

多根クリニック

人間ドック検査項目

| 検査項目 | | 内容 | | 半日 | 1泊2日 | 検査項目 | 内容 | | 半日 | 1泊2日 | |
|-------|------------|----|-----|----|------|----------|-----------|-------|-----|------|---|
| 一般計測 | 身長 | | | ● | ● | 血液学検査 | コリンエステラーゼ | | ● | ● | |
| | 体重 | | | ● | ● | | HbA1c | | ● | ● | |
| | 標準体重 | | | ● | ● | | 血清アミラーゼ | | ● | ● | |
| | 肥満度 | | | ● | ● | | 血清鉄(女性のみ) | | | ● | |
| | BMI | | | ● | ● | | 赤血球数 | | ● | ● | |
| | 体脂肪率 | | | ● | ● | | 白血球数 | | ● | ● | |
| | 腹囲 | | | ● | ● | | 血色素量 | | ● | ● | |
| 生理検査 | 血圧測定 | | | ● | ● | ヘマトクリット値 | | ● | ● | | |
| | 心電図検査 | | | ● | ● | 血小板数 | | ● | ● | | |
| | 負荷心電図検査 | | | | ● | MCV | | ● | ● | | |
| | 眼底検査 | | | ● | ● | MCH | | ● | ● | | |
| | 眼圧検査 | | | ● | ● | MCHC | | ● | ● | | |
| | 聴力検査 | | | ● | ● | 血液像 | | ● | ● | | |
| | 肺機能検査 | | | ● | ● | 血液型 | ABO | ● | ● | | |
| X線他 | 胸部X線 | 正面 | | ● | ● | 血清学検査 | RF | | ● | ● | |
| | | 側面 | | ● | ● | | CRP(定量) | | ● | ● | |
| | 胃部X線(バリウム) | | | ● | ● | | RPR | | ● | ● | |
| | 腹部超音波 | 肝臓 | | | ● | | ● | HBs抗原 | | ● | ● |
| | | 脾臓 | | | ● | | ● | HBs抗体 | | ● | ● |
| | | 膵臓 | | | ● | | ● | HCV抗体 | | ● | ● |
| | | 腎臓 | | | ● | | ● | 尿検査 | 尿糖 | 空腹時 | ● |
| | 胆のう | | | ● | ● | 1時間 | | | | ● | |
| | | | | ● | ● | 2時間 | | | | ● | |
| 生化学検査 | 総蛋白 | | | ● | ● | 便検査 | 蛋白 | | ● | ● | |
| | A/G比 | | | ● | ● | | ウロビリノーゲン | | ● | ● | |
| | アルブミン | | | ● | ● | | 潜血 | | ● | ● | |
| | 蛋白分画 | | | | ● | | 沈渣 | | ● | ● | |
| | 尿素窒素 | | | ● | ● | | ビリルビン | | ● | ● | |
| | クレアチニン | | | ● | ● | | 比重 | | ● | ● | |
| | eGFR | | | ● | ● | | PH | | ● | ● | |
| | 尿酸 | | | ● | ● | | 眼科検査 | 潜血 | 第1回 | ● | ● |
| | 総コレステロール | | | ● | ● | | | | 第2回 | ● | ● |
| | HDLコレステロール | | | ● | ● | | 外科検査 | 裸眼視力 | | ● | ● |
| | LDLコレステロール | | | ● | ● | 矯正視力 | | | | ● | ● |
| | 中性脂肪 | | | ● | ● | 病理検査 | 前立腺検査 | | | ● | |
| | 総ビリルビン | | | ● | ● | | 肛門触診 | | | ● | |
| | GOT | | | ● | ● | | 直腸診 | | | ● | |
| | GPT | | | ● | ● | | 乳房触診 | | | ● | |
| | LDH | | | ● | ● | 病理解査 | 子宮細胞診 | | | ● | |
| | LAP | | | ● | ● | | 喀痰細胞診 | | | ● | |
| | γ-GTP | | | ● | ● | | 問診 | | | ● | |
| | ALP | | | ● | ● | | 診察 | | | ● | |
| | 血糖 | | 空腹時 | | ● | ● | 結果説明 | | | ● | ● |
| 1時間 | | | | | ● | | | | ● | ● | |
| 2時間 | | | | | | ● | | | ● | ● | |

胃カメラ(口か鼻)に変更可・・・+3,300円