

**12 HR RELIEF COUGH DM- dextromethorphan polistirex suspension
CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED**

CVS Pharmacy, Inc. 12 HR Relief Cough DM Drug Facts

Active ingredient (in each 5 mL)

Dextromethorphan polistirex equivalent to 30 mg dextromethorphan hydrobromide

Purpose

Cough suppressant

Uses

temporarily relieves

- cough due to minor throat and bronchial irritation as may occur with the common cold or inhaled irritants
- the impulse to cough to help you get to sleep

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.

Allergy Alert: Contains sodium metabisulfite, a sulfite that may cause allergic-type reactions.

Ask a doctor before use if you have

- chronic cough that lasts as occurs with smoking, asthma, or emphysema
- cough that occurs with too much phlegm (mucus)

Stop use and ask a doctor if

- side effects occur. You may report side effects to FDA at 1-800-FDA-1088.
- cough lasts more than 7 days, cough comes back, or occurs with fever, rash or headache that lasts. 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

- **shake bottle well before use**
- measure only with dosing cup provided
- do not use dosing cup with other products
- dose as follows or as directed by doctor
- mL = milliliter

adults and children 12 years of age and over	10 mL every 12 hours, not to exceed 20 mL in 24 hours
children 6 to under 12 years of age	5 mL every 12 hours, not to exceed 10 mL in 24 hours
children 4 to under 6 years of age	2.5 mL every 12 hours, not to exceed 5 mL in 24 hours
children under 4 years of age	do not use

Other information

- each 5 mL contains: **sodium 5 mg**
- store at 20° to 25° C (68° to 77° F)
- dosing cup provided

Inactive ingredients

D&C Red #30 aluminum lake, D&C Yellow #10 aluminum lake, glycerin, high fructose corn syrup, methylparaben, natural and artificial orange flavor, polysorbate 80, polyvinyl acetate, povidone, propylparaben, purified water, sodium metabisulfite, sodium polystyrene sulfonate, sucrose, tartaric acid, tragacanth gum, triacetin, xanthan gum

Questions or comments?

