



**VIJAYA
DIAGNOSTIC
CENTRE**

August 10, 2026

To
The Listing Department,
National Stock Exchange of India Limited
NSE Symbol: **VIJAYA**

To
The Corporate Relations Department,
BSE Limited
BSE Scrip code: **543350**

Dear Sir/Madam,

Sub: Transcript of the Earnings conference call organized on August 07, 2026

Referring to our letter dated July 28, 2026, we are enclosing herewith the Transcript of the Earnings Conference Call organized on August 07, 2026, post declaration of the Un-audited Financial Results of the Company for the quarter ended June 30, 2026.

Please take the information on your record.

Thanking you.

Yours faithfully,
For **Vijaya Diagnostic Centre Limited**

TADEPALLI
NAGA

VASUDHA

Naga Vasudha Tadepalli

Company Secretary & Compliance Officer

M. No. A23711

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“Vijaya Diagnostic Centre Limited
Q1 FY27 Earnings Conference Call”

August 07, 2026



MANAGEMENT: **MS. SUPRITA REDDY – MANAGING DIRECTOR AND
CHIEF EXECUTIVE OFFICER – VIJAYA DIAGNOSTIC
CENTRE LIMITED**
**MR. NARASIMHA RAJU – CHIEF FINANCIAL OFFICER –
VIJAYA DIAGNOSTIC CENTRE LIMITED**
**MR. DHIREN GALA – HEAD, INVESTOR RELATIONS
AND CORPORATE DEVELOPMENT – VIJAYA
DIAGNOSTIC CENTRE LIMITED**

MODERATOR: **MR. ABIN BENNY – JM FINANCIALS LIMITED**

Moderator: Ladies and gentlemen, good day, and welcome to Vijaya Diagnostic Limited Q1 FY27 Earnings Conference Call, hosted by JM Financials Limited. As a reminder, all participant lines will be in the listen-only mode and there will be an opportunity for you to ask questions at the end of today's presentation. Should you need assistance during the conference call, please signal an operator by pressing star, then zero on your touch-tone phone. Please note that this conference is being recorded.

I would now like to hand the conference over to Mr. Abin Benny from JM Financials Limited. Thank you, and over to you, sir.

Abin Benny: Thank you, and good morning, everyone. I'm Abin Benny, and on behalf of JM Financials, I would like to extend a warm welcome to all of you on the first quarter FY27 earnings call of Vijaya Diagnostic Centre Limited. At the outset, I would like to thank the management of Vijaya Diagnostic for giving us the opportunity to host the call. We look forward to having an engaging and insightful discussion on the company's quarterly performance and the outlook.

From the company, we have with us today Ms. Suprita Reddy, Managing Director and Chief Executive Officer; Mr. Narasimha Raju, Chief Financial Officer; Mr. Dhiren Gala, Head, Investor Relations and Corporate Development.

With that, I would now like to hand over the call to the management for their opening remarks. Over to you, ma'am.

Suprita Reddy: Thank you, Abin, for hosting the call. Good morning and thank you all for joining us on the call today. Before I move on to a detailed business update, I would first like to welcome Raju back, who's rejoined as our Chief Financial Officer, and I'm sure he doesn't need any introduction to the investor community.

Moving on to the business update. I'm pleased to start on a positive note as we delivered a solid year-on-year revenue growth of approximately 22.8%, supported by volume growth of nearly 16.5% in Q1 FY27.

Coming to PH, we're very happy to inform that we have delivered year-on-year growth of approximately 18%, primarily driven by network expansion. Happy to announce that during the quarter, we also added one hub centre in Gachibowli, Hyderabad with 160-slice cardiac CT with superior infrastructure.

During the quarter, we further expanded our network with the successful commissioning of 4 spokes across Hyderabad, AP and Pune. In July, we added another 2 spokes. I'm pleased to announce that in July, we also commissioned our flagship hub in Bengaluru located at JP Nagar, where we have introduced advanced imaging technologies, including a digital PET-CT with an inbuilt cardiac CT and also 75-centimeter wide-bore 3T Omega MR.

The 75-centimeter ultra wide-bore design allows the parent to remain directly inside the gantry with the child, ensuring maximum comfort and eliminating anxiety. It also enhances comfort for

a lot of claustrophobic as well as bariatric customers. The hub also houses a full-fledged state-of-the-art automated lab, which will serve as a central lab facility for our Bengaluru network.

Our capex plan includes commissioning another 9 hub centres and 10 to 12 spoke centres out of which we have already commissioned 2 hubs and 6 spokes till dates. We will be continuing our efforts to strengthen the technical and mid senior level leadership team across our network to help scale in a sustainable manner.

