

医療法人社団朋仁会 広島中央健診所 検査項目表

| 種類         | 検査項目                | 日帰りドック    | 1泊2日ドック | 生活習慣病健診 | 定期健康診断 |   |
|------------|---------------------|-----------|---------|---------|--------|---|
| 計測         | 身長                  | ●         | ●       | ●       | ●      |   |
|            | 標準体重・体重             | ●         | ●       | ●       | ●      |   |
|            | 体脂肪率                | ●         | ●       | ●       | ●      |   |
|            | BMI                 | ●         | ●       | ●       | ●      |   |
|            | 肥満度                 | ●         | ●       | ●       | ●      |   |
|            | 腹囲                  | ●         | ●       | ●       |        |   |
| 眼科         | 視力 右左               | ●         | ●       | ●       | ●      |   |
|            | 眼底 右左               | ●         | ●       | ●       |        |   |
|            | 眼圧 右左               | ●         | ●       |         |        |   |
| 血圧         | 収縮期                 | ●         | ●       | ●       | ●      |   |
|            | 拡張期                 | ●         | ●       | ●       | ●      |   |
| 聴力         | 1,000Hz 右左          | ●         | ●       | ●       | ●      |   |
|            | 4,000Hz 右左          | ●         | ●       | ●       | ●      |   |
| 呼吸器系       | 肺活量実測値              | ●         | ●       | ●       |        |   |
|            | 努力性肺活量              | ●         | ●       | ●       |        |   |
|            | %肺活量                | ●         | ●       | ●       |        |   |
|            | 1秒量                 | ●         | ●       | ●       |        |   |
|            | 1秒率                 | ●         | ●       | ●       |        |   |
| 尿一般・腎機能    | 尿P H                | ●         | ●       | ●       | ●      |   |
|            | 尿蛋白                 | ●         | ●       | ●       | ●      |   |
|            | 尿潜血                 | ●         | ●       | ●       |        |   |
|            | 尿比重                 | ●         | ●       |         |        |   |
|            | 尿沈渣                 | 異常時       | ●       |         |        |   |
|            | 尿素窒素                | ●         | ●       |         |        |   |
|            | クレアチニン              | ●         | ●       | ●       |        |   |
|            | e G F R             | ●         | ●       | ●       |        |   |
| 血液一般       | 白血球数                | ●         | ●       | ●       | ●      |   |
|            | 赤血球数                | ●         | ●       | ●       | ●      |   |
|            | ヘモグロビン              | ●         | ●       | ●       | ●      |   |
|            | ヘマトクリット             | ●         | ●       | ●       | ●      |   |
|            | M C V               | ●         | ●       | ●       |        |   |
|            | M C H               | ●         | ●       | ●       |        |   |
|            | M C H C             | ●         | ●       | ●       |        |   |
|            | 血小板数                | ●         | ●       | ●       | ●      |   |
|            | 血液像                 |           | ●       |         |        |   |
|            | 血液型                 | ●(初回のみ)   |         |         |        |   |
|            | 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       |                     | ●         | ●       | ●       | ●      |   |
| 動脈硬化指数     |                     | ●         | ●       | ●       |        |   |
| 種類         | 検査項目                | 日帰りドック    | 1泊2日ドック | 生活習慣病健診 | 定期健康診断 |   |
|            | AST(GOT)            | ●         | ●       | ●       | ●      |   |
|            | ALT(GPT)            | ●         | ●       | ●       | ●      |   |
|            | γ-GTP               | ●         | ●       | ●       | ●      |   |
|            | LDH                 | ●         | ●       | ●       |        |   |
|            | ALP                 | ●         | ●       | ●       |        |   |
|            | 総ビリルビン              | ●         | ●       | ●       |        |   |
|            | 総蛋白                 | ●         | ●       | ●       |        |   |
|            | アルブミン               | ●         | ●       | ●       |        |   |
|            | A/G比                | ●         | ●       | ●       |        |   |
|            | ZTT                 | ●         | ●       | ●       |        |   |
|            | コリンエステラーゼ           |           | ●       |         |        |   |
|            | LAP                 |           | ●       |         |        |   |
|            | 尿ビリルビン              | ●         | ●       | ●       |        |   |
|            | 尿ウロビリノーゲン           | ●         | ●       | ●       |        |   |
|            | H B s 抗原            | ●         | ●       |         |        |   |
|            | H C V 抗体            |           | ●       |         |        |   |
|            | 代謝系                 | 空腹時血糖     | ●       | ●       | ●      | ● |
|            |                     | 尿糖        | ●       | ●       | ●      | ● |
|            |                     | 尿アセトン体    | ●       | ●       | ●      |   |
|            |                     | H b A 1 c | ●       | ●       | ●      |   |
|            |                     | 75g糖負荷    |         | ●       |        |   |
| 尿酸         |                     | ●         | ●       | ●       |        |   |
| 膵機能        | 血清アミラーゼ             | ●         | ●       |         |        |   |
| 電解質        | Ca                  | ●         | ●       |         |        |   |
| 炎症性反応      | C R P               | ●         | ●       | ●       |        |   |
| 血清反応       | T P H A ・ R P R     | ○         | ○       |         |        |   |
| 胸部         | 胸部 X 線              | ●         | ●       | ●       | ●      |   |
|            | 循環器                 | 安静時心電図    | ●       | ●       | ●      | ● |
| NT-proBNP  |                     |           | ●       |         |        |   |
| 上部消化管      | 胃部 X 線              | ●         | ●       | ●       |        |   |
| 便検査        | 2 回 法               | ●         | ●       | ●       |        |   |
|            | 腹部超音波               | ●         | ●       |         |        |   |
|            | 頸動脈超音波              |           | ●       |         |        |   |
|            | 医師による診察             | ●         | ●       | ●       | ●      |   |
|            | 医師による面談<br>(特定健診含む) | ●         | ●       | ●       |        |   |