

Apollo Medical Centre

(Promoters : Kurnool Hospital Enterprises Ltd.)

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Name : DHANA LAKSHMI	Bill Date : 05-Jan-2026 8:32 pm	
Age : 45 Years	Sample No : 70	
Gender : Female	Smpl.Time : 05-Jan-2026 08:35 PM	
Bill No : CB26472	Report Date : 05-Jan-2026 9:46 pm	
Ref.Dr. : Dr.UMA DEVI.B	CB26472 	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
CALCIUM				
SERUM CALCIUM	8.2	mg/dL	8.5 - 10.5	ARSENAZO

Diagnosis and monitoring of a wide range of disorders, including disorders of protein and vitamin D, and diseases of the bone, kidney, parathyroid gland, or GI tract.

*** END OF REPORT ***

Printed On : 05-Jan-2026 9:46 pm

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CB26472



KINDLY CORRELATE RESULTS WITH CLINICAL FINDINGS & DISCUSS IF NECESSARY.

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Sreelatha

Dr.SREELATHA. D
M.B.B.S, M.D

Consultant Biochemist



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DEPARTMENT OF BIOCHEMISTRY.

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN D (SERUM)				
VITAMIN D (25-OH VITAMIN D)	40.9	ng/mL	30 - 100	CLIA

The biological function of Vitamin D is to maintain normal levels of calcium and phosphorus absorption. 25-Hydroxy vitamin D is the storage form of vitamin D. Vitamin D assists in maintaining bone health by facilitating calcium absorption. Vitamin D deficiency can also cause osteomalacia, which frequently affects elderly patients.

Vitamin D Total levels are composed of two components namely 25-Hydroxy Vitamin D2 and 25-Hydroxy Vitamin D3 both of which are converted into active forms. Vitamin D2 level corresponds with the exogenous dietary intake of Vitamin D rich foods as well as supplements. Vitamin D3 level corresponds with endogenous production as well as exogenous diet and supplements.

Vitamin D from sunshine on the skin or from dietary intake is converted predominantly by the liver into 25-hydroxy vitamin D, which has a long half-life and is stored in the adipose tissue. The metabolically active form of vitamin D, 1,25-di-hydroxy vitamin D, which has a short life, is then synthesized in the kidney as needed from circulating 25-hydroxy vitamin D. The reference interval of greater than 30 ng/mL is a target value established by the Endocrine Society.

Decreased Levels:- Inadequate exposure to sunlight, Dietary deficiency, Vitamin D malabsorption, Severe Hepatocellular disease., Drugs like Anticonvulsants, Nephrotic syndrome.

Increased levels:- Vitamin D intoxication.

Comment:

BIOLOGICAL REFERENCE RANGES

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10 – 30
SUFFICIENCY	30 – 100
TOXICITY	>100

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