With that, I now hand over to Raju to walk you through the operational and financial highlights. Thank you.

Narasimha Raju:

Thank you, ma'am. Good morning and a warm welcome to everyone. It's a pleasure to be back to the Vijaya family, and I look forward to meeting you soon. Now I will take you through the financial performance and key developments for the quarter ended June 30, 2026.

The consolidated revenue for current quarter stood at ~Rs. 231 crores reflecting a strong revenue growth rate of 22.8% year-on-year, and this strong revenue growth was again driven by test volume growth of 16.5% year-on-year. Balance growth was due to change in the test mix and increase in realization.

Hyderabad continued to outperform, maintaining its strong growth momentum at 17% year-on-year revenue growth. Pune also delivered 18% growth year-on-year. Coming to the geography-wise revenue contribution for the quarter, Hyderabad contributed 67%, rest of AP-Telangana contributed 20%, Pune 6%, West Bengal 4%, and the rest of the geographies contributed 3%.

During the current quarter, the revenue growth has been driven by both radiology and pathology segments reflecting the robustness of our B2C focused integrated business model. The B2C revenue stood healthy at 92%, our radiology business stood at 37%, the revenue per test and revenue per footfall stood at INR503 and INR1,860, respectively, during the current quarter. EBITDA for the current quarter stood at INR98 crores as compared to INR74 crores in the corresponding quarter in the previous year reflecting a year-on-year growth rate of 34%.

The EBITDA margin stood healthy at 42.7% in the current quarter with an improvement of 360 basis points year-on-year. The profit after tax for the current quarter stood at INR53 crores reflecting a growth of 37.6%. And the PAT margin also stood healthy at 23%. As you are aware, we commissioned 10 hub centres during the previous year and the pace at which most of these hubs have ramped up has exceeded our own expectations.

The momentum has continued into the second year as well with pathology revenues now beginning to scale alongside the radiology. This strong execution has given us the confidence to deepen our presence in these new markets and replicate the expansion strategy demonstrated last year. Accordingly, we plan to commission 9 hub centres, 10 to 12 spoke centres and our state-of-the-art Panjagutta reference laboratory.

In addition, we intend to acquire land in one of Andhra Pradesh's key medical hub for setting up another hub centre for future expansion plans with an estimated investment of INR8 crores to INR10 crores. Overall, we expect our capex to be approximately INR190 crores to INR195

crores for this expansion. We continue to maintain a strong balance sheet with a surplus cash position of approximately INR330 crores, consistent cash PAT generation of close to 26% to 27%, and a healthy return ratios. This resilient financial foundation enables us to pursue our expansion strategy with confidence and maintain a disciplined approach to capital allocation.

That's all from my side. I now request the moderator to open the line for Q&A.

Moderator: Thank you very much, sir. We will begin the question-and-answer session. We have our first question from the line of Siddhant K from Tusk Investments.

Siddhant K: Ma'am, my first question is regarding the number of centres. So as of Q1, the total number of centres is 166. So could you just give us a breakup between this how many hubs, how many spokes? And does this include collection centre as well?

Suprita Reddy: So in the total of 166 centres, we have 51 hubs and 115 spokes with approximately 26 processing units.

Siddhant K: So the 26 processing units are part of the 166 number, right?

Suprita Reddy: Yes. Processing centres are part of the hub centres and these act as the cluster labs to process all of those samples across those geographies.

Siddhant K: So then when we say collection centres, so don't we have any collection centre number? Or is it...?

Suprita Reddy: We don't do plain collection centre formats at all. So the smallest centre will also have ECG or X-ray. So all of those centres put together come in the spokes of 115.

Siddhant K: And the acquisition from the Pune PH Diagnostic, I thought it had 12 collection centres. So that also had the spokes model with the ECG and X-Ray?

Suprita Reddy: The 12 collection centres of PH after acquisition also gradually have been upgraded, and most of them have added some amount of imaging and cardiology into it.

Siddhant K: And my second question is regarding the capex. The 2 hub centres that we commissioned this quarter, what was the combined capex for the 2 centres?

Narasimha Raju: As we mentioned, in the current quarter we commissioned 2 hubs, one in Bangalore - the state-of-the-art hub centre with 3 Tesla wide bore. And also, we installed a digital PET-CT with an inbuilt cardiac CT as well. And also we have added the state-of-the-art laboratory as well which will act as a central lab for the entire Bangalore region. So for this centre, the estimated capex was approximately INR30 crores of what we incurred in the current quarter. And the second hub centre what we opened is in our core geography in Hyderabad at Gachibowli.

