

India's trusted Health Test @Home Service

National Reference Laboratory in Delhi NCR



Booking ID : 12753250962

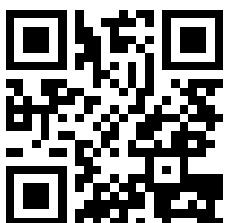
Sample Collection Date : 11/Feb/2025

Gracy KI

Female, 62 Yrs

A Comprehensive Health Analysis Report

AI Based Personalized Report for You



INDIA'S FIRST & ONLY CREDIBILITY CHECK FOR YOUR LAB REPORT

Check the authenticity of your lab report with machine data

Scan the QR using any QR code scanner

HEALTH ANALYSIS

Personalized Summary & Vital Parameters

Gracy KI

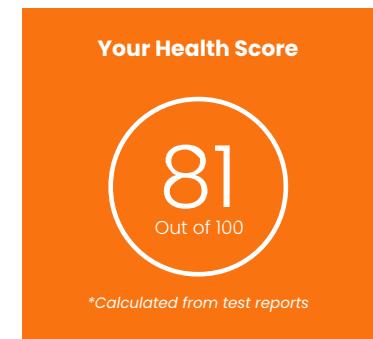
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Gracy KI,

Congratulations, We have successfully completed your health diagnosis. This is a big step towards staying on top of your health and identify potential to improve!

10 Vital Health Parameters of a Human Body Ecosystem

Below are the health parameters which require routine checkups for primary healthcare. The view also includes *personalised information* depending on the tests you have taken.



Thyroid Function

Thyroid Stimulating Hormone (TSH)-Ultrasensitive : 2.34 µIU/mL
• Everything looks good



Vitamin B12

455 pg/ml
• Everything looks good



Cholesterol Total

198.6 mg/dl
• Everything looks good



Liver Function

Alanine Aminotransferase (ALT/SGPT) : 15.3 U/L
• Everything looks good



Kidney Function

Serum Creatinine : 0.71 mg/dl
• Everything looks good



Vitamin D

10.73 ng/ml
• Concern



Iron studies

Serum Iron : 85.9 ug/dl
• Everything looks good



HbA1c

5.8 %
• Concern



Complete Hemogram

Haemoglobin (HB) : 13.8 g/dL
• Everything looks good



New Features Report Summary

New Features

Understanding laboratory reports can be complex, often leading to unwarranted anxiety.

At Healthians, we understand that you shouldn't have to rely on a Google search to decipher your own health report. That's why we offer comprehensive summaries that are easy to understand.

Gracy KI

Booking ID 12753250962 | Sample Collection Date: 11/Feb/2025

Patient Summary Report

Overview:

Thank you for sharing your recent health test results. It's important to remember that test results can sometimes show variations that may not necessarily indicate a serious health issue. Let's take a closer look at the areas that need attention and discuss some supportive steps you can take.

Summary of Deranged Parameters:

Your test results indicate a few areas where values are outside the normal range. These include vitamin levels, cholesterol, blood cell counts, and liver function markers. While these findings may seem concerning, they can often be managed effectively with lifestyle adjustments and monitoring.

Suggestions for Improvement:

1. Nutritional Support:

Consider incorporating foods rich in vitamin D, such as fatty fish, fortified dairy products, and egg yolks, into your diet. Sunlight exposure is also a natural way to boost vitamin D levels.

2. Heart Health Focus:

To help manage cholesterol levels, aim for a balanced diet that includes plenty of fruits, vegetables, whole grains, and healthy fats. Regular physical activity can also play a significant role in maintaining heart health.

3. Hydration and Kidney Health:

Ensure you are drinking enough water throughout the day, as proper hydration can support kidney function and overall health. Including foods that are low in phosphorus may also be beneficial.

4. Regular Monitoring:

Keeping track of your health through regular check-ups can help you and your healthcare team monitor these parameters over time. This proactive approach can provide peace of mind and help you stay on top of your health.

Remember, small changes can lead to significant improvements in your overall well-being. Taking these steps can help you feel more empowered about your health journey.

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Customer Since	: 11/Feb/2025	Sample Temperature	: Maintained ✓	
Sample Type	: Whole Blood EDTA	Report Status	: Final Report	

DEPARTMENT OF BIOCHEMISTRY HBA1C

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
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HbA1c - Glycosylated Hemoglobin

HbA1c (Glycosylated Hemoglobin)	5.80	%	4.4 - 5.7
Method: HPLC			
Average Estimated Glucose - plasma	119.76		

Method: Calculated

INTERPRETATION:

AS PER AMERICAN DIABETES ASSOCIATION (ADA):

REFERENCE GROUP

Non diabetic	<5.7
At Risk (Prediabetes)	5.7 – 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	

GLYCOSYLATED HEMOGLOBIN (HbA1c) in %	
<5.7	
5.7 – 6.4	
>= 6.5	
Age > 19 Years	
Goals of Therapy:	< 7.0
Actions Suggested:	>8.0
Age < 19 Years	
Goal of therapy:	<7.5

REMARKS :

- 1.HbA1c is used for monitoring diabetic control. It reflects the mean plasma glucose over three months.
 - 2.HbA1c may be falsely low in diabetics with hemolytic disease. In these individuals a plasma fructosamine level may be used which evaluates diabetes over 15 days.
 3. HbA1C may be increased in patients with polycythemia or post-splenectomy.
 4. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
 5. Any sample with >15% HbA1C should be suspected of having a hemoglobin variant, especially in a non-diabetic patients
 6. HbA1c target in pregnancy is to attain level <6 % .
 7. HbA1c target in pediatric age group is to attain level < 7.5 % .
- Method : ion-exchange high-performance liquid chromatography (HPLC).
 Reference : American Diabetes Associations. Standards of Medical Care in Diabetes 2023



