smart
Health Report

An Insightful Health Analytics Report
for Easier Understanding

Redcliffe labs
Healthy India Ki Trusted Lab

Prepared For

Your Health at a Glance – A Personalized Journey

Report Sections

1 **Body Summary**
A visual snapshot of your overall health, simple and easy to understand

2 **Quick Health Highlights**
Your health scores and a single view of all abnormal results for quick attention

3 **Lab Report Overview**
Understand at a glance which tests are normal and which are abnormal

4 **Personalized Health Advisory**
Actionable insights and expert guidance tailored just for you

5 **Doctor's Reference Report**
Complete lab results with interpretations to share with your healthcare provider

How to Read This Report

This comprehensive health report provides detailed insights into your test results. Each section offers different perspectives on your health status, from visual summaries to detailed analysis and personalized recommendations.

SMART HEALTH REPORT

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Health Summary

BLOOD COUNTS

Test Name	Result
TLC	10.2
Lymphocytes.	3.77
Please Watchout	

CARDIAC PROFILE

Test Name	Result
Total Cholesterol	219
Please Watchout	

KIDNEY PROFILE

Everything looks good

DIABETES MONITORING

Everything looks good

LIVER PROFILE

Everything looks good

ANEMIA STUDIES

Everything looks good

Quick Health Summary

Health Score : Importance

A single combined score that reflects your overall wellbeing by analyzing key vitals, lifestyle habits, and body metrics to show how healthy you are right now.

90-100 EXCELLENT HEALTH	**75-89** GOOD HEALTH	**60-74** FAIR HEALTH	**45-59** NEEDS ATTENTION

30-44 POOR HEALTH

Personal Insights - Health Score

77

Your health analysis indicates a strong performance in most areas, particularly in liver, kidney, and diabetes health. However, there is a notable concern regarding infection, which may require attention. Overall, maintaining a balanced lifestyle and regular check-ups will support your well-being.

Moderate
77
Critical   Healthy

Summary of Key Health Indicators

Total Parameters Tested	Abnormal Results
72	**4**

Health Status by Body System

Profile	Abnormal / Total	Key Results
Blood Counts	2 / 14	● **TLC: 10.2 10^3/µl** (Normal: 4–10 10^3/µl) ● **Lymphocytes.: 3.77 10^3/µl** (Normal: 1–3 10^3/µl)
Blood Clotting	1 / 5	● **PCT: 0.4 %** (Normal: 0.17–0.32 %)
Cardiac Profile	1 / 2	● **Total Cholesterol: 219 mg/dL** (Normal: 0–200 mg/dL)
Liver Profile	0 / 10	**All Normal**
Kidney Profile	0 / 13	**All Normal**
Anemia Studies	0 / 7	**All Normal**
Diabetes Monitoring	0 / 1	**All Normal**

Profile	Abnormal / Total	Key Results
Urinalysis	0 / 17	All Normal

Report Summary

● Normal   ● Abnormal   No color - Reference range not available

LIVER PROFILE

Test Name	Result unit	Range
● Bilirubin Total	0.6 mg/dL	< 1.2
● Bilirubin Direct	0.3 mg/dL	< 0.5
● Bilirubin Indirect	0.3 mg/dL	< 1
● SGOT/AST	21.2 U/L	5-34
● SGPT/ALT	17.2 U/L	< 55
SGOT/SGPT Ratio	1.23 %	
● Total Protein	7.8 g/dL	6.4-8.3
● Albumin	4.4 gm/dL	3.8-5
● Globulin	3.4 g/dL	2.3-3.5
● Albumin :Globulin Ratio	1.29	< 2.1

KIDNEY PROFILE

Test Name	Result unit	Range
● Blood Urea	23.5 mg/dL	19-44.1
● Bun	10.98 mg/dL	8.9-20.6
● Creatinine	0.9 mg/dL	0.72-1.25
eGFR (CKD-EPI)	123.06 ml/min/1.73 sq m	
● Bun/Creatinine Ratio	12.2	12-20
● Urea / Creatinine Ratio	26.11	25.68-42.8
● Uric Acid	5.9 mg/dL	3.5-7.2
● Calcium Serum	9.4 mg/dL	8.4-10.2
● Colour	Pale yellow	
● Deposit	Absent	
● Urine Glucose (sugar)	Negative	
● Yeast Cells	Absent	
● Amorphous deposits	Absent	