Again, it's at a prominent location which is close to the financial district and Hi-Tech City. To suit to this location, we also have done slightly superior infrastructure as well at this centre. And this centre has also got 160-slice cardiac CT as well in this hub centre apart from the basic

radiology equipment like ECG, X-ray, ultrasound, mammography, etc. So the capex for this centre was INR9 crores in the current quarter what we incurred.

Moderator: We have our next question from the line of Abdulkader from ICICI.

Abdulkader: Just wanted to understand in your opening remarks you mentioned about doing a capex of close to INR190 crores, INR195 crores and getting some land. So what exactly are we doing there, if you can elaborate would be helpful.

Narasimha Raju: Yes, sure, Abdul. As mentioned, in the next 12 months we're planning to add close to 9 hub centres and 10 to 12 spoke centres, out of which we already added 2 hub centres as of now. And also coming to the spokes, we added 6 spokes across our network. Also further, we're also planning to set up a hub centre at one of the key tier-2 locations in Andhra Pradesh as well. So there, since we are not able to secure a leased location, we might invest INR8 crores to 10 crores to purchase the land to set up another state-of-the-art hub centre which will be close to medical facilities over there.

So the overall capex is INR190 crores is the estimate, Abdul. Out of which, as I said, the major capex is towards the JP Nagar Bangalore facility which will require INR30 crores. And the balance, 8 hubs will be in the range of INR15 crores to 16 crores will be the capex for the other hub centres. And also as mentioned in the last call, we are also setting up a state-of-the-art reference laboratory in Panjagutta. So the capex for this lab is also included in this overall capex of INR190 crores.

Dhiren Gala: So Abdul, just to add to what -- as you're aware, we commissioned 10 hub centres during the previous year. And the pace at which most of the hubs have ramped up has exceeded our own expectations. The momentum has also continued in the second year as well with now pathology revenues scaling alongside radiology. So this strong execution has given us the confidence to deepen our presence in these markets and replicate the same expansion strategy which was demonstrated last year.

Abdulkader: And second one on Pune. So if I look at your Pune growth, you know it's close to 23%, while PH's, you know, growth rate has improved. But if you have to understand directionally then, you know, in what in frame, if you could help us mark that, that PH will start growing in line with what your average growth in Pune currently is?

Narasimha Raju: So Abdul, just to correct on that point, the Pune geography in the current quarter grew at close to 18%, from close to INR10.8 crores to INR12.8 crores. And also, in the coming 12 months we're also planning to add 2 more hub centres as well. And also we have plans to add few more spokes in that network. So, definitely we expect that. The growth momentum will continue in Pune geography.

Abdulkader: And a final one if I may, so on margins, so this quarter margins were quite significantly elevated, and given the expansion plan what you have, would you still guide for around 40% kind of EBITDA margin range?

- Narasimha Raju:** Yes, Abdul. The existing clusters have been growing at a very good rate, the operating leverage is being played out. So that's the reason why we could achieve this healthy EBITDA margins of 42.5% in spite of we adding last year close to 10 hubs. The drag, if any from those 10 hubs would have been close to like a 0.5%. But because of the operating leverage that we're getting from the existing clusters, example like Hyderabad geography grew at healthy 17%. So because of this the operating leverage is playing out every quarter and that is helping us to get this above 40%. So even if you get like a 40% to 45%, even if there's a drag from the Future expansion, another one, one and a half percent, we are fairly confident of achieving the above 40% EBITDA margin.
- Moderator:** We have our next question from the line of Anshul Agrawal from Emkay Global.
- Anshul Agrawal:** Just following up on the previous participants question on margins. The hubs that we sort of commissioned in FY26 now that pathology revenues would have sort of started to trickle down and these hubs would revert to our portfolio level pathology contribution of revenues. We don't foresee any margin dip in those hubs because of this.
- Narasimha Raju:** Raju, here. We don't foresee any dip from these hub centres because 60% to 70% of our cost is coming from the fixed cost base. So most of these centres as we announced in the previous calls they've already achieved the break even. That means already fixed costs have been already absorbed.
- And as you know, our cost of material consumption on blended basis is close to 11%. So your contribution is 89%. Any further revenue in these hub centres from a pathology business side will directly flow to the EBITDA level. So, we don't foresee any dip at the margins level because of the pathology revenues growing up in these hub centres.
- Anshul Agrawal:** So, no dip in the hubs that we added in FY26 and in the current year the hubs that will add obviously on a largest base of network, the margin dip would not be expected in the range of what we sort of witnessed in Q1 '26. Would that observation be correct?
- Dhiren Gala:** So Anshul, remember in Q1 we had launched 6 hubs, all came at one point of time. But during this year you would see capex being in a staggered and a phased manner. So we don't foresee, you know, a significant impact on account of these hubs during the current year or any of the quarters.
- Anshul Agrawal:** Second question I had was on the land that we will purchase in AP. This is no deviation from our strategy of leasing properties, right. This is just a one off case wherein we're not able to secure a lease and hence we are buying the land.
- Suprita Reddy:** So like we mentioned earlier there are certain regions of interest that we would like to go in and rest of AP, Telangana and Hyderabad and keeping the requirements of the long lease and the infrastructure like we've mentioned earlier, if we find a place that's suitable and this is an area where we've been trying to open a centre for the last almost 6 to 7 years. So when we found this piece of land which is ideal in size and also in terms of location is located in the medical hub of that particular region we said it makes so it's one of its kind but it's going to be a state-of-the-art hub centre for Andhra.