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Test Name	Value	Unit	Bio. Ref Interval
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Fasting Blood Sugar

 Glucose, Fasting

Method: Hexokinase

Machine: BECKMAN DXC 700AU

97.7

mg/dl

70 - 100

American Diabetes Association Reference Range :

Normal	: < 100 mg/dl
Impaired fasting glucose(Prediabetes)	: 100 - 126 mg/dl
Diabetes	: >= 126 mg/dl

Conditions that can result in an elevated blood glucose level include: Acromegaly, Acute stress (response to trauma, heart attack, and stroke for instance), Chronic kidney disease, Cushing syndrome, Excessive consumption of food, Hyperthyroidism, Pancreatitis

A low level of glucose may indicate hypoglycemia, a condition characterized by a drop in blood glucose to a level where first it causes nervous system symptoms (sweating, palpitations, hunger, trembling, and anxiety), then begins to affect the brain (causing confusion, hallucinations, blurred vision, and sometimes even coma and death). A low blood glucose level (hypoglycemia) may be seen with: Adrenal insufficiency, Drinking excessive alcohol, Severe liver disease, Hypopituitarism, Hypothyroidism, Severe infections, Severe heart failure, Chronic kidney (renal) failure, Insulin overdose, Tumors that produce insulin (insulinomas), Starvation.

Rheumatoid Factor (RA) - Quantitative - Serum

 RHEUMATOID FACTOR

<10

IU/mL

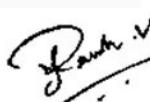
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Method: Immunoturbidimetry

Machine: BECKMAN DXC 700AU

The rheumatoid factor (RF) test is primarily used to help diagnose rheumatoid arthritis (RA) and to help distinguish RA from other forms of arthritis or other conditions that cause similar symptoms. A cyclic citrullinated peptide (CCP) antibody test can help diagnose RA in someone who has joint inflammation with symptoms that suggest but do not yet meet the criteria of RA and may be ordered along with RF or if the RF result is negative. The RF test must be interpreted in conjunction with a person's symptoms and clinical history. A negative RF test does not rule out RA.

About 20% of people with RA will have very low levels of or no detectable RF. In these cases, a CCP antibody test may be positive and used to confirm RA. Positive RF test results may also be seen in 1-5% of healthy people and in some people with conditions such as: Sjogren syndrome, scleroderma, systemic lupus erythematosus (lupus), sarcoidosis, endocarditis, tuberculosis, syphilis, HIV/AIDS, hepatitis, infectious mononucleosis, cancers such as leukemia and multiple myeloma, parasitic infection, or disease of the liver, lung or kidney.



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Test Name	Value	Unit	Bio. Ref Interval
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Amylase - Serum

AMYLASE	56.0	U/L	22 - 80
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Method: CNPG3

Machine: BECKMAN DXC 700AU

Amylase is produced by exocrine pancreas and also by the salivary glands. It is used to evaluate pancreatic function and also used in the diagnosis and management of pancreatitis.

Diseases resulting in elevation of plasma alpha-amylase include: acute pancreatitis, parotitis, alcoholism, renal insufficiency and diseases such as viral hepatitis, AIDS, abdominal typhoid, sarcoidosis and trauma to the upper abdomen. There is also a detectable increase in amylase after an ERCP procedure. In acute pancreatitis, amylase increases 5-6 hours after the onset of symptoms and remains elevated for 2-5 days. The increase in plasma activity does not reflect disease severity and conversely, extensive destruction of the pancreas may not cause a significant increase in the plasma concentration of pancreatic alpha-amylase.



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Page 3 of 18



SIN No:E2396213

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Test Name	Value	Unit	Bio. Ref Interval
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C-Reactive Protein (CRP) -Quantitative

 C-REACTIVE PROTEIN (CRP)
(QUANTITATIVE)

Method: Immunoturbidimetric
Machine: BECKMAN DXC 700AU

C-reactive protein (CRP) is one of the most sensitive acute-phase reactants for inflammation. Measuring changes in the concentration of CRP provides useful diagnostic information about the level of acuity and severity of a disease. Unlike ESR, CRP levels are not influenced by hematologic conditions such as anemia, polycythemia etc.

Increased levels are consistent with an acute inflammatory process. After onset of an acute phase response, the serum CRP concentration rises rapidly (within 6-12 hours and peaks at 24-48 hours) and extensively. Concentrations above 100 mg/L are associated with severe stimuli such as major trauma and severe infection (sepsis).



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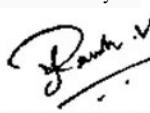
Test Name	Value	Unit	Bio. Ref Interval
Liver Function Test (LFT)			
Serum Bilirubin, (Total) Method: Diazo Machine: BECKMAN DXC 700AU	1.65	mg/dl	0.3 - 1.2
Serum Bilirubin, (Direct) Method: Diazo Machine: BECKMAN DXC 700AU	0.29	mg/dl	0 - 0.2
Serum Bilirubin, (Indirect) Method: Calculated	1.36	mg/dl	0.0 - 0.8
Aspartate Aminotransferase (AST/SGOT) Method: IFCC Machine: BECKMAN DXC 700AU	19.30	U/L	3 - 35
Alanine Aminotransferase (ALT/SGPT) Method: IFCC Machine: BECKMAN DXC 700AU	15.3	U/L	3 - 35
Alkaline Phosphatase (ALP) Method: IFCC AMP Buffer Machine: BECKMAN DXC 700AU	85.80	U/L	33-98
Gamma Glutamyl Transferase (GGT) Method: IFCC Machine: BECKMAN DXC 700AU	17.2	U/L	5- 38
Serum Total Protein Method: Biuret Machine: BECKMAN DXC 700AU	7.91	gm/dl	6.6 - 8.3
Serum Albumin Method: Bromo Cresol Green(BCG) Machine: BECKMAN DXC 700AU	4.46	g/dl	3.5 - 5.2
Serum Globulin Method: Calculated	3.45	gm/dl	3.0 - 4.2
Albumin/Globulin Ratio Method: Calculated	1.29	Ratio	1.2 - 2.0
SGOT/SGPT Ratio Method: Calculated	1.26	Ratio	0.7 - 1.4

