

Information on health checkup course

			High Precision Health Checkup		Standard Health Checkup					
			A	Special	B	Premium	C	Cancer screening	D	Brain screening
			Working day		2 days		1 day		Half day	
Examination item (●: Course , ○: Option)										
Height, Weight, Blood pressure, BMI, Abdominal girth measurement, Interv			●		●		●		●	
Auscultation, Visual acuity, Hearing test			●		●		●		●	
B l o o d t e s t	Anemia	RBC, WBC, Hemoglobin	●		●		●		●	
		Platelet count, Hematocrit, MCV, MCH, MCHC	●		●		●		●	
	Urinalysis	Protein, Sugar	●		●		●		●	
		Occult blood	●		●		●		●	
		Urine sediment, PH, Specific gravity, Urine urobilinogen	●		●		●		●	
		H. pylori test								
	Surgar	Blood glucose	●		●		●		●	
		HbA1c	●		●		●		●	
	Liver	AST, ALT, γ -GTP, ALP	●		●		●		●	
	Gall Bladder									
	Lipid	Total cholesterol, Neutral fat	●		●		●		●	
		HDL, LDL	●		●		●		●	
		Non-HDL	●		●		●		●	
	Renal function	Creatinine	●		●		●		●	
		Uric acid	●		●		●		●	
Hepatitis	HBs antigen qualitative, semi-quantitative	●		●		●		●		
	HCV antibody qualitative, Quantification	●		●		●		●		
Other	CRP	●		●		●		●		
Fecal occult blood test - 2 days method (Immunization method)			●		●		●		○	
Colonoscopy			○							
Gastroscopy			●							
Chest X-ray examination									●	
Blood tumor marker	AFP・CEA・CA19-9		●		●		●		○	
	PSA (Male)・CA125 (Female)		●		●		●		○	
Ultrasonic examination	Abdomen (Liver, Gall bladder, Kidney, Spleen, Pancreas)		●		●		●		○	
	Heart		●		○					
	Thyroid		○		○					
	Cervical blood vessel		○		○					
Sign post genetic test			○		○		○		○	
Microarray genetic test			○		○		○			
PET/CT			●		●		●			
Brain screening	MRI (Brain)		●		●		●		●	
	MRA (Head and Neck)		●		●		●		●	
Resting electrocardiogram			●		●		●		●	
Respiratory function test (lung capacity)			●							
Bone density examination			●						●	
Mammary gland test	Mammography		○		○		○		○	
	Breast Ultrasonography		○		○		○		○	
Uterine / ovarian examination	Vaginal examination, Sonography, Pap test (Female)		●		●		●		○	
Health age			●		●		●		●	
Consultation			●		●		●		●	
The findings and interpretation of diagnostic report			● (Associate Dean)		● (Associate Dean)		● (Doctor)		● (Doctor)	
Diagnostic report (Send by post after one month later)			● (CD)		● (CD)		● (CD)		● (CD)	
Meal service			●		●		●		●	
Please confirm the amount to our hospital or coordinator company										