- Anshul Agrawal:** And this land would likely be purchased in the current year and the INR190 crores capex includes this acquisition cost.
- Suprita Reddy:** Yes. It does, it does.
- Anshul Agrawal:** Second question that I had was on the wellness share ma'am. Now last year we did 14.8% and this quarter itself we are at 14.8%. Would it be possible to sort of add some color on how we are able to sort of ramp or sort of crank up this lever? I have gone through the presentation but any additional color on any specific age cohort that is sort of driving this and is this a structural sort of lever that we all of diagnostics differentiated.
- Suprita Reddy:** I would say yes, more than structured. Like I said pre-COVID times we used to be around 8% and with the awareness, more migration and lot of education in the tier-2 geographies itself. Now if you see this 15% some of it is actually contributing from the tier-2 geographies which was not what we would see in the early on days. So, that's also reason why we do not basically have this process of upselling or pushing packages. So, the number that you're seeing here 15% is pure wellness revenue coming in from customers who are wanting to come and avail one of these packages.
- So, there are only two things that we do differently in this. One is a digital initiative that we continuously try to educate and then you are seeing a lot of the newer hub centres get more advanced cardiac CTs. So, what's happening is early on the packages would probably end at an ultrasound 2D echo TMC. Now you are seeing packages go all the way from your basic urine blood investigations all the way up to whole body imaging. That could be in an MR. That could be in a CT.
- That is also the reason why you are seeing a little additional costing in Gachibowli centre. Because we've tried to work little differently with the centre in terms of the look and feel of the centre, the experience itself and also packaging it in ways where the packages go into multi organ screening. So, this is something that we will be taking forward into Bengaluru, Pune, rest of the geographies that we are as we understand probably the requirements of the customers better.
- Anshul Agrawal:** Just a follow up on this, what would be the price point of these premium wellness packages for us at the portfolio level?
- Suprita Reddy:** Again like we said, we don't do deep discounting on this. Probably on an MRP, they would be a little lower ~20% being the highest discount. So, a package of an Angio would approximately range anywhere between say INR8,000 to INR10,000.
- Anshul Agrawal:** And with improving share of wellness, our patient level or a test level realization will only inch upwards.
- Suprita Reddy:** Yes, it will.
- Moderator:** Next question is from the line of Alankar Garude from Kotak Institution.

Alankar Garude:

Firstly, if I look at Bangalore, it's been almost a year since you entered the market. Can you talk about how the competitive landscape has been both on pathology as well as radiology and if you can comment on your learnings over the last one year and how do you expect the market to play out over the next 3 to 5 years?

Suprita Reddy:

The competitive landscape I think is more or less the same across most of the geographies that we operate in and Bangalore has been no different. But, Bangalore keeping the limitations of probably the difficulties of the city itself in terms of your traffic logistics. You've not seen large brands grow in Bangalore where a single brand has about 30 to 40 centres. So, they are locality specific chains that have 5 to 6 centres concentrated in one cluster. So, to understand the market better, like we mentioned earlier, we chose 2 geographies since we were new to the market to understand customer requirements, one in HSR layout on one corner of the city and Yelahanka on the other corner of the city.

Both of them exceeded our expectations, broke even in the first year itself. Now we said keeping the growth of Bangalore, we will probably read Karnataka as our next core geography after rest of AP Telangana. Keeping that growth and the plan in mind, we said we require a fully automated lab first to create the infrastructure before we go on expanding and adding on new centres. And that is when JP Nagar has happened with this INR30 crores capex investment which is again like a state-of-the-art hub centre like Panjagutta and Hyderabad for us in Bangalore. JP Nagar centre has infrastructure which is first of its kind not only to Karnataka but many states.

