

| 検査項目 | 細目 | 日帰りドック | | 生活習慣病 | 定期健診 | | | |
|-----------------|--------------|------------|---------|---------|----------|--------|----------|---|
| | | Aコース | Bコース | | 心電図・血液なし | 心電図なし | 心電図・血液あり | |
| (1)一般理学的検査 | 問診・聴打診・血圧 | ● | ● | ● | ● | ● | ● | |
| (2)身体測定 | 身長・体重・肥満度・腹囲 | ● | ● | ● | ● | ● | ● | |
| (3)血液算定検査 | 貧血検査 | ● | ● | ● | | ● | ● | |
| | 血沈 | ● | ● | | | | | |
| | 血液像 | ● | ● | | | | | |
| | 血液型 | ●※ | ●※ | ●※ | | | | |
| (4)血清検査 | リウマチ検査 | ● | | | | | | |
| (5)生化学検査 | 肝機能 | 総蛋白 | ● | ● | | | | |
| | | A/G | ● | ● | | | | |
| | | 総ビリルビン | ● | ● | | | | |
| | | AST(GOT) | ● | ● | ● | | ● | ● |
| | | ALT(GPT) | ● | ● | ● | | ● | ● |
| | | γ-GTP | ● | ● | ● | | ● | ● |
| | | ALP | ● | ● | | | | |
| | | LDH | ● | ● | | | | |
| | | ChE | ● | | | | | |
| | | LAP | ● | | | | | |
| | | アルブミン | ● | ● | | | | |
| | | HBs抗原 | ● | | | | | |
| | | HBs抗体 | ● | | | | | |
| | | HCV抗体 | ● | | | | | |
| | 脂質 | 総コレステロール | ● | ● | | | | |
| | | HDLコレステロール | ● | ● | ● | | ● | ● |
| | | LDLコレステロール | ● | ● | ● | | ● | ● |
| | | 中性脂肪 | ● | ● | ● | | ● | ● |
| | 腎機能 | BUN | ● | ● | | | | |
| | | クレアチニン | ● | ● | ● | | | |
| 尿酸 | | ● | ● | ● | | | | |
| 糖代謝 | 血糖 | ● | ● | ● | | ● | ● | |
| | HbA1c | ● | ● | ● | | | | |
| 膵機能 | 血中アミラーゼ | ● | ● | | | | | |
| | 尿中アミラーゼ | ● | | | | | | |
| 電解質 | Na | ● | | | | | | |
| | K | ● | | | | | | |
| | Cl | ● | | | | | | |
| | Ca | ● | | | | | | |
| (6)尿検査 | 尿沈 | ● | ● | ● | ● | ● | ● | |
| (7)検便 | 潜血 | ● | ● | ● | | | | |
| (8)心機能検査 | 心電図 | ● | ● | ● | | | ● | |
| (9)肺機能検査 | | ● | | | | | | |
| (10)眼検査 | 視力 | ● | ● | ● | ● | ● | ● | |
| | 眼底 | ● | ● | | | | | |
| | 眼圧 | ● | ● | | | | | |
| (11)聴力検査 | | ● | ● | ● | ● | ● | ● | |
| (12)胸部レントゲン | | ● | ● | ● | ● | ● | ● | |
| (13)食道・胃・十二指腸検査 | | ● | ● | ● | | | | |
| (14)エコー検査 | | ● | ● | | | | | |
| 料金 | | ¥50,050 | ¥41,800 | ¥30,800 | ¥5,500 | ¥7,700 | ¥9,900 | |

○※の項目は初回のみ

○食道・胃・十二指腸は造影撮影(バリウム)又は内視鏡(経口・経鼻)が選択できます。

内視鏡検査につきましては、別途6,600円(税込)申し受けいたします。