Report Summary

⊙ Normal ⊙ Abnormal   No color - Reference range not available

ANEMIA STUDIES

Test Name	Result unit	Range
⊙ Hemoglobin	14.8 g/dL	13-17
⊙ PCV	44.5 %	40-50
⊙ MCV	87.2 fl	83-101
⊙ MCH	28.9 pg	27-32
⊙ MCHC	33.2 g/dL	31.5-34.5
⊙ RDW (CV)	13.6 %	11.6-14
⊙ RDW-SD	41.8 fl	35.1-43.9

BLOOD COUNTS

Test Name	Result unit	Range
⊙ RBC Count	5.1 10^6/µl	4.5-5.5
⊙ TLC	**10.2** 10^3/µl	4-10
⊙ Neutrophils	58 %	40-80
⊙ Lymphocytes	37 %	20-40
⊙ Monocytes	3 %	2-10
⊙ Eosinophils	2 %	1-6
⊙ Basophils	0 %	< 2
⊙ Neutrophils.	5.92 10^3/µl	2-7
⊙ Lymphocytes.	**3.77** 10^3/µl	1-3
⊙ Monocytes.	0.31 10^3/µl	0.2-1
⊙ Eosinophils.	0.2 10^3/µl	0.02-0.5
⊙ Basophils.	0 10^3/µl	< 0.5
⊙ Platelet Count	402 10^3/µl	150-410
Mentzer Index	17.1 %	

BLOOD CLOTTING

Test Name	Result unit	Range
⊙ Mean Platelet Volume (MPV)	10.4 fL	9.3-12.1
⊙ PCT	**0.4** %	0.17-0.32
⊙ PDW	12.9 fL	8.3-25
⊙ P-LCR	30 %	18-50
⊙ P-LCC	121 10^9/L	44-140

SMART HEALTH REPORT

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Report Summary

● Normal ● Abnormal No color - Reference range not available

DIABETES MONITORING

Test Name	Result unit	Range
● Glucose Fasting	90.3 mg/dL	70-100

CARDIAC PROFILE

Test Name	Result unit	Range
● Total Cholesterol	**219** mg/dL	< 200
● Triglycerides	146 mg/dL	< 150

URINALYSIS

Test Name	Result unit	Range
● Volume	20 ml	
● Transparency	Clear	
● Reaction (pH)	6.0	4.5-8
● Specific Gravity	1.015	1.01-1.03
● Urine Protein (Albumin)	Negative	
● Urine Ketones (Acetone)	Negative	
● Blood	Negative	
Leucocyte esterase	Negative	
● Bilirubin Urine	Negative	
● Nitrite	Negative	
● Urobilinogen	Normal	
Pus Cells (WBCs)	1-2 /hpf	
● Epithelial Cells	1-2 /hpf	
● Red blood Cells	Absent /hpf	
● Crystals	Absent	
● Cast	Absent	
● Bacteria	Absent	

Health Advisory

● Normal (N)   ◉ Low (L)   ◉ High (H)

Cardiac Profile

Most people believe they are safe from heart diseases, but in reality, heart diseases are the leading cause of death in the world. There are many different forms of heart disease. Narrowing or blockage of the coronary arteries is the most common cause of heart disease, which are the vessels that supply blood to the heart. This is called coronary artery disease and it occurs slowly over time. It is the main cause of heart attacks.

Total Cholesterol: 219 mg/dL   ● **HIGH**

NORMAL   HIGH
< 200   > 200
You: 219

LABORATORY REPORT

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Patient NAME	:	a		
DOB/Age/Gender	:		Report STATUS :	
Patient ID / UHID	:		Barcode NO	:
Referred BY	:		Sample Type	:
Sample Collected	:		Report Date	:

L-M(EL)T-03094

ENTRY LEVEL TESTING
RECOGNITION PROGRAM

Test Description	Value(s)	Unit(s)	Reference Range

Vital Screening Package- Lite

Complete Blood Count (CBC)

