# 健康診断書料金表

＜かんべ内科クリニック＞

| 検査項目 | | | 健診1（1） | 健診1（2） | 健診1（3） | 健診1（4） | 健診2 | ★健診 | 健診（詳細） |
|---|---|---|---|---|---|---|---|---|---|
| 診察等 | | 問診 | ● | ● | ● | ● | ● | ● | ● |
| | | 身体計測 | ● | ● | ● | ● | ● | ● | ● |
| | | 視力 | ● | | ● | | ● | ● | ● |
| | | 聴力 | ● | | ● | | ● | ● | ● |
| | | 血圧の測定 | ● | ● | ● | ● | ● | ● | ● |
| 胸部エックス線検査 | | | ● | ● | | | ● | ● | ● |
| 血液検査 | 貧血検査 | 血色素 | | | | | ● | ● | ● |
| | | 赤血球数 | | | | | ● | ● | ● |
| | 血液像 | | | | | | | ● | ● |
| | 肝機能検査 | 総蛋白 | | | | | | | ● |
| | | アルブミン | | | | | | | ● |
| | | 総ビリルビン | | | | | | | ● |
| | | ALP | | | | | | | ● |
| | | AST | | | | | ● | ● | ● |
| | | ALT | | | | | ● | ● | ● |
| | | LDH | | | | | | | ● |
| | | γ-GTP | | | | | ● | ● | ● |
| | | コリンエステラーゼ | | | | | | | ● |
| | 脂質検査 | 総コレステロール | | | | | ● | ● | ● |
| | | LDLコレステロール | | | | | ● | ● | ● |
| | | HDLコレステロール | | | | | ● | ● | ● |
| | | 中性脂肪 | | | | | ● | ● | ● |
| | 腎機能検査 | BUN | | | | | | ● | ● |
| | | クレアチニン | | | | | | ● | ● |
| | | ナトリウム及びクロール | | | | | | | ● |
| | | カリウム | | | | | | | ● |
| | | 尿酸 | | | | | | ● | ● |
| | 血糖検査 | ヘモグロビンA1c又は空腹時血糖 | | | | | ● | ● | ● |
| 尿検査 | | 尿中の糖及び蛋白の有無 | ● | ● | ● | ● | ● | ● | ● |
| 心電図検査 | | | | | | | | ● | ● |
| 脈波図、心機図、ポリグラフ(3又は4検査) | | | | | | | | | ● |
| 腹部超音波検査 | | | | | | | | | ● |
| 金　額（円） | | | 4,950 | 4,400 | 3,850 | 3,300 | 9,350 | 11,000 | 22,000 |