

**ACETAMINOPHEN- acetaminophen tablet**  
**Preferred Pharmaceuticals Inc.**

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**5427-Major**

***Drug Facts***

***Active Ingredient (in each tablet)***

Acetaminophen 500 mg

***Purpose***

Pain reliever/ Fever reducer

***Uses***

Temporarily reduces fever and relieves minor aches and pains due to:

- headache ☐
- muscular aches ☐
- backache ☐
- minor pain of arthritis ☐
- common cold ☐
- toothache ☐
- premenstrual and
- menstrual cramps

**Liver warning:** This product contains acetaminophen. Severe liver damage may occur if you take

- more than 4,000 mg of acetaminophen in 24 hours
- with other drugs containing acetaminophen
- 3 or more alcoholic drinks every day while using this product

**Allergy alert:** acetaminophen may cause severe skin reactions. Symptoms may include: skin reddening ,blisters, rash. If a skin reaction occurs, stop use and seek medical help right away.

- with any other drug containing acetaminophen (prescription or nonprescription). If you are not sure whether a drug contains acetaminophen, ask a doctor or pharmacist. ☐
- if you are allergic to acetaminophen or any of the inactive ingredients in this product

**Ask a doctor before use if you have** liver disease

**Ask a doctor or pharmacist before use if you are** taking the blood thinning drug warfarin

**Stop use and ask a doctor if** ☐

- pain gets worse or lasts more than 10 days ☐
- fever gets worse or lasts more than 3 days ☐
- new symptoms occur ☐
- redness or swelling is present

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.**

**Overdose warning:** In case of overdose, get medical help or contact a Poison Control Center right away. (1-800-222-1222) Quick medical attention is critical for adults as well as for children even if you do not notice any signs or symptoms.

### ***Directions***

- **do not take more than directed (see overdose warning)**

**adults and children 12 years and over:**

- take 2 tablets every 6 hours while symptoms last
- do not take more than 6 tablets in 24 hours, unless directed by a doctor
- do not take for more than 10 days unless directed by a doctor

**children under 12 years:** ask a doctor

### ***Other Information***

store at room temperature

Povidone, pregelatinized starch, sodium starch glycolate, stearic acid

### ***Questions or comments?***

**Call (800) 616-2471**

**SAVE CARTON FOR COMPLETE DRUG FACTS**

**Do not use if carton is open or if imprinted safety seal under cap is broken or missing.**

Distributed By:

**MAJOR® PHARMACEUTICALS**

17177 N Laurel Park Drive, Suite 233

Livonia, MI 48152

\*This product is not manufactured or distributed by McNeil Consumer Healthcare, owner of the registered trademark Tylenol®

**MAJOR**

THIS LARGE SIZE PACKAGE FOR DISPENSING PURPOSE ONLY

See New Warnings Information and Directions

**Acetaminophen Extra Strength Tablets**

Aspirin Free

Extra Strenght Pain reliever

Compare to active ingredient in Extra Strength Tylenol®\* Tablets

500mg each

**Relabeled By: Preferred Pharmaceuticals Inc.**

**NDC 68788-8636**

**Extra Strength APAP Tab 500mg**  
Generic for Tylenol

Each tablet contains: Acetaminophen 500mg

**Pkg Size:** Exp Date: #####/#####  
Lot#: Batch#:

Ins:  
Mfg: Major Pharmaceuticals  
Prod#:

**Warning**  
Liver Warning: this product contains acetaminophen. The maximum daily dose of this product is 6 tablets (3,000mg). Severe liver damage may occur if you take more than 4,000mg of acetaminophen in 24 hours, with other drugs containing acetaminophen; 3 or more alcoholic drinks every day while using this product. Ask a doctor before use if you have liver disease or are taking the blood thinning drug warfarin. Do not use with any other drug containing acetaminophen. Store at 15°- 30°C (59°- 86°F). Keep out of the reach of children. Tablet is round, white, scored and imprinted with 54 27.



CAUTION: Federal law PROHIBITS transfer of this drug to any person other than the patient for whom it was prescribed.



GTIN #####/#####  
SN #####/#####  
EXP #####/#####

Extra Strength APAP Tab 500mg  
Qty: Ins:  
Lot: Bat:  
Prod# (NDC):

Extra Strength APAP Tab 500mg  
Qty: Ins:  
Lot: Bat:  
Prod# (NDC):

Extra Strength APAP Tab 500mg  
Qty:  
Insurance NDC:  
Lot: Bat:

Extra Strength APAP Tab 500mg  
Qty: Ins:  
Lot: Bat:  
Prod# (NDC):

**Directions English**  
Take \_\_\_ tablet(s) every \_\_\_ hours.

**Instrucciones Espanol:**  
Toma \_\_\_ tableta(s) cada \_\_\_ horas.

Log

Chart

Billing

Patient

<b>ACETAMINOPHEN</b>			
acetaminophen tablet			
Product Information			
<b>Product Type</b>	HUMAN OTC DRUG	<b>Item Code (Source)</b>	NDC:68788-8636(NDC:0904-6730)
<b>Route of Administration</b>	ORAL		
Active Ingredient/Active Moiety			
<b>Ingredient Name</b>	<b>Basis of Strength</b>	<b>Strength</b>	
ACETAMINOPHEN (UNII: 362O9ITL9D) (ACETAMINOPHEN - UNII:362O9ITL9D)	ACETAMINOPHEN	500 mg	
Inactive Ingredients			
<b>Ingredient Name</b>	<b>Strength</b>		
STARCH, CORN (UNII: O8232NY3SJ)			
STEARIC ACID (UNII: 4ELV7Z65AP)			
POVIDONE K30 (UNII: U725QWY32X)			

**SODIUM STARCH GLYCOLATE TYPE A POTATO (UNII: 5856J3G2A2)**

### Product Characteristics

<b>Color</b>	white	<b>Score</b>	2 pieces
<b>Shape</b>	ROUND	<b>Size</b>	12mm
<b>Flavor</b>		<b>Imprint Code</b>	54;27
<b>Contains</b>			

### Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68788-8636-2	20 in 1 BOTTLE; Type 0: Not a Combination Product	04/17/2024	
2	NDC:68788-8636-3	30 in 1 BOTTLE; Type 0: Not a Combination Product	04/17/2024	
3	NDC:68788-8636-5	50 in 1 BOTTLE; Type 0: Not a Combination Product	04/17/2024	
4	NDC:68788-8636-1	100 in 1 BOTTLE; Type 0: Not a Combination Product	04/17/2024	

### Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
OTC Monograph Drug	343	04/17/2024	

**Labeler** - Preferred Pharmaceuticals Inc. (791119022)

**Registrant** - Preferred Pharmaceuticals Inc. (791119022)

### Establishment

Name	Address	ID/FEI	Business Operations
Preferred Pharmaceuticals Inc.		791119022	REPACK(68788-8636)

Revised: 5/2025

Preferred Pharmaceuticals Inc.