

MUCUS RELIEF DM MAXIMUM STRENGTH- guaifenesin, dextromethorphan hbr tablet

Chain Drug Consortium, LLC

Drug Facts

Active ingredients (in each extended-release tablet)

Dextromethorphan HBr 60 mg

Guaifenesin 1200 mg

Purpose

Cough Suppressant

Expectorant

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

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 regards for timing of meals
- adults 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&Cyellow #10 aluminum lake, hypromellose, lactose monohydrate, magnesium stearate, microcrystalline cellulose, povidone, talc

Questions or comments?

Call **1-877-753-3935** Monday-Friday 9AM-5PM EST

Principal Display Panel

*COMPARE TO THE ACTIVE INGREDIENTS IN MAXIMUM STRENGTH MUCINEX® DM

MAXIMUM STRENGTH

Mucus Relief DM

GUAIFENESIN 1200 MG

EXPECTORANT

DEXTROMETHORPHAN HBr 60 MG

COUGH SUPPRESSANT

- Controls Cough
- Thins & Loosens Mucus

Extended release tablets

*This product is not manufactured or distributed Reckitt Benckiser LLC, 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: Pharmacy Value Alliance, LLC
 407 East Lancaster Avenue,
 Wayne, PA 19087

Package Label

Drug Facts	
Active ingredients (in each extended-release tablet) Dextromethorphan HBr 60 mg Guaifenesin 1200 mg	Purposes Cough Suppressant Expectorant
Uses <ul style="list-style-type: none"> helps loosen phlegm (mucus) and thin bronchial secretions to rid the bronchial passageways of bothersome mucus and make coughs more productive temporarily relieves <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 the reach of children. In case of overdose, get medical help or contact a Poison Control Center right away (1-800-222-1222).	
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MAXIMUM STRENGTH
Mucus Relief DM

MAXIMUM STRENGTH
Mucus Relief DM
GUAIFENESIN 1200 MG
EXPECTORANT
DEXTROMETHORPHAN HBr 60 MG
COUGH SUPPRESSANT

- Controls cough
- Thins and loosens mucus

12 HOUR

Actual Size

14 Extended-release tablets

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.

Lot No.:
 Exp. Date:

PREMIER VALUE Maximum Strength Mucus Relief DM

MUCUS RELIEF DM MAXIMUM STRENGTH
 guaifenesin, dextromethorphan hbr tablet

Product Information

Product Type	HUMAN OTC DRUG	Item Code (Source)	NDC:68016-674
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
DEXTROMETHORPHAN HYDROBROMIDE (UNII: 9D2RTI9KYH) (DEXTROMETHORPHAN - UNII:7355X3ROTS)	DEXTROMETHORPHAN HYDROBROMIDE	60 mg
GUAIFENESIN (UNII: 495W7451VQ) (GUAIFENESIN - UNII:495W7451VQ)	GUAIFENESIN	1200 mg

Inactive Ingredients

Ingredient Name	Strength
CARBOMER 934 (UNII: Z135WT9208)	
SILICON DIOXIDE (UNII: ETJ7Z6XBU4)	
D&C YELLOW NO. 10 (UNII: 355W5USQ3G)	
HYPROMELLOSE, UNSPECIFIED (UNII: 3NXW29V3WO)	
LACTOSE MONOHYDRATE (UNII: EWQ57Q8I5X)	
MAGNESIUM STEARATE (UNII: 70097M6I30)	
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)	
POVIDONE (UNII: FZ989GH94E)	
TALC (UNII: 7SEV7J4R1U)	

Product Characteristics

Color	yellow	Score	no score
Shape	OVAL	Size	22mm
Flavor		Imprint Code	AN039
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:68016-674-14	14 in 1 CARTON	11/29/2019	12/31/2026
1		1 in 1 BLISTER PACK; Type 0: Not a Combination Product		
2	NDC:68016-674-28	28 in 1 CARTON	11/29/2019	12/31/2026
2		1 in 1 BLISTER PACK; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA209692	11/29/2019	12/31/2026

Labeler - Chain Drug Consortium, LLC (101668460)

Revised: 6/2025

Chain Drug Consortium, LLC