Bilirubin is a yellowish pigment found in bile and is a breakdown product of normal heme catabolism. Elevated levels results from increased bilirubin production (eg hemolysis and ineffective erythropoiesis); decreased bilirubin excretion (eg; obstruction and hepatitis); and abnormal bilirubin metabolism (eg; hereditary and neonatal jaundice). Conjugated (direct) bilirubin is elevated more than unconjugated (indirect) bilirubin in viral hepatitis; drug reactions, alcoholic liver disease conjugated (direct) bilirubin is also elevated more than unconjugated (indirect)bilirubin when there is some kind of blockage of the bile ducts like in Gallstones getting into the bile ducts tumors & Scarring of the bile ducts. Increased unconjugated (indirect) bilirubin may be a result of hemolytic or pernicious anemia, transfusion reaction & a common metabolic



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(NABL Accreditation Certificate No. MC-4391)


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Test Name	Value	Unit	Bio. Ref Interval
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condition termed Gilbert syndrome.

AST levels increase in viral hepatitis, blockage of the bile duct ,cirrhosis of the liver, liver cancer, kidney failure, hemolytic anemia, pancreatitis, hemochromatosis. Ast levels may also increase after a heart attack or strenuous activity. ALT is commonly measured as a part of a diagnostic evaluation of hepatocellular injury, to determine liver health. Elevated ALP levels are seen in Biliary Obstruction, Osteoblastic Bone Tumors, Osteomalacia, Hepatitis, Hyperparathyroidism, Leukemia, Lymphoma, page's disease, Rickets, Sarcoidosis etc.

Serum total protein, also known as total protein, is a biochemical test for measuring the total amount of protein in serum..Protein in the plasma is made up of albumin and globulin. Higher-than-normal levels may be due to: Chronic inflammation or infection, including HIV and hepatitis B or C, Multiple myeloma,Waldenstrom's disease. Lower-than-normal levels may be due to: Agammaglobulinemia, Bleeding (hemorrhage), Burns, Glomerulonephritis, Liver disease, Malabsorption, Malnutrition, Nephrotic - Human serum albumin is the most abundant protein in human blood plasma. It is produced in the liver.Albumin constitutes about half of the blood serum protein. Low blood albumin levels (hypoalbuminemia) can be caused by: Liver disease like cirrhosis of the liver, nephrotic syndrome, protein-losing enteropathy, Burns, hemodilution, increased vascular permeability or decreased lymphatic clearance, malnutrition and wasting etc.



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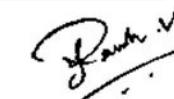
Test Name	Value	Unit	Bio. Ref Interval
Iron study			
Serum Iron Method: TPTZ Machine: BECKMAN DXC 700AU	85.9	ug/dl	60 - 180
UIBC Method: Nitroso-PSAP Machine: BECKMAN DXC 700AU	240.70	ug/dl	155 - 355
Serum Total Iron Binding Capacity (TIBC) Method: FE+UIBC (saturation with iron)	326.6	µg/dl	250 - 400
Transferrin Saturation % Method: Calculated	26.3	%	15 - 50

Iron participates in a variety of vital processes in the body varying from cellular oxidative mechanisms to the transport and delivery of oxygen to body cells. It is a constituent of the oxygen-carrying chromoproteins, haemoglobin and myoglobin, as well as various enzymes, such as cytochrome oxidase and peroxidases.

Serum iron may be increased in hemolytic, megaloblastic and aplastic anemias, and in hemochromatosis acute leukemia, lead poisoning, pyridoxine deficiency, thalassemia, excessive iron therapy, and after repeated transfusions. Drugs causing increased serum iron include chloramphenicol, cisplatin, estrogens (including oral contraceptives), ethanol, iron dextran, and methotrexate. Iron can be decreased in iron-deficiency anemia, acute and chronic infections, carcinoma, nephrotic syndrome hypothyroidism, in protein-calorie malnutrition and after surgery. Diurnal variation is seen in serum iron levels with normal values obtained in the midmorning, low values in midafternoon and very low values near midnight.

TIBC measures the blood's capacity to bind iron with transferrin (TRF). Estrogens and oral contraceptives increase TIBC levels. Asparaginase, chloramphenicol, corticotropin, cortisone, and testosterone decrease the TIBC levels.

Transferrin is the primary plasma iron transport protein, which binds iron strongly at physiological pH. Transferrin is generally only 25% to 30% saturated with iron. The additional amount of iron that can be bound is the unsaturated iron-binding capacity (UIBC). Transferrin saturation represents the number of iron-binding sites that are occupied. It is a better index of iron stores than serum iron alone. Transferrin saturation is decreased in iron deficiency anemia (usually <10% in established deficiency).