Test Description	Value(s)	Unit(s)	Reference Range
RBC Parameters			
Hemoglobin *colorimetric*	14.8	g/dL	13.0 - 17.0
RBC Count *Electrical impedance*	5.1	10^6/µl	4.5 - 5.5
PCV *Calculated*	44.5	%	40 - 50
MCV *Calculated*	87.2	fl	83 - 101
MCH *Calculated*	28.9	pg	27 - 32
MCHC *Calculated*	33.2	g/dL	31.5 - 34.5
RDW (CV) * *Calculated*	13.6	%	11.6 - 14.0
RDW-SD * *Calculated*	41.8	fl	35.1 - 43.9
WBC Parameters			
TLC *Electrical impedance and microscopy*	**10.2**	10^3/µl	4 - 10
Differential Leucocyte Count			
Neutrophils	58	%	40-80
Lymphocytes	37	%	20-40
Monocytes	3	%	2-10
Eosinophils	2	%	1-6
Basophils	0	%	<2
Absolute Leukocyte Counts *Calculated*			
Neutrophils. *	5.92	10^3/µl	2 - 7
Lymphocytes. *	**3.77**	10^3/µl	1 - 3
Monocytes. *	0.31	10^3/µl	0.2 - 1.0
Eosinophils. *	0.2	10^3/µl	0.02 - 0.5
Basophils. *	**0**	10^3/µl	0.02 - 0.5
Platelet Parameters			
Platelet Count *Electrical impedance and microscopy*	402	10^3/µl	150 - 410
Mean Platelet Volume (MPV) * *Calculated*	10.4	fL	9.3 - 12.1

(*) Parameter(s) are outside the scope of tests recognized under the NABL M(EL)T Scheme.

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Consultant Pathologist

LABORATORY REPORT

Patient NAME :		Report STATUS :	
DOB/Age/Gender :		Barcode NO :	
Patient ID / UHID :		Sample Type :	
Referred BY :			
Sample Collected :		Report Date :	PM.

NABL-M(EL)T-03094

MEDICAL **ENTRY LEVEL** TESTING
ORATORY RECOGNITION PROGRAM

Test Description	Value(s)	Unit(s)	Reference Range
PCT * *Calculated*	**0.4**	%	0.17 - 0.32
PDW * *Calculated*	12.9	fL	8.3 - 25.0
P-LCR * *Calculated*	30	%	18 - 50
P-LCC * *Calculated*	121	10^9/L	44 - 140
Mentzer Index * *Calculated*	17.1	%	> 13

Interpretation:
CBC provides information about red cells, white cells and platelets. Results are useful in the diagnosis of anemia, infections, leukemias, clotting disorders and many other medical conditions.

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LABORATORY REPORT

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Patient NAME	:	Behera			
DOB/Age/Gender	:		Report STATUS	:	
Patient ID / UHID	:	625	Barcode NO	:	
Referred BY	:		Sample Type	:	
Sample Collected	:	AM	Report Date	:	

Test Description	Value(s)	Unit(s)	Reference Range

Blood Group ABO & Rh Typing

Blood Group *Tube Agglutination*	A	-	-
Rh Factor *Tube Agglutination*	Positive	-	-

Interpretation:
Interpreting the results of a blood group test involves understanding the ABO blood group and Rh factor results. We can interpret them as follows:

ABO Blood Grouping:
Blood Group A: Has A antigens on red blood cells and anti-B antibodies in the plasma.
Blood Group B: Has B antigens on red blood cells and anti-A antibodies in the plasma.
Blood Group AB: Has both A and B antigens on red blood cells and no anti-A or anti-B antibodies in the plasma.
Blood Group O: Has no A or B antigens on red blood cells but has both anti-A and anti-B antibodies in the plasma.

Rh Typing:
Rh-positive: Indicates the presence of the Rh antigen (D antigen) on red blood cells.
Rh-negative: Indicates the absence of the Rh antigen on red blood cells.

Interpreting your blood group involves identifying which antigens are present on your red blood cells (A, B, or both) and whether you are Rh-positive or Rh-negative. For example, if your blood group is A-positive, it means you have A antigens and Rh antigen on your red blood cells.

Knowing your blood group is important for medical purposes, such as blood transfusions, organ transplants, and during pregnancy to prevent potential complications related to blood compatibility.

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Booking Centre :- Baba Icchaswar Collection Center, Mukunda Prasad, Bypass, Po Pn College, Near PN College Gate, Khordha, Odisha- 752057

Processing Lab :- Redcliffe Lifetech Pvt. Ltd., Plot No. 144/C, Ground Floor, Chandeasekharpur, Bhubaneswar, District-Khordha, Pin-751016

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All Lab results are subject to clinical interpretation by qualified medical professional and this report is not subject to use for any medico-legal purpose.

