MUCUS RELIEF DM MAX MAXIMUM STRENGTH- dextromethorphan hbr, guaifenesin tablet TARGET Corporation

Drug Facts

Active ingredients (in each extended-release tablets)

Dextromethorphan HBr 60 mg

Guaifenesin 1200 mg

Purpose

Cough suppressant

Expectorant

Uses

- help 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

Warnings

Do not use

- for children under 12 years of age
- 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

- persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis or emphysema
- cough accompanied by too much phlegm (mucus)

When using this product,

• do not use more than directed

Stop use and ask a doctor if

cough lasts more than 7 days, comes back, or occurs with fever, rash or persistent headache. These could be signs of a serious illness.

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 crush, chew, or break tablet
- take with a full glass of water
- this product can be administered without regard for timing of meals
- adult and children 12 years of age and older: 1 tablet every 12 hours: not more than 2 tablets in 24 hours
- children under 12 years of age: do not use

Other information

• store between 20° to 25° C (68° to 77°F)

Inactive ingredients

carbomer, colloidal silicon dioxide, D&C yellow #10, aluminum lake, hypromellose, lactose monohydrate, magnesium stearate, microcrystalline cellulose, providone, talc

Questions?

Call 1-800-910-6874

Principal Display Panel

Compare to active ingredients in Maximum Strength Mucinex® DM*

Maximum Strength

mucus relief DM

guaifenesin 1,200 mg

expectorant

dextromethorphan HBr 60 mg

cough suppressant

controls cough

thins and loosens mucus

EXTENDED-RELEASE TABLETS

*This product is not manufactured or distributed by Reckitt Benckiser, distributor of Maximum Strength Mucinex® DM.

TAMPER EVIDENT: DO NOT USE IF BLISTER UNIT IS TORN, BROKEN OR SHOWS ANY SIGNS OF TAMPERING.

KEEP OUTER CARTON FOR COMPLETE WARNINGS AND PRODUCT INFORMATION.

Distributed by Target Corporation Minneapolis, MN 55403

TM & @2018 Target Brands, Inc.

Package Label

-





MUCUS RELIEF DM MAX MAXIMUM STRENGTH								
Product Information								
Product Type	HUMAN OTC DRUG	Item Code (S	Item Code (Source)		NDC:11673-834			
Route of Administration	ORAL							
Active Ingredient/Active Moi	ety							
Ingr	Basis of Str	rength	Strengt					
DEXTROMETHORPHAN HYDROBRO (DEXTROMETHORPHAN - UNII:7355X3		DEXTROMETHO RPHAN HYDROBROMIDE		60 mg				
GUAIFENESIN (UNII: 495W7451VQ) (G	VQ)	GUAIFENES IN		1200 mg				

Inactive Ingredi	ents				
	Strength				
CARBOMER 934 (UN	NII: Z135V	_	ient Name		
D&C YELLOW NO.	10 (UNII:	35SW5USQ3G)			
HYPROMELLOSE, U	INSPECIE	F IED (UNII: 3NXW29V3	3WO)		
LACTOSE MONOHY	DRATE	(UNII: EWQ57Q8I5X)			
MAGNESIUM STEAR	ATE (UN	III: 70097M6I30)			
MICROCRYSTALLI	NE CELL	ULOSE (UNII: OP1R32	D6 1U)		
POVIDONE (UNII: FZ					
TALC (UNII: 7SEV7J4					
SILICON DIO XIDE (
Product Charact	teristics	5			
		YELLOW	Score	Score	
00101					
Shape		OVAL	Size		22mm
		OVAL	Size Imprint Code		22mm AN0 39
Shape		OVAL			
Shape Flavor		OVAL			
Shape Flavor		OVAL			
Shape Flavor		OVAL			
Shape Flavor Contains		OVAL Package De	Imprint Code	Marketing Start Date	
Shape Flavor Contains Packaging	28 in 1 0	Package De	Imprint Code	Marketing Start Dat 0 1/0 1/20 19	AN0 39
Shape Flavor Contains Packaging # Item Code		Package De CARTON	Imprint Code	0 1/0 1/20 19	AN0 39
Shape Flavor Contains	1 in 1 BI	Package De CARTON LISTER PACK; Type 0:	Imprint Code	0 1/0 1/20 19	AN0 39
Shape Flavor Contains Packaging # Item Code 1 NDC:11673-834-28 1	1 in 1 BI 14 in 1 C	Package De CARTON LISTER PACK; Type 0: CARTON	Imprint Code	0 1/0 1/20 19 0 1/0 1/20 19	AN0 39
S → a p e F → v o r C → ntains P → ckaging # Item Code 1 NDC:11673-834-28 1 2 NDC:11673-834-14	1 in 1 BI 14 in 1 C	Package De CARTON LISTER PACK; Type 0: CARTON	Imprint Code scription Not a Combination Product	0 1/0 1/20 19 0 1/0 1/20 19	AN0 39
S → a p e F → v o r C → ntains P → ckaging # Item Code 1 NDC:11673-834-28 1 2 NDC:11673-834-14	1 in 1 BI 14 in 1 C	Package De CARTON LISTER PACK; Type 0: CARTON	Imprint Code scription Not a Combination Product	0 1/0 1/20 19 0 1/0 1/20 19	AN0 39
S → a p e F → vor C → ntains P → ckaging # Item Code 1 NDC:11673-834-28 1 NDC:11673-834-14	1 in 1 BI 14 in 1 C 1 in 1 BI	Package De CARTON LISTER PACK; Type 0: CARTON LISTER PACK; Type 0:	Imprint Code scription Not a Combination Product	0 1/0 1/20 19 0 1/0 1/20 19	AN0 39
Shape Flavor Contains Packaging # Item Code 1 NDC:11673-834-28 2 NDC:11673-834-14 2	1 in 1 BI 14 in 1 C 1 in 1 BI	Package De CARTON LISTER PACK; Type 0: CARTON LISTER PACK; Type 0:	Imprint Code scription Not a Combination Product	0 1/0 1/20 19 0 1/0 1/20 19	AN0 39

Labeler - TARGET Corporation (006961700)

Revised: 10/2019

II.

TARGET Corporation