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Test Name	Value	Unit	Bio. Ref Interval
Kidney Function Test1 (KFT1)			
Serum Creatinine Method: Jaffes Kinetic Machine: BECKMAN DXC 700AU	0.71	mg/dl	0.6 - 1.3
GFR, ESTIMATED Method: Calculated	96.08	mL/min/1.73m ²	
Serum Uric Acid Method: Uricase Machine: BECKMAN DXC 700AU	5.7	mg/dl	2.6-6.0
Serum Calcium Method: Arsenazo Machine: BECKMAN DXC 700AU	9.8	mg/dl	8.8 - 10.6
Serum Phosphorus Method: Phosphomolybdate complex Machine: BECKMAN DXC 700AU	4.6	mg/dl	2.5 - 4.5
Serum Sodium Method: ISE (Indirect) Machine: BECKMAN DXC 700AU	143	mmol/L	136 - 146
Serum Chloride Method: ISE (Indirect) Machine: BECKMAN DXC 700AU	103	mmol/L	101 - 109
Blood Urea Method: Urease Machine: BECKMAN DXC 700AU	30	mg/dl	17 - 43
Blood Urea Nitrogen (BUN) Method: Calculated	13.8	mg/dl	7.92 - 20.03
Bun/Creatinine Ratio Method: Calculated	19.42	Ratio	12:1 - 20:1
Urea/Creatinine Ratio	41.55		

The kidneys play a vital role in the excretion of waste products and toxins such as urea, creatinine and uric acid, regulation of extracellular fluid volume, serum osmolality and electrolyte concentrations, as well as the production of hormones like erythropoietin and 1,25 dihydroxy vitamin D and renin. Assessment of renal function is important in the management of patients with kidney disease or pathologies affecting renal function. Tests of renal function have utility in identifying the presence of renal disease, monitoring the response of kidneys to treatment, and determining the progression of renal disease.

Urea is synthesized in the liver as the final product of protein and amino acid metabolism. Urea synthesis is therefore dependent on daily protein intake and endogenous protein metabolism.

Creatinine is a metabolic product of creatine and phosphocreatine, which are both found almost exclusively in muscle.

Uric Acid is the major product of purine catabolism in humans. Uric acid levels are used to monitor the treatment of gout.



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Test Name

Value

Unit

Bio. Ref Interval

Measurement of calcium is used in the diagnosis and treatment of parathyroid disease, a variety of bone diseases, chronic renal disease, urolithiasis and tetany. Phosphorus levels are increased in acute or chronic renal failure with decreased GFR .

Sodium is an electrolyte, and it helps regulate the amount of water in and around the cells & the balance of chemicals in the body called acids and bases.

Chloride is a negatively charged ion that works with other electrolytes such as potassium, sodium, and bicarbonate, to help regulate the amount of fluid in the body and maintain the acid-base balance.



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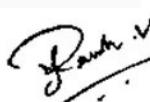
Test Name	Value	Unit	Bio. Ref Interval
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Lipid Profile

 Total Cholesterol Method: Enzymatic Machine: BECKMAN DXC 700AU	198.6	mg/dl	Desirable : <200 Borderline: 200-239 High : >/=240
 Serum Triglycerides Method: Enzymatic Machine: BECKMAN DXC 700AU	109.8	mg/dl	Desirable : <150 Borderline high : 150-199 High : 200-499 Very high : >= 500
 Serum HDL Cholesterol Method: Enzymatic immuno inhibition Machine: BECKMAN DXC 700AU	61.2	mg/dl	40 - 60
 LDL Cholesterol Calculated Method: Calculated	115.44	mg/dl	Optimal : <100 near /above Optimal:100 - 129 Borderline High: 130- 159 High : 160 - 189 Very High :>/=190
 VLDL Cholesterol Calculated Method: Calculated	21.96	mg/dl	<30
 Total CHOL / HDL Cholesterol Ratio Method: Calculated	3.25	Ratio	3.30 - 4.40
 LDL / HDL Cholesterol Ratio Method: Calculated	1.89	Ratio	Desirable/Low Risk: 0.5-3.0 Line/Moderate Risk: 3.0-6.0 Elevated/High Risk: >6.0
 HDL / LDL Cholesterol Ratio Method: Calculated	0.53	Ratio	Optimal->0.4 Moderate-0.4 to 0.3 High-<0.3
 Non-HDL Cholesterol Method: Calculated	137.4	mg/dl	0.0 - 160.0

Dyslipidemia is a disorder of fat or lipoprotein metabolism in the body and includes lipoprotein overproduction or deficiency. Dyslipidemias means increase in the level of one or more of the following: Total Cholesterol, low density lipoprotein (LDL) and/or triglyceride concentrations.

Dyslipidemia also includes a decrease in the "good" cholesterol or high-density lipoprotein (HDL) concentration in the blood. Cholesterol is a steroid carried in the bloodstream as lipoprotein, necessary for cell membrane functioning and as a precursor to bile acids, progesterone ,vitamin D ,estrogens ,glucocorticoids and mineralocorticoids.



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Test Name

Value

Unit

Bio. Ref Interval

HDL is termed "good cholesterol" because its levels are inversely related to the risk of Coronary heart disease. LDL cholesterol is termed the "bad cholesterol" and their increased levels are associated with increased risk of atherosclerosis and coronary heart disease. Lipid level assessments must be made following 9 to 12 hours of fasting, otherwise assay results might lead to erroneous interpretation. Healthians labs report biological reference intervals (normal ranges) in accordance with the recommendations of The National Cholesterol Education Program (NCEP) & Adult Treatment Panel IV (ATP IV) guidelines providing the most desirable targets of various circulating lipid fractions in the blood. NCEP recommends that all adults above 20 years of age must be screened for abnormal lipid levels.