So, the 3 Tesla Omega is the first in Bangalore and the digital PET with a cardiac CT is also the second. Only a hospital has it and the first diagnostic to have it there. Now, there are two things here to add to the wellness. Full body imaging in an MR and the cardiac CT gives you the full body imaging in CT. So they're not only going to be serving as prescription based diagnostic facilities but also probably inching towards wellness there.

Now, next, once the lab settles and gets accredited, you will see a lot more hubs and spokes coming up in Bangalore itself and then we start looking at home collection. So, this is basically setting up Bangalore for the next 5 year journey. That is where we see ourselves on Bangalore.

Alankar Garude:

Just one follow up there would be if I compare the different locations you are present in, the different cities mean, would you say that Bangalore in terms of the overall market dynamics is more closer to Hyderabad than any of the other cities you are present in and maybe another one there is if you can compare and contrast Hyderabad and Bangalore in particular and I mean does Bangalore, apart from the micro market point which you mentioned, can it be as big as Hyderabad for us? Conceptually if I look at the next say 10 to 15 years.

Suprita Reddy:

Definitely. Bangalore and Hyderabad are very correlated to each other especially because I would say the southern part of India. So, initially when we entered Maharashtra with the Pune acquisition, we said we needed a little more time than the guidance that we had given because it is a new market and we are trying to understand the needs of that localized market.

But if you look at South India per se, like we mentioned earlier, the way the markets operate, whether it is probably Tamil Nadu, Kerala, Karnataka, Andhra, Telangana will all be similar

because we tend to probably like I mentioned earlier, for a simple headache we go and see a super specialist and try to finish it in the first instance itself instead of waiting it out.

And also a lot of like you see the wellness bit growing in tier-2 jobs geographies. That is because of the basic awareness among clientele and the importance that is given towards healthcare. So tier-2 geographies, the hubs are also ramping up because of availability of these super specialists across these tier-2 geographies.

Look at Gulbarga in Karnataka, it's comparable to say a Nellore or a Kurnool for us in Hyderabad geography. So they are definitely similar. If you say what do you look at for Vijaya in the next 10 to 15 years it's going to be definitely eastern part of India and Karnataka. Both of these are probably enough for the next 7- to 8-year plan to go as deep as Hyderabad. And these 3 states will definitely give us the numbers that all of us would be looking at.

Alankar Garude:

And maybe one final question from my side is on Pune. I mean it's been more than two and a half years since we entered Pune via the acquisition of PH. How should we look at your plans for Pune? I mean if you can again compare versus what the expectations from the market were at the time of the acquisition versus how things have played out.

Because if you look at the contributions from Pune has been relatively flat at about 6% for us since then. Of course we have grown in other markets as well, expanded in other markets as well. But conceptually, are you thinking about Pune slightly differently than how you are thinking about it 2.5 years back?

Suprita Reddy:

Definitely I'm looking at it differently, but I'm not probably looking at it differently in terms of growth. Probably the strategy and the play that people do in the other geographies would be a little bit differentiated when it comes to Pune. Like we mentioned earlier, we did take our time to settle things, structure it out, put things in place, processes in place. And like we mentioned, you'll be seeing these 9 hubs coming up. You will also see a large hub coming up in Pune that is basically to create the infrastructure that was required because of capacity issues in the existing PH centres.

So this fully automated lab, again state of the art centre that will come up in Pune will again align us to open a lot more spokes collection centres, align wellness and home collection, because today that probably the back-end facility was not available with PH and we also had the constraint of finding the right location. You will see that happen this year itself in this financial year which will show us an inching towards the growth.

We've also performed well in Pune. We've shown an 18% growth and the new centres are also ramping up. We've also added one spoke in Kharadi as we speak in July. So we definitely see Pune growing but probably a little bit differently when you compare your eastern India, Karnataka and your rest of AP Telangana.

Moderator:

We have a next question from the line Abin Benny from JM Financials Limited.

