC 52083-630					
Drug Facts		DEOOENIO		Drug Facts (continued)			
Active Ingredients (in each 5 mL tsp) Dextromethorphan HBr, 10 mg Guaifenesin, 187 mg		<b>PECGEN</b> <sup>®</sup>	DMX	If pregnant or breast-feeding, ask a health professional before reach of children. In case of accidental overdose, get medica Poison Control Center right away.			
Uses		Contains the same active		Directions			
<ul> <li>suppresses cough due to minor throat and bronchial irritation cold or inhaled irritants,</li> </ul>	n associated with a	as Trispec® DN	^	■ Take every 4 hours, or as directed by a doctor.			
<ul> <li>helps loosen phlegm (mucus) and thin bronchial secretions</li> </ul>		Dextromethorpha	n HBr	Adults and children 12 years of age and older	Take two teaspoonfuls (10) teaspoonfuls in 24 hours	mL). Do not exceed 8	
passages of bothersome mucus, drain bronchial tubes, and r productive.	make cougns more	ANTITUSS	IVE	Children 6 to under 12 years of age	Take one teaspoonful (5 m teaspoonfuls in 24 hours	L), Do not exceed 4	
Warnings Do not use if you are now taking a prescription mor	noamine oxidase	Guaifenesir	Concernation of the	Children 2 to under 6 years of age	Take 1/2 teaspoon (2.5 m teaspoonfuls in 24 hours	L). Do not exceed 2	
inhibitor (MAOI) (certain drugs for depression, psychia conditions, or Parkinson's disease), or for 2 weeks a	fter stopping the	EXPECTOR		Children under 2 years of age	DO NOT USE		
MAOI drug. If you do not know if your prescription of MAOI, ask a doctor or pharmacist before taking this p		Sugar, Alcohol, Dye and C		Other information	anti		
Ask a doctor before use if you have = cough that occurs with too much phlegm (mucus) = a cough that lasts or is chronic such as occurs with smoking, asthma, chronic bronchitis or emphysema. When using this product, do not use more than directed,		CHERRY RASPBERRY FLAVOR Net Content: 16 fl oz (473 mL) Manufactured in the USA for		<ul> <li>Store at controlled room temperature 15°- 30°C (59° - 86°F).</li> <li>Avoid excessive heat or humidity.</li> <li>Tamper Evident Feature: Do not use if inner seal is torn, broken or missing.</li> </ul>			
				Inactive ingredients Citric acid, flavors, menthol, methylparaben, polyethylene glycol, propylene glycol, propylparaben, purified water, sodium citrate, sucralose,			
PECGEN DMX		3 ""52083"630	16' " 3	Iributed or marketed by Deliz Ph			
extromethorphan hbr, guaifene	esin solutio	on					
Product Information							
Product T ype	HUMAI	NOTC DRUG Item Cod		e (Source) NDC:5208		3-630	
Route of Administration	ORAL						
Active Ingredient/Active M	loiety						
Active Ingredient/Active M	0	Name		Basis of	fStrength	Strength	
0	gredient 1 BROMIDE (1			Basis of DEXTROMETH HYDROBROM		Strengtl 10 mg in 5 mL	

<b>DEXTROMETHORPHAN HYDROBROMIDE</b> (UNII: 9 D2RTI9 KYH)	DEXTROMETHO RPHAN	10 mg
(DEXTROMETHORPHAN - UNII:7355X3ROTS)	HYDRO BRO MIDE	in 5 mL
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	

Ingredient Name	Strength
CITRIC ACID MONOHYDRATE (UNII: 2968PHW8QP)	
IENTHOL, UNSPECIFIED FORM (UNII: L7T10EIP3A)	
IETHYLPARABEN (UNII: A218 C7HI9T)	
OLYETHYLENE GLYCOL 1000 (UNII: U076Q6Q621)	
ROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
ROPYLPARABEN (UNII: Z8IX2SC1OH)	
VATER (UNII: 059QF0KO0R)	
ODIUM CITRATE, UNSPECIFIED FORM (UNII: 1Q73Q2JULR)	
UCRALOSE (UNII: 96K6UQ3ZD4)	

Color				Score		
Shape				Size		
Flavor		CHERRY, RASPBERRY		Imprint Code		
Contains						
Packaging						
# Item Code		Package Description		Marketing Start Date	Marketing Date	End
1 NDC:52083-630- 16	474 m Pro du	nL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination	n	0 4/0 1/20 15		
Marketing In	lforr	nation				
Marketing In Marketing Catego		<b>Nation</b> Application Number or Monograph Citation	Ma	rketing Start Date	Marketing End	l Date

# Labeler - KRAMER NO VIS (090158395)

Revised: 9/2019

KRAMER NOVIS