

# Wyoming Formulary Coverage –

For Adult Patients\*

(Rx's Needed for Approval)



## Mucinex®

Prescribe / NDC #

### Maximum Strength MUCINEX® D Extended-Release Bi-layer Tablets

Per tablet - 1200 mg guaifenesin + 120 mg pseudoephedrine HCl

24 count / 63824-041-24

### MUCINEX® D Extended-Release Bi-layer Tablets

Per tablet - 600 mg guaifenesin + 60 mg pseudoephedrine HCl

18 count / 63824-057-18  
36 count / 63824-057-36

### Maximum Strength MUCINEX® DM Extended-Release Bi-layer Tablets

Per tablet - 1200 mg guaifenesin + 60 mg dextromethorphan HBr

14 count / 63824-072-35  
28 count / 63824-072-36  
42 count / 63824-072-46

### MUCINEX® DM Extended-Release Bi-layer Tablets

Per tablet - 600 mg guaifenesin + 30 mg dextromethorphan HBr

20 count / 63824-056-32  
40 count / 63824-056-34

### Maximum Strength MUCINEX® Extended-Release Bi-layer Tablets

Per tablet - 1200 mg guaifenesin

14 count / 63824-023-35  
28 count / 63824-023-36  
42 count / 63824-023-46

### MUCINEX® Extended-Release Bi-layer Tablets

Per tablet - 600 mg guaifenesin

6 count / 63824-008-36  
20 count / 63824-008-32  
40 count / 63824-008-34  
100 count / 63824-008-15  
500 count / 63824-008-50

### Maximum Strength† MUCINEX® Fast-Max® Cold, Flu & Sore Throat Liquid

Per 20 mL - 650 mg acetaminophen + 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl

6 fl oz / 63824-015-66  
9 fl oz / 63824-015-69

### Maximum Strength† MUCINEX® Fast-Max® Congestion & Headache Liquid

Per 20 mL - 650 mg acetaminophen + 400 mg guaifenesin + 10 mg phenylephrine HCl

6 fl oz / 63824-536-66

### Maximum Strength† MUCINEX® Fast-Max® Day Time/Night Time Cold & Flu Liquids

Day: Per 20 mL - 650 mg acetaminophen + 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl

Night: Per 20 mL - 650 mg acetaminophen + 25 mg diphenhydramine HCl + 10 mg phenylephrine HCl

6 fl oz x 2 / 63824-549-26

### Maximum Strength† MUCINEX® Fast-Max® Severe Congestion & Cough Liquid

Per 20 mL - 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl

6 fl oz / 63824-540-66  
9 fl oz / 63824-540-69

### Maximum Strength† MUCINEX® Fast-Max® Severe Congestion & Cough Caplets

Per caplet - 10 mg dextromethorphan HBr + 200 mg guaifenesin + 5 mg phenylephrine HCl

20 count / 63824-193-20

## Delsym®

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### DELSYM® 12 Hour Liquids

Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange Flavors

Grape 3 fl oz / 63824-171-63  
Grape 5 fl oz / 63824-171-65  
Orange 3 fl oz / 63824-175-63  
Orange 5 fl oz / 63824-175-65

### DELSYM® Cough+ Chest Congestion DM Liquid

Per 20 mL - 20 mg dextromethorphan HBr + 400 mg guaifenesin – Cherry Flavor

6 fl oz / 63824-213-66

For Pediatric Patients\*

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## Mucinex®

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### MUCINEX® Children's Multi-Symptom Cough, Cold & Fever Liquid

Per 10 mL - 325 mg acetaminophen + 10 mg dextromethorphan HBr + 200 mg guaifenesin + 5 mg phenylephrine HCl – Very Berry Flavor

4 fl oz / 63824-948-27

### MUCINEX® Children's Multi-Symptom Cold Liquid

Per 5 mL - 5 mg dextromethorphan HBr + 100 mg guaifenesin + 2.5 mg phenylephrine HCl – Very Berry Flavor

4 fl oz / 63824-949-01

### MUCINEX® Children's Day Time Multi-Symptom Cold & MUCINEX® Children's Night Time Multi-Symptom Cold Liquids

Day: Per 5 mL - 5 mg dextromethorphan HBr + 100 mg guaifenesin + 2.5 mg phenylephrine HCl – Very Berry Flavor

Night: Per 10 mL - 325 mg acetaminophen + 12.5 mg diphenhydramine HCl + 5 mg phenylephrine HCl – Very Berry Flavor

4 fl oz x 2 / 63824-955-74

### MUCINEX® Children's Chest Congestion Mini-Melts™

Per granule packet - 100 mg guaifenesin – Bubble Gum Flavor

12 count / 63824-941-11

### MUCINEX® Children's Cough Mini-Melts™

Per granule packet - 5 mg dextromethorphan HBr + 100 mg guaifenesin – Orange Creme Flavor

12 count / 63824-942-31

## Delsym®

Prescribe / NDC #

### Children's DELSYM® 12 Hour Liquids

Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange Flavors

Grape 3 fl oz / 63824-173-63  
Grape 5 fl oz / 63824-173-65  
Orange 3 fl oz / 63824-177-63  
Orange 5 fl oz / 63824-177-65

For more information about MUCINEX, call 1-866-682-4639 or visit [www.mucinex.com/professional](http://www.mucinex.com/professional).  
For more information about DELSYM, call 1-866-682-4639 or visit [www.delsym.com/professional](http://www.delsym.com/professional).

\*The use of these medications is for the approved indications only and should be dispensed according to the proper dosing instructions. REV. 080819  
†Per 4-hour dose. Use as directed. ©2019 RB Health Distributed by: RB Health (US)