LABORATORY REPORT

Patient NAME	:	Report STATUS :	NABL-M(EL)T-03094
DOB/Age/Gender	:	Barcode NO	:
Patient ID / UHID	:	Sample Type	:
Referred BY	:	Sample Type	:
Sample Collected	:	Report Date	:	PM.

Test Description	Value(s)	Unit(s)	Reference Range

Glucose Fasting

Glucose Fasting *Hexokinase*	90.3	mg/dL	70 - 100

Interpretation:

Status	Fasting plasma glucose in mg/dL
Normal	70 - 100
Impaired fasting glucose	101 - 125
Diabetes	$\geq$126

Reference : American Diabetes Association

Comment :
Blood glucose determinations in commonly used as an aid in the diagnosis and treatment of diabetes. Elevated glucose levels (hyperglycemia) may also occur with pancreatic neoplasm, hyperthyroidism, and adrenal cortical hyper function as well as other disorders. Decreased glucose levels (hypoglycemia) may result from excessive insulin therapy insulinoma, or various liver diseases.

Note
1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL or a random / 2 hour plasma glucose value of > or = 200 mg/dL with symptoms of diabetes mellitus.
2.Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis.

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LABORATORY REPORT

Patient NAME **:**	Report STATUS :	NABL-M(EL)T-03094
DOB/Age/Gender :	Barcode NO :	
Patient ID / UHID :	Sample Type :	EDICAL **ENTRY LEVEL** TESTING
Referred BY :	Sample Type :	RATORY RECOGNITION PROGRAM
Sample Collected :	Report Date :	PM.

Test Description	Value(s)	Unit(s)	Reference Range

Vital Screening Package- Lite

Cholesterol, Serum

Total Cholesterol *CHOD-PAP*	**219**	mg/dL	<200
Interpretation: Increasing concentrations of Total cholesterol and LDL cholesterol are both correlated with increasing risk of cardiovascular disease. The levels are used to monitor response to cholesterol lowering therapy.			

Triglycerides

Triglycerides *GPO-PAP*	146	mg/dL	<150
Interpretation: Triglyceride levels are increased in primary hyperlipidemia, pancreatitis, acute illnesses. Decreased triglyceride levels are seen in malnutrition, dietary change, recent weight loss, vigorous exercise.			

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LABORATORY REPORT

Patient NAME	:	a	
DOB/Age/Gender	:	Report STATUS :	
Patient ID / UHID	:	Barcode NO :	
Referred BY	:	Sample Type :	
Sample Collected	:	Report Date :	

Test Description	Value(s)	Unit(s)	Reference Range

LFT Basic

Test Description	Value(s)	Unit(s)	Reference Range
Bilirubin Total *Diazo*	0.6	mg/dL	0.2 - 1.2
Bilirubin Direct *Diazo Reaction*	0.3	mg/dL	0.0 - 0.5
Bilirubin Indirect * *Calculation (T Bil - D Bil)*	0.3	mg/dL	0.1 - 1.0
SGOT/AST *IFFC WITH P5P*	21.2	U/L	5 - 34
SGPT/ALT *IFFC WITH P5P*	17.2	U/L	0 to 55
SGOT/SGPT Ratio *	1.23	-	-
Total Protein *Biuret*	7.8	g/dL	6.4 - 8.3
Albumin *BCG*	4.4	gm/dL	3.8 - 5.0
Globulin * *Calculation (T.P - Albumin)*	3.4	g/dL	2.3 - 3.5
Albumin :Globulin Ratio * *Calculation (Albumin/Globulin)*	1.29	-	1.0 - 2.1

Interpretation:
1. A Liver Function Test (LFT) is a blood test that measures various enzymes, proteins, and substances produced or processed by the liver to assess its health and functionality.

2. Elevated levels of ALT and AST can indicate liver inflammation or damage, while high ALP and GGT levels may suggest bile duct issues or liver disease.

3. Elevated bilirubin levels can cause jaundice, indicating liver dysfunction.

4. Factors such as medications, diet, alcohol consumption, and health conditions like hepatitis or cirrhosis can affect test results.

5. Abnormal LFT results typically require further investigation through additional tests or imaging studies. LFTs are crucial for early detection of liver diseases, monitoring existing conditions, and evaluating treatment effectiveness.