**DR RAMESH VISHWANATH
MBBS, MD PATHOLOGY
HEALTHIANS LABS**



Patient Name	: Gracy KI	Barcode	: E2396213	
Age/Gender	: 62Y OM OD /Female	Sample Collected On	: 11/Feb/2025 06: 40AM	
Order Id	: 12753250962	Sample Received On	: 11/Feb/2025 11: 45AM	
Referred By	: Self	Report Generated On	: 11/Feb/2025 01: 13PM	
Customer Since	: 11/Feb/2025	Sample Temperature	: Maintained ✓	
Sample Type	: URINE	Report Status	: Final Report	

DEPARTMENT OF CLINICAL PATHOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
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Urine Routine & Microscopy Extended

PHYSICAL EXAMINATION

 Colour	Yellow	Pale Yellow
 Method: Visual	50.00	mL
 Method: Visual	Clear	Clear

CHEMICAL EXAMINATION

 Specific Gravity	1.005	1.001 - 1.035
Method: Dipstick-Ion exchanges Machine: Urine analyzer LAURA		
 pH	6.5	4.5 - 7.0
Method: Automated/ strip (Mixed acidic-basic incubator) Machine: Urine analyzer LAURA		
 Glucose	Negative	Negative
Method: Automated / strip Benedict's test Machine: Urine analyzer LAURA		
 Urine Protein	Negative	Negative
Method: Automated/ strip (Protein error of pH indicator) Machine: Urine analyzer LAURA		
 Ketones	Negative	Negative
Method: Automated/ strip (Legals test)/ Rotheras test Machine: Urine analyzer LAURA		
 Urobilinogen	Normal	Normal
Method: Dipstick-Ehrlichs Test Machine: Urine analyzer LAURA		
 Bilirubin	Negative	Negative
Method: Automated / strip (Diazonium salt)/ Fouchets test Machine: Urine analyzer LAURA		
 Nitrite	Negative	Negative
Method: Dipstick-Griess Test Machine: Urine analyzer LAURA		
 Blood	1+	Nil
Method: Automated/ strip (Oxidation of chromogene)/ Benzid		



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(NABL Accreditation Certificate No. MC-4391)

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DEPARTMENT OF CLINICAL PATHOLOGY

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Test Name

Machine: Urine analyzer LAURA



Leucocyte Esterase

Value

Unit

Bio. Ref Interval

2+

Method: Dipstick-Esterase

Machine: Urine analyzer LAURA

MICROSCOPIC EXAMINATION



Pus Cells

10-12

/HPF

0 - 5

Method: Microscopy



Epithelial cells

3-4

/HPF

0 - 5

Method: Microscopy



RBCs

6-8

/HPF

Nil

Method: Microscopy



Casts

Nil

Nil

Method: Microscopy



Crystals

Nil

Nil

Method: Microscopy



Bacteria

Absent

Absent

Method: Microscopy



Yeast Cell

Nil



Others (Non Specific)

Nil

Method: Microscopy



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Patient Name	: Gracy KI	Barcode	: E2396213	
Age/Gender	: 62Y OM OD /Female	Sample Collected On	: 11/Feb/2025 06:40AM	
Order Id	: 12753250962	Sample Received On	: 11/Feb/2025 11:25AM	
Referred By	: Self	Report Generated On	: 11/Feb/2025 12:43PM	
Customer Since	: 11/Feb/2025	Sample Temperature	: Maintained ✓	
Sample Type	: WHOLE BLOOD EDTA	Report Status	: Final Report	

DEPARTMENT OF HAEMATOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
Complete Blood Count			
Haemoglobin (HB)	13.8	g/dL	12.0-15.0
Method: Photometric Measurement Machine: BECKMAN DXH 800			
Total Leucocyte Count (TLC)	9.8	10 ³ /uL	4.0-10.0
Method: Coulter Principle Machine: BECKMAN DXH 800			
Hematocrit (PCV)	41.4	%	36.0-46.0
Method: Calculated Machine: BECKMAN DXH 800			
Red Blood Cell Count (RBC)	4.90	10 ⁶ /µl	3.80-4.80
Method: Coulter Principle Machine: BECKMAN DXH 800			
Mean Corp Volume (MCV)	84.4	fL	83.0-101.0
Method: Derived from RBC Histogram Machine: BECKMAN DXH 800			
Mean Corp Hb (MCH)	28.1	pg	27.0-32.0
Method: Calculated Machine: BECKMAN DXH 800			
Mean Corp Hb Conc (MCHC)	33.2	g/dL	31.5-34.5
Method: Calculated Machine: BECKMAN DXH 800			
RDW - CV	13.6	%	11.6-14.0
Method: Derived from RBC Histogram Machine: BECKMAN DXH 800			
RDW - SD	39.40	fL	39.0-46.0
Method: Derived from RBC Histogram Machine: BECKMAN DXH 800			
Mentzer Index	17.22	Ratio	
Method: Calculated			
RDWI	234.25	Ratio	
Method: Calculated			
Green and king index	70	Ratio	
Method: Calculated			
Differential Leucocyte Count			
Neutrophils	40.0	%	40 - 80



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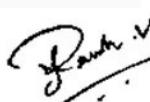
Patient Name	: Gracy KI	Barcode	: E2396213	
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Sample Type	: WHOLE BLOOD EDTA	Report Status	: Final Report	

DEPARTMENT OF HAEMATOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
Method: VCS Technology Machine: BECKMAN DXH 800			
Lymphocytes	51.3	%	20-40
Method: VCS Technology Machine: BECKMAN DXH 800			
Monocytes	6.4	%	02 - 10
Method: VCS Technology Machine: BECKMAN DXH 800			
Eosinophils	1.7	%	01 - 06
Method: VCS Technology Machine: BECKMAN DXH 800			
Basophils	0.6	%	00 - 02
Method: VCS Technology Machine: BECKMAN DXH 800			
Absolute Leucocyte Count			
Absolute Neutrophil Count (ANC)	3.92	10 ³ /uL	2.0-7.0
Method: Calculated Machine: BECKMAN DXH 800			
Absolute Lymphocyte Count (ALC)	5.03	10 ³ /uL	1.0-3.0
Method: Calculated Machine: BECKMAN DXH 800			
Absolute Monocyte Count	0.63	10 ³ /uL	0.2-1.0
Method: Calculated Machine: BECKMAN DXH 800			
Absolute Eosinophil Count (AEC)	0.17	10 ³ /uL	0.02-0.5
Method: Calculated Machine: BECKMAN DXH 800			
Absolute Basophil Count	0.06	10 ³ /uL	0.02 - 0.10
Method: Calculated Machine: BECKMAN DXH 800			
Platelet Count(PLT)	294	10 ³ /μl	150-410
Method: Coulter Principle Machine: BECKMAN DXH 800			
MPV	8.2	fL	7 - 9
Method: Derived from PLT Histogram Machine: BECKMAN DXH 800			