- Abin Benny:** My first question is regarding the growth, ma'am. So, growth has remained above 20% despite a higher base possibly. How much of this is attributable to the market share gains versus the industry growth? And like if you could give some color on the industry aspect going on right now. And along with that, if you could give some color on the competitive intensity that has changed in any of the key markets in the last 6 to 10, 15 months.
- Narasimha Raju:** So again, look at our growth. Since we are a B2C focused integrated diagnostic chain, we always have been outperforming the growth of the industry and the industry was giving close to like 13% to 14% growth. We used to give at least like 4% to 5% higher growth than the industry. The reason is mainly the strength of our business model which is focused on B2C and then focused on high quality reporting, accurate reporting, plus the high end imaging equipment that we introduce across our hub centres, be it a tier-2 location or be it a metro geography. So, that is helping us to gain the market share quarter on quarter consistently across the geographies. That's the main reason.
- Dhiren Gala:** If you also look at the current quarter, existing Spokes in our core geography, including Hyderabad whose vintage is more than 5 years, they have grown at higher double digit. So, it indirectly means that what we have been communicating since several quarters that there has been a gain in the market share is playing out on the ground. And that shift, although gradual, happening from unorganized to organized, that is playing out. But quantifying the market share would be difficult. So, we don't have those numbers handy.
- Abin Benny:** Second question is regarding the wellness program. So, are corporates increasing the frequency of like the wellness employee programs or is the growth largely driven by retail customers? And what categories of the wellness packages are probably like currently witnessing the strongest demand.
- Dhiren Gala:** So, it's a mix of both retail as well as you know corporate and apart from the seasonal packages the lifestyle packages are showing strong growth for us. Be it cardiac, diabetes packages, etc. So those packages are you know showing strong growth for us. And this is not just restricted to tier-1. Even tier-2 cities are showing higher growth. That trend has been a surprise.
- Moderator:** We have our next question from the line of Bharat Sheth from Quest Investments.
- Bharat Sheth:** Just to understand I mean all these our differentiated approach in tier-2, tier-3 CT. So if you can give little more color and second thing on digital space that when you are talking so how do we really using AI that we I mean pathology as well as other diagnostic combining and giving a better output in terms of the patient pro wellness point of view.
- Suprita Reddy:** Bharat, yes. So when it comes to AI we in especially in the wellness packages there is a smart report that we generate for all of our lifestyle packages that Dhiren was mentioning. So these are more customized towards the patient's history, details, age and these are specific to that customer. So, all of the lifestyle packages across Vijaya along with a traditional report also get a digital AI smart report. When it comes to reporting there are certain modalities and basically AI is again organ based in radiology.

We cannot just take and pick and implement any AI. It needs testing, it needs validation, it needs certification before we can use it for clinical use. So, there are few of these that we use for our KUB cases, chest cases, breast cases. So as and when our team of 400 plus radiologists evaluate and then decide that this can be put for clinical use, these are patched to our PAC systems and it is an integrated report that goes out. Likewise with pathology when it comes to digital communication.

Bharat Sheth:

Coming back to I mean on that same part. So how is the acceptance I mean vis-a-vis other player and where do we stand in this whole stake I mean on wellness when you are saying that combining whenever you'll be able to even.

Suprita Reddy:

Even without an AI bit of it. Bharat, So if you look at a wellness package in any integrated player, just not Vijaya. So basically you're looking at everything from blood work to an ECG to advanced cardiac imaging to radiology. If I'm a smoker probably you're covering your lungs through a chest X-ray. If I have a liver issue I'm covering it through your ultrasound. If I'm a lady above 45 years there is Women's Wellness which covers your pap smear in liquid cytology with a mammography. And if I'm a cardiac patient then it goes through your cardiologist.

Again Vijaya only has qualified DM cardiologists who perform these tests unlike other centres. So, a wellness-integrated centre probably will have all this covered versus a pure pathology health package which will include probably in number you would look at say 30 to 70 tests being performed. But is it holistic and complete in nature? Now that depends on the requirements and needs of the customer. This awareness has basically created that wellness bit to inch. So if I probably go through what is my requirement in a year and everything is normal, you would repeat it only once in two years. Otherwise probably a year.

Now this is again both from corporate side and a walk in customer base. So, when a corporate customer walks in and goes through this experience, it's only fair to say that he would want his family to experience all of this. So with one corporate client you also tend to have another two or three walk-ins who would want to come back and get a full health package done.

Bharat Sheth:

And is it really adding, I mean inching up, I mean in our overall revenue pipeline.

Suprita Reddy:

It is looking like that in your numbers for us operationally it is definitely increasing and it is adding more value also. And that is the reason why we've also relooked and advanced the wellness packages into more advancement into some of these also where age group of people is about 60 to 70. We've brought in an MRI brain into a screening protocol to rule out dementia, to rule out a lot of other things. In people say between 40 years to 55 years we've brought in a lot of advanced cardiac imaging with cardiac angios. There is a separate profiling for liver patients with the liver elastography. So these are based on the needs and requirements of the customer.