6. Maintaining liver health through a balanced diet, regular exercise, moderation in alcohol consumption, and avoiding harmful substances is essential for overall well-being, with regular LFTs helping ensure timely intervention and management of liver-related issues.

KFT Basic

Test Description	Value(s)	Unit(s)	Reference Range
Blood Urea *Urease*	23.5	mg/dL	19 - 44.1
Bun * *Urease*	10.98	mg/dL	8.9 - 20.6

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LABORATORY REPORT

Patient NAME :		
DOB/Age/Gender :	Report STATUS : Final Report	
Patient ID / UHID :	Barcode NO : 56489855	
Referred BY :	Sample Type : Serum	
Sample Collected :	Report Date : Dec 04, 2025, 05:53 PM.	

Test Description	Value(s)	Unit(s)	Reference Range
Creatinine *Jaffer kinetic alkaline picrate*	0.9	mg/dL	0.72 - 1.25
eGFR (CKD-EPI) *	123.06	ml/min/1.73 sq m	Normal Or High: >= 90 Mild Or Decrease: 60-89 Mild To Moderate Decrease: 45-59 Mild To Severe Decrease: 30-44 Severe Decrease: 15-29 Kidney Failure: < 15
Bun/Creatinine Ratio * *Calculated*	12.2		12 - 20
Urea / Creatinine Ratio * *Calculated*	26.11		25.68- 42.8
Uric Acid *Uricase*	5.9	mg/dL	3.5 - 7.2
Calcium Serum *BAPTA*	9.4	mg/dL	8.4 - 10.2

Interpretation:
A kidney function test, is a critical diagnostic tool that assesses the health and efficiency of the kidneys through a series of blood tests. These tests commonly include urea, creatinine, blood urea nitrogen (BUN), calcium, and uric acid levels.

Urea: Urea is a waste product formed from the breakdown of proteins. Elevated levels may indicate impaired kidney function or other conditions affecting protein metabolism.

Creatinine: Creatinine is a waste product from muscle metabolism. Elevated levels in the blood can indicate reduced kidney function because healthy kidneys filter creatinine from the blood into the urine.

Blood Urea Nitrogen (BUN): BUN measures the amount of nitrogen in the blood that comes from urea. Elevated levels can indicate kidney dysfunction, dehydration, or other conditions affecting the kidneys or liver.

Calcium: Calcium levels are essential for bone health and other bodily functions. Abnormal calcium levels can sometimes indicate kidney disease, especially when calcium levels are too high (hypercalcemia).

Uric Acid: Uric acid is a waste product from the breakdown of purines, which are found in certain foods and are also formed by the body. Elevated uric acid levels can lead to conditions like gout or kidney stones.

Factors such as age, gender, race, muscle mass, and medications can influence test results, necessitating careful interpretation by healthcare providers. Regular kidney function testing is crucial for detecting and monitoring kidney conditions early, allowing for timely intervention and management to preserve kidney health and prevent complications associated with kidney disease.

"eGFR test is applicable for patients aged 18 years or more."

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LABORATORY REPORT

Patient NAME	:		
DOB/Age/Gender	:	Report STATUS	
Patient ID / UHID	:	Barcode NO	
Referred BY	:	Sample Type	
Sample Collected	:	Report Date	

Test Description	Value(s)	Unit(s)	Reference Range

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LABORATORY REPORT

Patient NAME	:		Report STATUS	:	NABL-M(EL)T-03094
DOB/Age/Gender	:		Barcode NO	:	
Patient ID / UHID	:		Sample Type	:	
Referred BY	:				
Sample Collected	:		Report Date	:	PM.

