

**MUCUS RELIEF SEVERE CONGESTION AND COUGH- dextromethorphan hbr,
guaifenesin, phenylephrine hcl solution
TOPCO ASSOCIATES LLC**

TopCare 44-004

Active ingredients (in each 20 mL)

Dextromethorphan HBr 20 mg
Guaifenesin 400 mg
Phenylephrine HCl 10 mg

Purpose

Cough suppressant
Expectorant
Nasal decongestant

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
 - nasal congestion due to a cold

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

- difficulty in urination due to enlargement of the prostate gland
- thyroid disease
- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, or emphysema
- high blood pressure
- heart disease
- diabetes
- cough that occurs with too much phlegm (mucus)

When using this product

do not exceed recommended dosage.

Stop use and ask a doctor if

- nervousness, dizziness, or sleeplessness occur
- symptoms do not get better within 7 days or occur with fever
- cough persists more than 1 week, tends to recur, or is accompanied by a 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 overdose, get medical help or contact a Poison Control Center right away.

Directions

- **do not take more than directed**
- do not take more than 6 doses in any 24-hour period
- mL = milliliter
- only use the dose cup provided
- adults and children 12 years and over: 20 mL in dosing cup provided every 4 hours
- children under 12 years: do not use

Other information

- **each 20 mL contains:** sodium 9 mg
- use by expiration date on package
- store at 25°C (77°F); excursions permitted between 15°-30°C (59°-86°F)

Inactive ingredients

anhydrous citric acid, FD&C blue #1, FD&C red #40, flavors, glycerin, propylene glycol, purified water, sodium benzoate, sodium citrate dihydrate, sodium metabisulfite, sorbitol, sucralose, xanthan gum

Questions or comments?

1-800-426-9391

Principal Display Panel

+TopCare®
health

NDC 76162-040-45

COMPARE TO MUCINEX® FAST-MAX® SEVERE
CONGESTION & COUGH ACTIVE INGREDIENTS*

MAXIMUM STRENGTH

**Mucus Relief
Severe Congestion
& Cough**

DEXTROMETHORPHAN HBr
COUGH SUPPRESSANT
GUAIFENESIN • EXPECTORANT
PHENYLEPHRINE HCl • NASAL DECONGESTANT

MULTI-SYMPTOM RELIEF:

- Controls Cough
- Relieves Nasal &
Chest Congestion
- Thins & Loosens
Mucus

FOR AGES 12+

6 FL OZ (177 mL)

Mixed Berry
Flavored

**TAMPER EVIDENT: DO NOT USE IF IMPRINTED SAFETY
SEAL UNDER CAP IS BROKEN OR MISSING**

PARENTS:

Learn about teen medicine abuse
www.StopMedicineAbuse.org

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topcare@topco.com www.topcarebrand.com

**Visit here or call 1-888-423-0139 for more information:
<http://topbrnds.com/49052Q>**

*This product is not manufactured or distributed by
RB Health (US) LLC, owner of the registered trademark
Mucinex® FAST-MAX® Severe Congestion & Cough.
50844 REV0724A00445

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PEEL BACK TAB TO READ
COMPLETE DRUG FACTS
AND INFORMATION

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SAFETY SEAL UNDER CAP IS BROKEN OR MISSING**

Drug Facts

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B-004-45
REV A

No print/No varnish
Lot & Exp date

Drug Facts (continued)

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NDC 76162-040-45

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MAXIMUM STRENGTH

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Severe Congestion
& Cough Relief

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- Thins & Loosens Mucus



FOR AGES 12+

6 FL OZ (177 mL)

Mixed Berry
Flavored

QUALITY GUARANTEED

F-004-45
REV A

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Topcare 44-004

MUCUS RELIEF SEVERE CONGESTION AND COUGH

dextromethorphan hbr, guaifenesin, phenylephrine hcl solution

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:76162-040
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
PHENYLEPHRINE HYDROCHLORIDE (UNII: 04JA59TNSJ) (PHENYLEPHRINE - UNII:1WS297W6MV)	PHENYLEPHRINE HYDROCHLORIDE	10 mg in 20 mL

Inactive Ingredients

Ingredient Name	Strength
ANHYDROUS CITRIC ACID (UNII: XF417D3PSL)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	
FD&C RED NO. 40 (UNII: WZB9127XOA)	
GLYCERIN (UNII: PDC6A3C0OX)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
WATER (UNII: 059QF0KO0R)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
TRISODIUM CITRATE DIHYDRATE (UNII: B22547B95K)	
SODIUM METABISULFITE (UNII: 4VON5FNS3C)	
SORBITOL (UNII: 506T60A25R)	
SUCRALOSE (UNII: 96K6UQ3ZD4)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics

Color	blue	Score	
Shape		Size	
Flavor	BERRY (MIXED)	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:76162-040-45	177 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product	08/10/2023	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	08/10/2023	

Labeler - TOPCO ASSOCIATES LLC (006935977)**Establishment**

Name	Address	ID/FEI	Business Operations
LNK International, Inc.		967626305	manufacture(76162-040) , pack(76162-040)

Revised: 5/2026

TOPCO ASSOCIATES LLC