The International Council for Standardization in Haematology (ICSH) recommends reporting of absolute counts of various WBC subsets for clinical decision making. This test has been performed on a fully automated 5 part differential cell counter which counts over 10,000 WBCs to derive differential counts. A complete blood



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DEPARTMENT OF HAEMATOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name

Value

Unit

Bio. Ref Interval

count is a blood panel that gives information about the cells in a patient's blood, such as the cell count for each cell type and the concentrations of Hemoglobin and platelets. The cells that circulate in the bloodstream are generally divided into three types: white blood cells (leukocytes), red blood cells (erythrocytes), and platelets (thrombocytes). Abnormally high or low counts may be physiological or may indicate disease conditions, and hence need to be interpreted clinically.

The Mentzer index is used to differentiate iron deficiency anaemia beta thalassemia trait. If a CBC indicates microcytic anaemia, these are two of the most likely causes, making it necessary to distinguish between them.

If the quotient of the mean corpuscular volume divided by the red blood cell count is then 13, thalassemia is more likely. If the result is greater than 13, then iron-deficiency anaemia is more likely.



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Order Id	: 12753250962	Sample Received On	: 11/Feb/2025 11: 21AM	
Referred By	: Self	Report Generated On	: 11/Feb/2025 01: 42PM	
Customer Since	: 11/Feb/2025	Sample Temperature	: Maintained ✓	
Sample Type	: Serum	Report Status	: Final Report	

DEPARTMENT OF IMMUNOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
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Vitamin B12

 VITAMIN B12

Method: CLIA

Machine: UniCel DxI 800

455

pg/ml

222 - 1439

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency. Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12. The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.

Please note change in Biological Reference interval.

Vitamin D, 25-Hydroxy

 VITAMIN D (25 - OH VITAMIN D)

10.73

ng/ml

30 - 100

Method: CLIA

Machine: UniCel DxI 800

Biological Reference Ranges:

Deficiency	Below 20 ng/ml
Insufficiency	20 - 30 ng/ml
Sufficiency	30 - 100 ng/ml
Toxicity	Above 100 ng/ml.

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs).

The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D. Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.



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Customer Since	: 11/Feb/2025	Sample Temperature	: Maintained ✓	
Sample Type	: Serum	Report Status	: Final Report	

DEPARTMENT OF IMMUNOLOGY

Healthy India 2025 Full Body Checkup Prime

Test Name	Value	Unit	Bio. Ref Interval
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Thyroid Profile (Total T3,T4, TSH)

 Tri-Iodothyronine (T3, Total) Method: CLIA Machine: UniCel DxI 800	1.03	ng/ml	0.87 - 1.78
 Thyroxine (T4, Total) Method: CLIA Machine: UniCel DxI 800	10.13	ug/dl	5.48-14.28
 Thyroid Stimulating Hormone (TSH)-Ultrasensitive Method: CLIA Machine: UniCel DxI 800	2.339	µIU/mL	0.38 - 5.33

Pregnancy interval	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

Healthians recommends that the following potential sources of variation should be considered while interpreting thyroid hormone results:

1. Thyroid hormones undergo rhythmic variation within the body this is called circadian variation in TSH secretion: Peak levels are seen between 2-4 AM. Minimum levels seen between 6-10 AM. This variation may be as much as 50% thus, influence of sampling time needs to be considered for clinical interpretation.
2. Circulating forms of T3 and T4 are mostly reversibly bound with Thyroxine binding globulins (TBG), and to a lesser extent with albumin and Thyroid binding Pre-Albumin. Thus the conditions in which TBG and protein levels alter such as chronic liver disorders, pregnancy, excess of estrogens, androgens, anabolic steroids and glucocorticoids may cause misleading total T3, total T4 and TSH interpretations.
3. Total T3 and T4 levels are seen to have physiological rise during pregnancy and in patients on steroid treatment.
4. T4 may be normal even in the presence of hyperthyroidism under the following conditions : T3 thyrotoxicosis, Hypoproteinemia related reduced binding, during intake of certain drugs (eg Phenyltoin, Salicylates etc)
5. Neonates and infants have higher levels of T4 due to increased concentration of TBG
6. TSH levels may be normal in central hypothyroidism, recent rapid correction of hypothyroidism or hyperthyroidism, pregnancy, phenyltoin therapy etc.
7. TSH values of <0.03 uIU/mL must be clinically correlated to evaluate the presence of a rare TSH variant in certain individuals which is undetectable by conventional methods.
8. Presence of Autoimmune disorders may lead to spurious results of thyroid hormones.
9. Various drugs influence the levels of thyroid hormones such as L-Dopa, Lithium, Glucocorticoids, Phenyltoin etc.
10. Healthians recommends evaluation of unbound fractions, that is free T3 (fT3) and free T4 (fT4) for clinic-pathologic correlation, as these are the metabolically active forms.