Bharat Sheth:

And now coming to this tier-2, tier-3 CT if you can give.

Suprita Reddy:

So tier-2 and tier-3 cities are likewise Bharat. So if you look at Rajahmundry, why I'm picking it is Kakinada is a larger geography compared to Rajahmundry. We chose Rajahmundry as a geography to understand interiors of Andhra. When we entered Rajahmundry we said we would

like to give ourselves 3 to 4 months extra to break even. We broke even in the first 9 month. It said again Rajahmundry which gave us a very pleasant surprise was in the wellness segment so Rajahmundry being the smallest town in that section today has a lot of wellness packages coming in almost from 150km to 200km surrounding it.

And probably keeping Rajahmundry in mind is why we have looked at other geographies and also inching towards wanting to buy this land in another geography and create a state-of-the-art hub there. All of these tier-2 geographies medically, not just with diagnostics in terms of super specialists, specialists moving back, large hospitals coming up in these geographies early on you would see customers traveling to nearby cities is gradually decreasing year-on-year. And all of this customer base is being treated, diagnosed, taken care in that geography itself. That is the reason. Probably examples for you to understand better would be Tirupati, Kurnool, Nizamabad, Khammam, all of these centres.

Bharat Sheth: So, in your vision, I mean of 5 to 7 years, where do we see, I mean our mix kind of a thing if we can give little more color.

Suprita Reddy: Next probably I'm saying up to 10 years we would replicate what we have mastered in the eastern part of India and in Karnataka as a whole. Be as dense as possible, create the same dense cluster model of a hub and spoke, increase our home collection and wellness segment at the same time be pioneers in what we do, the best in imaging and the best in pathology.

Moderator: We have our next question from Dr. Kartick Bane from Bajaj Life.

Kartick Bane: So a lot of AI based companies are on the lookout for healthcare data. Do we have any possibility of monetizing the healthcare data that we accumulate? And first of all is it ethical? And what would be the regulatory things that we have to undergo if we have to monetize such a data?

Suprita Reddy: Kartick, we are on the same page as you. We have a goldmine of data. But today we do not know in terms of compliance on what can be done, cannot be done. We will engage the right agencies and after we get what is required as per compliance, probably plan it out accordingly. But as of today, as Vijaya is a company, we do not share this data. We have a very strict privacy policy in place and this data is not being shared with anyone.

Moderator: We have a follow-up question from line of Siddhant from Tusk Investments.

Siddhant K: My follow-up question is what was the mature centre growth in Q1? And in terms of absolute EBITDA loss from the new centre, could you just highlight what was the absolute EBITDA loss from the new centres?

Dhiren Gala: So, the mature centres, you know, grew at 16% and the new centres, the revenue contribution from them was 6% to 6.5% for the quarter, year-on-year. And in terms of the burn, the 3 to 4 hubs which have not reached breakeven, which we have launched one year back or you can say a couple of hubs which we launched in December, the burn is roughly about 0.5% of our top line. But overall if you compare all the 10 hubs together, there is no burn as such because majority of the hubs have achieved break even.

- Siddhant K:** So basically you're talking about just INR1 crores or INR2 crores of EBITDA loss for this quarter.
- Dhiren Gala:** Less than INR1 crores.
- Moderator:** We have our next question from the line of Amey Chalke from JM Financials Limited. Amey, are you there?
- Amey Chalke:** Yes, sorry, I paused on mute. I have two questions. First, a broader question basically on Vijaya's growth strategy. So like for last few years, like let's say 2 years before, we have been consistently growing organically in Hyderabad cluster. And that was a proven model. Investors were always concerned that Vijaya has done it in the Hyderabad cluster. How will they perform outside Hyderabad or the Andhra cluster?
- So, now over last one or two years the like the way the performance has been for the last 10 hubs which we have opened up, now we want to open up 9 more hubs this year. So, it looks like that we have found a model to grow outside Hyderabad and Andhra region as well. So our expansion focus from here would be keep growing because of this confidence. And should we expect a 20% growth could be a new normal for Vijaya.
- Narasimha Raju:** So, as you said, we have been growing consistently across the geographies and including like Hyderabad which is a mature cluster without even adding any hubs in the last couple of years. I'm happy to state that we grew at 17% in Hyderabad. This constitutes ~67% of revenue pie from the overall revenue contribution for us. And also apart from Hyderabad, even the tier-2 locations that we launched the last 2 to 3 years. Like what ma'am was explaining like Rajahmundry, Tirupati, Kammam.
- And also places like Krishna Nagar in West Bengal have outperformed. In fact, they surprised us with even breakevens getting achieved in just 2 quarters in most of these locations. And also, the Bangalore being a metro, both the hubs achieved breakeven as per our expectations and they're doing extremely good. The reason is simple. Focus on B2C and then give a superior experience from an infrastructure perspective compared to another standalone player. And also invest on the high end radiology equipment which is generally not there in other players. This is the main differentiation which is pulling the higher footfall across Vijaya network.
- So, the objective is to create such a dense network across the 3 new tier-1 locations i.e. Pune, Bangalore and Kolkata. If you see in the last year, we added close to 9 hub centres across these 3 metros. And in the next 12 months we're going to add another 6 out of the 9 that we mentioned. So 9 plus 6, we're going to add like 15 hub centres across these 3 new metro markets where we are planning to go deeper. So, that's the plan.
- We are fairly confident of this growth and coming to the current year growth, as you know, Q1 was extremely good. We delivered 23% growth. We're fairly confident of giving high double digit growth for FY27. When you talk about mid to long term growth. Like a 3 to 5 year growth on a sustainable basis we believe achieving 15% is easy. So that is it. No doubt.

