

| 台北長庚診所健診中心套組簡介  |                           | 無痛胃腸鏡檢查  |                      |                      |                      |                             | 心血管/高階影像檢查           |                      |                      |                      |                      |   |
|-----------------|---------------------------|--|----------------------|----------------------|----------------------|-----------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---|
| 檢查內容            |                           | 標準<br>無痛腸胃型  | 精緻<br>無痛腸胃型          | 豪華防癌<br>無痛腸胃型        | 豪華榮耀<br>無痛腸胃型        | 尊榮<br>全身影像<br>+心肺<br>+無痛腸胃型 | 標準<br>菁英型            | 精緻<br>菁英型            | 標準<br>心血管型           | 豪華<br>心血管型           | 尊榮<br>全身影像<br>+心肺型   |   |
|                 |                           | 男24,500元<br>女27,000元   | 男31,000元<br>女33,000元 | 男59,500元<br>女62,500元 | 男69,000元<br>女70,000元 | 男106,500元<br>女108,000元      | 男25,500元<br>女29,000元 | 男37,000元<br>女40,000元 | 男28,500元<br>女28,500元 | 男57,000元<br>女55,000元 | 男92,000元<br>女93,000元 |   |
| 檢驗項目            | 血液常規檢查                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 腎功能檢驗                     | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 肝功檢驗                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 代謝檢驗                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 尿酸                        | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 電解質檢驗                     | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 血糖檢驗                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 甲狀腺功能                     | 促甲狀腺激素TSH  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 游離甲狀腺激素Free T4   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 四碘甲狀腺素T4   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 三碘甲狀腺素T3   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | 梅毒檢驗                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 血脂肪檢驗                     | 總膽固醇、三酸甘油脂、高/低密度脂蛋白、心臟病變危險因子                                     | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 高密度C-反應蛋白  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | 肝炎檢驗                      | B肝表面抗原、B肝表面抗體  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | 尿液常規檢驗                    | 酸鹼度、比重、尿酸、尿蛋白、白血球、尿潛血、尿酸素原、酮體、尿沉渣、亞硝酸鹽等                          | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 糞便檢驗   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | 新癌症篩檢                     | AFP、CEA、CA199、PSA (男)、CA125 (女)、CA153 (女)、CYFRA 21-1、SCC、EBV IqA | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | PHI                       | 攝護腺健康指數  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | HPV                       | 人類乳突病毒檢驗 (女)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
| 心血管檢驗           | 同半胱胺酸、脂蛋白(a)              | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 膽固醇C(CYSTATIN C)          | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 脂蛋白A1(APOLIPOPROTEIN A-I) | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 脂蛋白B(APOLIPOPROTEIN B)    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| VITAMIN D       | VITAMIN D (25-OH)         | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 自體免疫檢驗          | 抗細胞核抗體ANA、類風濕性關節炎因子RF     | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 檢查項目            | 體格檢查                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 身體組成分析                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 肺功能檢查                     | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 心臟檢查                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | X光檢查                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 會專科             | 婦產科                       | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 內科                        | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 進階檢查項目          | 無痛內視鏡 (含麻醉)               | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 核磁共振造影                    | 頭部核磁共振造影MRI(未顯影)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 頸部核磁共振造影MRI(未顯影)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 胸部核磁共振造影MRI(未顯影)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 腹部核磁共振造影MRI(未顯影)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 |                           | 骨盆核磁共振造影MRI(未顯影)   | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
|                 | 電腦斷層掃描                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 動脈硬化檢測                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 骨質密度檢測                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 超音波檢查                     | 腹部 (肝膽胰脾) 超音波檢查  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    | ● |
| 女性: 乳房超音波(ABVS) |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 女性: 婦科超音波       |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 男性: 攝護腺超音波      |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 甲狀腺超音波          |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 腎臟超音波           |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 彩色頸動脈超音波        |                           | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 心臟超音波           | ●                         | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    |                      |   |
| 報告解說            | 內科理學檢查                    | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 綜合解說報告          | 醫師一對一綜合報告解說               | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
| 其他服務            | 代餐                        | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |
|                 | 餐飲服務                      | ●  | ●                    | ●                    | ●                    | ●                           | ●                    | ●                    | ●                    | ●                    | ●                    |   |

說明:  
 ※ 上述費用不含內視鏡檢查時,若有患內之息肉切除費用。  
 ※ 檢查未含影像光碟,若欲燒錄影像光碟需另酌收費。  
 ※ 承辦醫院:長庚醫療財團法人台北長庚紀念醫院  
 E-mail: health11900@cgmh.org.tw  
 預約電話: (02)2719-7271或(02)2713-6500 分機2  
 預約諮詢時間: 星期一至六 8:30-16:30  
 檢查時間: 每周一~六  
 地址: 台北市松山區民生東路二段130巷9號2樓  
 ※ 受檢人員均採事前預約制度,請於健檢前14個工作天前以電話或電子郵件方式向健康管理中心預約。  
 ※ 以安排其進行健康檢查順序、相關流程及需配合之事宜。預計檢查日期及時間依健診中心當日預約情形而可能有所調整。  
 ※ 預約完成後,本中心將於檢查前兩週寄發檢前注意事項及糞便採檢盒。  
 ※ 非本國籍顧客將另收國際醫療服務費(請來電健診中心詢問)。