*** End Of Report ***



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HEALTHIANS LABS



Terms & Conditions:

- 1) Machine Data is available for last 7 days only. In case of manual testing & outsourced testing, machine data will not be available.
- 2) CBC parameters may vary when it is manually reviewed by the Pathologists.
- 3) **For Thyroid tests** - Circulating TSH shows a normal circadian rhythm with a peak between 11pm-5am and a nadir between 5pm-8pm. TSH values are also lowered after food when compared to fasting in a statistically significant manner. This variation is of the order of ±50%, hence time of day and fasting status have influence on the reported TSH level.
- 4) **For Lipid profile** - Lipid and Lipoprotein concentrations vary during the normal course of daily activity. Also, certain drugs, diet and alcohol can have lasting effects on Triglyceride levels. To obtain best results for Lipid testing, a strict fasting of 10-12 hours with a light meal on the previous night is recommended.
- 5) Test results released pertain to the specimen submitted.
- 6) Test results are dependent on the quality of the sample received by the Lab.
- 7) The tests are carried out in the lab with the presumption that the specimen belongs to the patient named or identified in the bill/test request form/booking ID.
- 8) The reported results are for information and are subject to confirmation and interpretation by the referring doctor to co-relate clinically.
- 9) Test results may show interlaboratory variations.
- 10) Liability of Healthians for deficiency of services or other errors and omissions shall be limited to the fee paid by the patient for the relevant laboratory services.
- 11) This report is not subject to use for any medico-legal purposes.
- 12) Few of the tests might be outsourced to partner labs as and when required.
- 13) This report is not intended to replace but to lead by providing comprehensive information. It is recommended that you consult your doctor/physician for interpretation of results.
- 14) All reports might not be applicable for individuals less than 18, pregnant women or individuals suffering from diseases for which health test has not been performed or symptoms not diagnosed.
- 15) This report is based on preventive health test screening and is meant for a healthy lifestyle. It does not provide any recommendation for life threatening situations.
- 16) It is strongly recommended to take required precautions for allergic reactions or sensitivities.
- 17) Authorised partner labs as mentioned for certain tests are as below:
HL/PL/001- Metropolis Healthcare Ltd
HL/PL/002- Thyrocare Technologies Limited
HL/PL/003- Lifecell International Pvt. Ltd. - Laboratory Services
HL/PL/004- Modern Diagnostic & Research Centre

ADVISORY
Health Advisory

Gracy KI

Booking ID : I2753250962 | Sample Collection Date : 11/Feb/2025

No Data Body Mass Index

0'0" Height (ft/in)

No Data Weight (kgs.)

Physical Activity
No Data

Smoke
No Data

Food Preference
No Data

Alcohol
No Data

Medication
No Data

Family History
No Data

Blood Pressure
No Data

Pulse Rate
No Data

Waist (In Cm)
No Data

Hip Circumference (In Cm)
No Data

SPO2 Levels
No Data

Sugar Levels
No Data

Additional Remarks :

NA

**SUGGESTED
NUTRITION**
SUGGESTED NUTRITION
Do's

- Have a balanced diet that includes whole grains, pulses, dairy, fruits, vegetables, nuts and healthy fats
- Include fruits like apples, berries and melons in your diet

Dont's

- Avoid flavoured and seasoned foods
- Decrease intake of colas and sugary drinks
- Avoid saturated fats, trans fats, oily and greasy foods like cakes, creamy or fried foods

**SUGGESTED
LIFESTYLE**
SUGGESTED LIFESTYLE
Do's

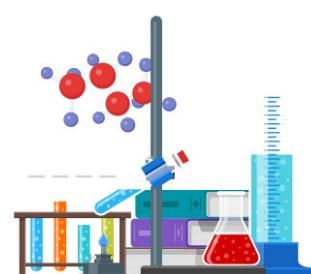
- Have breakfast early in morning and a light high fiber snack for dinner

Dont's

- Avoid overexertion without having food or drink
- Avoid strenuous exercises
- Avoid smoking and alcohol

**SUGGESTED
FUTURE
TESTS**
SUGGESTED FUTURE TESTS

- Complete Hemogram - **Every 2 Month**
- Peripheral Smear Examination By Pathologist - **Every 2 Month**



HEALTH ADVISORY**Suggestions for Health & Well-being**

Gracy KI

Booking ID : 12753250962 | Sample Collection Date : 11/Feb/2025

PHYSICAL ACTIVITY**PHYSICAL ACTIVITY**

Physical activities can vary from Regular walks (Brisk or normal), Jogging , Sports, Stretching, Yoga to light weight lifting etc. It is recommended to partake in physical activity at least 30 minutes a day for 3-4 days a week.

If regular workout is difficult, then we can adapt changes such as using stairs instead of lift/escalators and doing household work!

**STRESS MANAGEMENT****STRESS MANAGEMENT**

Managing stress is an essential part of well-being. Some day to day changes can help such as having sufficient sleep (6-8 hours), indulging yourself in meditation, positive attitude towards lifestyle, using humor, traveling, talking to people whom you feel comfortable with and making time for hobbies by doing what you love to do.

BALANCED DIET**BALANCED DIET**

A balanced diet is the key to healthy lifestyle. Include Whole grains, vegetables, whole fruits, nuts, seeds, beans, plant oils in your diet.

It is recommended to always have a high protein breakfast and a light dinner. Avoid items such as processed foods, potatoes and high calorie/sugar products. Don't forget to drink water regularly!

**BMI**

BMI recommended range is 18.5 to 24.9. Your BMI is 29.35, which is on a higher side.

Please fill your Health Karma to know your BMI results
BMI for your body helps prevent many untimely diseases and goes a long way.

BMI CHART

UNDERWEIGHT	NORMAL	OVERWEIGHT	OBESITY
Less than 18.5	Between 18.5 - 24.9	Between 25.0 - 29.9	More than 30

BMI

Supplement Suggestions

Gracy KI

Booking ID : I2753250962 | Sample Collection Date : 11/Feb/2025

Your test report has indicated that you have certain deficiencies in your body which may hamper your health & wellbeing in the longer run.