- Amey Chalke:** The second question I have on some divergence on the margin side. So standalone pathology typically have been operating at the lower margin than Vijaya which is a combined entity for us. The pathology share although has been growing or inching upwards, at the same time the margins are also expanding. It will be helpful if you can explain this divergence.
- Narasimha Raju:** No. When you look at pathology players, their B2B contribution is generally higher than the B2C. So, what I think is that most of the peer group has close to like 25% to 30% of their business coming from B2B. Where the prices are at much discount compared to B2C. That's one of the reasons why Vijaya, on a consolidated basis we enjoy higher margins compared to a few pathology business. That is one. And then second thing is since we have advantage of giving comprehensive testimony including radiology, the number of tests that we perform is higher than the other peer group which are catering only to pathology. Just to give a number to that.
- It's close to like a 3.7 test that we do for every patient who is walking into our network as compared to 2.5 to 3 tests that a typical pathology chain does. So, that's also helping us to gain a higher wallet share from a customer which is coming to close to like INR1,860 if you notice for a Vijaya customer as compared to acute pathology chain where you can get close to like a INR 900 & INR 950 per customer because of pure pathology testing ability.
- Amey Chalke:** So, what you are basically saying that traditionally our margins are higher compared to standalone pathology player even for pathology because of the higher realization per patient. Is it right?
- Narasimha Raju:** Yes, absolutely. Initially also our margins being integrated in B2C focus because of the two reasons were always higher than a standalone pathology place year from the beginning.
- Moderator:** We have our next question from the line of Jyothish Vijayan from Moat Financial Services.
- Jyothish Vijayan:** So, my first question is on the pricing growth side. So, generally, we see in the diagnostics space generally a limited pricing growth. So, have you taken any price hike over the last 2 years? And what is your pricing strategy going forward considering the inflation and the competition arises?
- Dhiren Gala:** The last price hike which we had taken was in the month of June 2025 where it was restricted to Hyderabad across select tests. Post that we, we haven't taken any price hike. Obviously post Q2, Q3, we will reassess our pricing strategy and decide based on our internal assessment.
- Jyothish Vijayan:** And my second question is from the competition side. So, as of now there is some competition arising from the organized chains as well as the hospital based diagnostic lab. So are you witnessing any change in the competitive intensity across your key markets particularly in the Telangana and Karnataka?
- Dhiren Gala:** If I were to speak about Hyderabad, if you look at the top 3 players, the second and the third best diagnostic centre are smartly deploying their capital outside of Hyderabad because Vijaya has already greater market share here. So, we aren't witnessing a strong competitive intensity in

terms of the network expansion from the organized players in Hyderabad and in rest of AP and Telangana as well.

There are obviously standalone players there but none of them has a large integrated centre network. And the way we have been able to. For example, in Vizag, we have added one spoke, and in the coming couple of months, we'll be adding more spokes. So the kind of network expansion that we've been able to do, we've not seen the competition doing it at the same intensity.

Moderator: As there are no further questions of the day, I now hand the conference over to the management for closing comments.

Dhiren Gala: Thank you all for joining the call. Should you have any further queries, please feel free to reach out. Thank you.

Moderator: Thank you. On behalf of JM Financials Limited, that concludes the conference. Thank you for joining us. And you may now disconnect your line.