Test Description	Value(s)	Unit(s)	Reference Range

Urine Routine and Microscopic Examination

Test Description	Value(s)	Unit(s)	Reference Range
Physical Examination			
Volume *	20	ml	-
Colour *	Pale yellow	-	Pale yellow
Transparency *	Clear	-	Clear
Deposit *	Absent	-	Absent
Chemical Examination			
Reaction (pH) *Double Indicator*	6.0	-	4.5 - 8.0
Specific Gravity *Ion Exchange*	1.015	-	1.010 - 1.030
Urine Glucose (sugar) *Oxidase / Peroxidase*	Negative	-	Negative
Urine Protein (Albumin) *Acid / Base Colour Excahnge*	Negative	-	Negative
Urine Ketones (Acetone) *Legals Test*	Negative	-	Negative
Blood *Peroxidase Hemoglobin*	Negative	-	Negative
Leucocyte esterase *Enzymatic Reaction*	Negative	-	Negative
Bilirubin Urine *Coupling Reaction*	Negative	-	Negative
Nitrite *Griless Test*	Negative	-	Negative
Urobilinogen *Ehrlichs Test*	Normal	-	Normal
Microscopic Examination			
Pus Cells (WBCs) *	1-2	/hpf	0 - 5
Epithelial Cells *	1-2	/hpf	0 - 4
Red blood Cells *	Absent	/hpf	Absent
Crystals *	Absent	-	Absent
Cast *	Absent	-	Absent
Yeast Cells *	Absent	-	Absent
Amorphous deposits *	Absent	-	Absent
Bacteria *	Absent	-	Absent
Protozoa *	Absent	-	Absent

Interpretation:
URINALYSIS- Routine urine analysis assists in screening and diagnosis of various metabolic, urological, kidney and liver disorders.

Protein: Elevated proteins can be an early sign of kidney disease. Urinary protein excretion can also be temporarily elevated by strenuous

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LABORATORY REPORT

Patient NAME	:		
DOB/Age/Gender	:	Report STATUS :	NABL-M(EL)T-03094
Patient ID / UHID	:	Barcode NO :	
Referred BY	:	Sample Type :	
Sample Collected	:	Report Date :	PM.

Test Description	Value(s)	Unit(s)	Reference Range

exercise, orthostatic proteinuria, dehydration, urinary tract infections and acute illness with fever

Glucose: Uncontrolled diabetes mellitus can lead to presence of glucose in urine. Other causes include pregnancy, hormonal disturbances, liver disease and certain medications.

Ketones: Uncontrolled diabetes mellitus can lead to presence of ketones in urine. Ketones can also be seen in starvation, frequent vomiting, pregnancy and strenuous exercise.

Blood: Occult blood can occur in urine as intact erythrocytes or haemoglobin, which can occur in various urological, nephrological and bleeding disorders.

Leukocytes: An increase in leukocytes is an indication of inflammation in urinary tract or kidneys. Most common cause is bacterial urinary tract infection.

Nitrite: Many bacteria give positive results when their number is high. Nitrite concentration during infection increases with length of time the urine specimen is retained in bladder prior to collection.

pH: The kidneys play an important role in maintaining acid base balance of the body. Conditions of the body producing acidosis/ alkalosis or ingestion of certain type of food can affect the pH of urine.

Specific gravity: Specific gravity gives an indication of how concentrated the urine is. Increased specific gravity is seen in conditions like dehydration, glycosuria and proteinuria while decreased specific gravity is seen in excessive fluid intake, renal failure and diabetes insipidus.

Bilirubin: In certain liver diseases such as biliary obstruction or hepatitis, bilirubin gets excreted in urine.

Urobilinogen: Positive results are seen in liver diseases like hepatitis and cirrhosis and in cases of haemolytic anaemia.

*** End Of Report ***

Pending Report To Follow - Urine R/M

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2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.

3. It is to be noted that variations in results may occur between different laboratories and over time, even for the same parameter for the same Customer. The assays are performed and conducted in accordance with standard procedures, and the reported outcomes are contingent on the specific individual assay methods and equipment(s) used, as well as the quality of the received specimen.

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Redcliffe labs

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Commitment to excellence, high end technology oriented staff

100% Report Correctness

Focus on quality with accurate results

Best Prices With Fast Reports

Value for money with quick turn around time (TAT)

Your booking just gave back to nature –
with every health checkup, you're contributing by planting a tree!

BharatFit -5

BEST SELLER ★★★

₹**2399** ₹4214 | **96 TEST PARAMETERS**

- ⊘ Blood Sugar Fasting (1 Test)
- ⊘ Lipid Profile (9 Tests)
- ⊘ Liver Function Test (12 Tests)
- ⊘ Kidney Function Test (12 Tests)
- ⊘ Thyroid Profile Total (3 Tests)
- ⊘ Urine R/M (23 Tests)
- ⊘ Complete Blood Count (26 Tests)
- ⊘ ESR (1 Test)
- ⊘ HbA1c (2 Tests)
- ⊘ Vitamin D (1 Test)
- ⊘ Vitamin B12 (1 Test)
- ⊘ Iron Studies (4 Tests)
- ⊘ HBsAg (Rapid) (1 Test)

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