1-800-719-9260

Package/Label Principal Display Panel

CVS™

Orange-Flavored Liquid

12 HR RELIEF COUGH DM

Dextromethorphan Polistirex

Extended-Release Oral Suspension

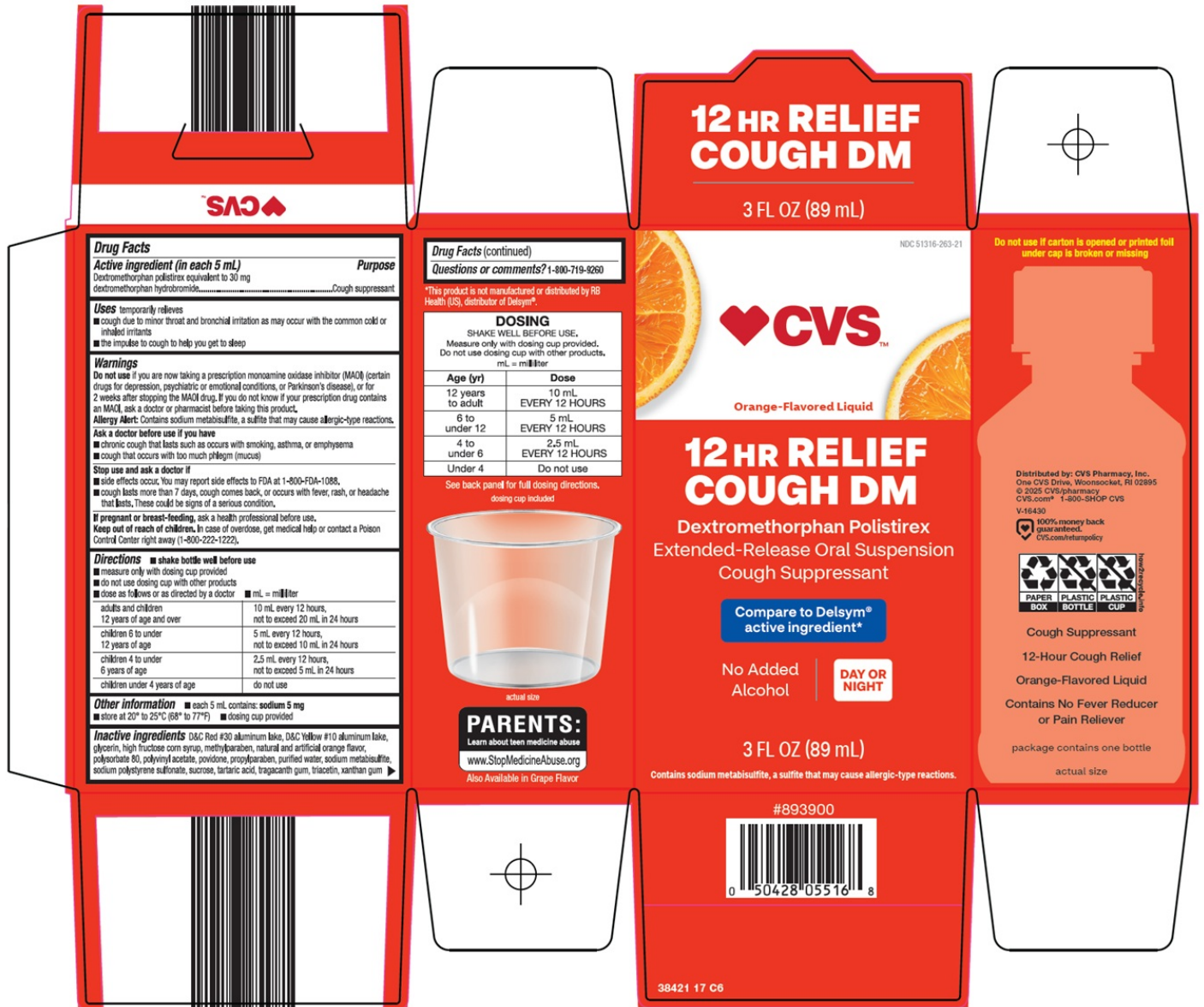
Cough Suppressant

Compare to Delsym[®] active ingredient

No Alcohol Added | DAY OR NIGHT

3 FL OZ (89 mL)

Contains sodium metabisulfite, a sulfite that may cause allergic-type reactions.



12 HR RELIEF COUGH DM

dextromethorphan polistirex suspension

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:51316-263
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RT19KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	30 mg in 5 mL

Inactive Ingredients

Ingredient Name	Strength
POLISTIREX (UNII: 5H9W9GTW27)	
D&C RED NO. 30 ALUMINUM LAKE (UNII: GE75M6YV5W)	
D&C YELLOW NO. 10 ALUMINUM LAKE (UNII: CQ3XH3DET6)	
GLYCERIN (UNII: PDC6A3C0OX)	
HIGH FRUCTOSE CORN SYRUP (UNII: XY6UN3QB6S)	
METHYLPARABEN (UNII: A2I8C7HI9T)	
POLYSORBATE 80 (UNII: 6OZP39ZG8H)	
POLYVINYL ACETATE (UNII: 32K497ZK2U)	
POVIDONE, UNSPECIFIED (UNII: FZ989GH94E)	
PROPYLPARABEN (UNII: Z8IX2SC1OH)	
WATER (UNII: 059QF0KO0R)	
SODIUM METABISULFITE (UNII: 4VON5FNS3C)	
SODIUM POLYSTYRENE SULFONATE (UNII: 1699G8679Z)	
SUCROSE (UNII: C151H8M554)	
TARTARIC ACID (UNII: W4888I119H)	
TRAGACANTH (UNII: 2944357O2O)	
TRIACETIN (UNII: XHX3C3X673)	
XANTHAN GUM (UNII: TTV12P4NEE)	

Product Characteristics

Color	ORANGE	Score	
Shape		Size	
Flavor	ORANGE	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:51316-263-21	1 in 1 CARTON	04/14/2026	
1		89 mL in 1 BOTTLE; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA091135	04/14/2026	

Labeler - CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED (062312574)

Revised: 4/2026

CVS WOONSOCKET PRESCRIPTION CENTER, INCORPORATED