In order to fulfill the gaps in nutrition and promote a healthier body we suggest you the following supplements mentioned below:

Deficiency/Out of Range Parameter(s)	Suggested Supplement	
Glycated Hemoglobin (HbA1c)	DIABEAT-EASE	To order, call 1800-572-000-4
Bilirubin Total, Serum	LIV-UP	

Suggestions for Improving Deficiencies



DIABEAT-EASE

Manage diabetes the all-natural way!

An all-natural supplement that helps in lowering your blood sugar levels, thus preventing the onset of diabetes and managing it if you are already a diabetic. By reducing blood sugar levels, this naturally-sourced diabetes supplement enables you to lead a productive life, while managing your diabetes in a safe and natural way.

Remember, ignoring diabetes can cause a lot of serious complications, including:

- Vision & Hearing Loss | • Nerve Damage | • Heart Attack | • Stroke | • Dementia

Infused with the ages-proven goodness of all-natural ingredients, DIABEAT-EASE is the perfect supplement to help you control diabetes without having to worry about side-effects. Sourced from nature's own pharmacy of herbs, the ingredients in DIABEAT-EASE present the following benefits:

Saunf

Helps control blood pressure & manage diabetes

Karela

Reduces blood sugar & reduces cholesterol levels

Chirata

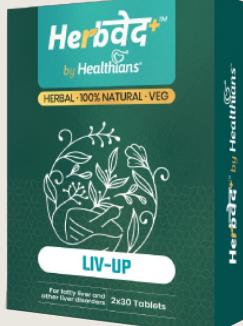
Helps manage high blood pressure, diabetes & detoxifies blood

Ashwagandha

Reduces blood sugar, cholesterol, & triglycerides levels

Vijayasar

Helps manage diabetes by lowering down sugar cravings



LIV-UP

De-toxify your body with a healthier liver.

LIV-UP is a scientifically formulated and clinically proven all-natural supplement that takes care of your liver and its functions. This ayurvedic supplement keeps your liver cool, and optimally functioning, thus promoting healthy digestion. Take the all-natural road to robust liver health with LIV-UP.

Untreated or unmanaged liver issues can cause grave and even lethal complications, which include:

- Liver Infections | • Liver Cancer | • Liver Failure | • Elevated Blood Toxin Levels | • Liver Cirrhosis

Infused with the ages-proven goodness of all-natural ingredients, LIV-UP is the perfect supplement to promote and maintain good liver health, without having to worry about side effects. Sourced from nature's own pharmacy of herbs, the ingredients in LIV-UP present the following benefits:

Methi Dana

Reducing the risk of developing fatty liver disease.

Triphala

Promotes liver function & boosts immunity

Ginger

Supports liver health & prevents liver inflammation

Yellow Myrobalan

Keeps the liver cool & promotes optimal functioning

Kulki

Reduces inflammation & protects the liver from injury

Supplement Suggestions

Gracy KI

Booking ID : I2753250962 | Sample Collection Date : 11/Feb/2025

Deficiency/Out of Range Parameter(s)	Suggested Supplement
Vitamin D Total-25 Hydroxy	VITAMIN D3

[To order, call 1800-572-000-4](#)

Suggestions for Improving Deficiencies



VITAMIN D3

Improve bone health with enhanced calcium absorption, the natural way

Make your muscles and bones stronger with VITAMIN D3. Sourced from natural substances, it helps in regulating the absorption of calcium and phosphorus, which help keep your bones strong and enhancing the normal immune system functioning. Vitamin D3 is an essential nutrient that's critical for normal growth and development of bones and teeth, as well as improved resistance against certain diseases.

Remember, a lack of vitamin D3 can cause dangerous health situations.

- Rickets (in children) | • Brittle Bones | • Osteoporosis | • Weakened Bones (in adults)

Strengthens Bones & Muscles

Protects Against Pneumonia & Acute Respiratory Infections

Helps in Reducing Depression

Boosts Heart Health

Aids in Kidney Disease Treatment



GOLD-YEAR PLUS

Provides mental & physical strength

Studies have proven that our brain continuously keeps changing during our entire lifetime and its functioning actually becomes less efficient. It's a known fact that a decline in cognitive skills and memory is just part and parcel of the natural aging process. But it is possible to keep your mind sharp as you keep getting older. Gold Years Plus is a natural formulation with ingredients like brahmi, shankpushpi, ashwagandha and other herbs that are helpful in rejuvenating the mind, improving concentration and memory and it even proves to be helpful in Alzheimers.

Not giving importance to brain health as you age can lead to a lot of health issues that might crop up such as:

- Processing speed decreases with age | Memory declines | Paying attention deteriorates | Energy levels decline | Risk of Alzheimer's Disease increases

Infused with the ages-proven goodness of all-natural ingredients, GOLD YEARS PLUS is the perfect supplement for your golden years enriched with the following benefits:

Brahmi | Shankpushpi | Ashwagandha | Jatamansi | Giloy


[To order, call 1800-572-000-4](#)




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About Healthians Labs

How we control Report Accuracy at Healthians



Quality Control

We follow Quality control to ensure both **precision & accuracy** of patient results.



Machine Data

We save patient's result values **directly from machines** ensuring no manipulations & no fake values.



QR Code

QR Code based authenticity check on all its reports



Calibration

We make use of calibrators to evaluate the **precision & accuracy** of measurement equipment.



Equipment

Our Labs are equipped with state-of-the-art instruments with **cutting edge technology** to provide faster & reliable results.



EQA

Our Labs participate in EQA & show proven accuracy by checking **laboratory performance** through external agency or facility.

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