

**VALUMEDS COUGH RELIEF, DEXTROMETHORPHAN HBR- dextromethorphan hydrobromide capsule, liquid filled
Cabinet Health P.B.C.**

ValuMeds Cough Relief, Dextromethorphan Hbr

Drug Facts

Active ingredient Purpose (in each softgel)

Dextromethorphan HBr, 15 mg

Purpose

Cough suppressant

Use

temporarily relieves cough due to minor throat and bronchial irritation as may occur with 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

- a cough that occurs with too much phlegm (mucus)
- a cough that lasts or is chronic as occurs with smoking, asthma, 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. 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. (1-800-222-1222)

Directions

- do not take more than 8 softgels in any 24-hour period
- this adult product is not intended for use in children under 12 years of age

age	dose
adults and children 12 years and over	take 2 softgels every 6 to 8 hours, as need
children under 12 years	do not use

Other information

- store at 20-25°C (68-77°F)
- avoid excessive heat above 40°C (104°F)
- protect from light

Inactive ingredients

FD&C red #40, gelatin, glycerin, polyethylene glycol 400, propylene glycol, povidone, purified water, sorbitol sorbitan solution, titanium dioxide

Questions or comments?

call **1-908-242-6108** Mon-Fri 8:00 AM to 5:00 PM EST

Package Labeling:

- ages 12+
- cough suppressant
- relieves cough for up to 8 hours
- non-drowsy / non-narcotic

**adult longlasting
COUGH RELIEF**
Dextromethorphan
HBR, 15 mg

NDC82725-1010-1
Compare to the active
ingredient in Robitussin®
Long-Acting Cough Gels™



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

IMPORTANT: READ THE DIRECTIONS AND WARNINGS BEFORE USE

Drug Facts

Active ingredient (in each softgel) *Purpose*
Dextromethorphan HBR, 15 mgCough suppressant

Use temporarily relieves cough due to minor throat and bronchial irritation as may occur with a cold.

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(Continued on back of the label)

*This product is not manufactured or distributed by Pfizer, Inc., owner of the registered trademark Robitussin® Lingerin Cold Long-Acting CoughGels®

Distributed By:
Cabinet Health P.B.C
Brooklyn, NY 11222
REV 11/24
Made in India

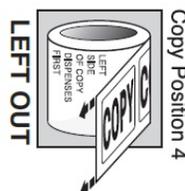
ITEM# 10010-01



LOT:

EXP:

NON VARNISH



FRONT
5.5" width

BACK
5.5" width

Drug Facts (continued)

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10010-01-DF

VALUMEDS COUGH RELIEF, DEXTROMETHORPHAN HBR

dextromethorphan hydrobromide capsule, liquid filled

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:82725-1010
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	15 mg

Inactive Ingredients

Ingredient Name	Strength
FD&C RED NO. 40 (UNII: WZB9127XOA)	
GELATIN (UNII: 2G86QN327L)	
GLYCERIN (UNII: PDC6A3C0OX)	
POLYETHYLENE GLYCOL 400 (UNII: B697894SGQ)	
PROPYLENE GLYCOL (UNII: 6DC9Q167V3)	
POVIDONE (UNII: FZ989GH94E)	
WATER (UNII: 059QF0KO0R)	
SORBITOL (UNII: 506T60A25R)	
TITANIUM DIOXIDE (UNII: 15FIX9V2JP)	

Product Characteristics

Color	red	Score	no score
Shape	OVAL	Size	7mm
Flavor		Imprint Code	904
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:82725-1010-1	120 in 1 BOTTLE; Type 0: Not a Combination Product	04/20/2025	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	M012	04/20/2025	

Labeler - Cabinet Health P.B.C. (117102391)