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|  | | | | | **苏 州 工 业 园 区 疾 病 防 治 中 心** | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | | 0cdd304f9f3d62154e5f6c9e8911e11**苏 州 工 业 园 区 体 检 中** | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| \* 1520190430182 \* | | | | | **体 检 报 告 单** | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 姓名 | | 陈笑小5 | | | | | | | | 性别 | | | | 男 | | 身份证号 | | | | | | 360311200010100034 | | | | | | | | |  | |
| 单位 | | 友达光电—外包 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 其他 | | 入职体检 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 眼科 | | 左 | 裸眼视力 | 1.0 | | | | | | | | 矫正视力 | | |  | | | | | | 矫正度数 | | |  | | | 色觉：正常 | | | | 医生签字：  **丁俭** | |
| 右 | 0.8 | | | | | | | |  | | | | | |  | | | 其他： | | | |
| 五官科 | | 听力 | 左 正常 | | | | | | | | | 耳疾： 无 | | | | | | | | | 嗅觉：正常 | | | | | | 鼻病：无 | | | | 医生签字：  **高琴** | |
| 右 正常 | | | | | | | | | 颜面部：未见异常 | | | | | | | | | 咽喉：正常 | | | | | | 唇腭：未见异常 | | | |
| 门齿：有 | | | | | | | | | | 口吃： 无 | | | | | | | | | 其他： \_ | | | | | | | | | |
| 外科 | | 身高：171 cm | | | 皮肤： 未见异常 | | | | | | | | | | | | | 淋巴：未触及 | | | | | | | | 甲状腺： 未见异常 | | | | | 医生签字：  **彭文忠** | |
| 体重：51.0 Kg | | | 脊柱： 正常 | | | | | | | | | | | | | 四肢：无异常 | | | | | | | | 扁平足： 无 | | | | |
| 关节：未见异常 | | | | | | | | | | | | | | | | 其他： \_ | | | | | | | | | | | | |
| 内科 | | 血压： 98 / 60 mmHg | | | | | | | | | 心率：91 次/分 | | | | | | | | | | 医生：**刘祥光** | | | | | 发育及营养状况：正常 | | | | | 医生签字：  **薛荣华** | |
| 肺及呼吸道： 二肺呼吸音清 | | | | | | | | | | | | | | | | | | | 神经及精神： 未见异常 | | | | | | | | | |
| 心脏及血管： 律齐，无杂音 | | | | | | | | | | | | | | | | | | | 肝： 未扪及 | | | | | | | | | |
| 脾： 未扪及 | | | | | | | | | | | | | | | | | | | 其他：\_ | | | | | | | | | |
| 化验 | | 血： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 医生签字：  **封华** | |
| RBC 3.66 10e12/L | | | | | WBC 5.2 10e9/L | | | | | | | | | | PLT 204 10e9/L | | | | | | | | MCH 32.2 Pg | | | | MCHC 354 g/L | |
| HGB 118 g/l | | | | MID 0.2 10e9/L | | | | | | | | | | | MPV 7.9 fl | | | | | | | | GRA 3.1 10e9/L | | | | | |
| MCV 91 fl | | | | LYM 1.9 10e9/L | | | | | | | | | | | HCT 0.333 | | | | | | | | RDW 13.8 % | | |  | | |
| MIDp 4.3% | | | | GRAp 59 % | | | | | | | | | | | LYMp 36.7 % | | | | | | | |  | | |  | | |
| 谷丙转氨酶： 9U/L | | | | | | | (正常值≤42IU/L) | | | | | | | | | | 谷草转氨酶： 11U/L | | | | | | | | (正常值≤37IU/L) | | | |
| 尿检 | | 蛋白质 Neg | | | | | | 血 Neg | | | | | | | | | | | 葡萄糖 Neg | | | | | | | 白细胞 Neg | | | | | 医生签字：  **周强** | |
| 酮体 Neg | | | | | | 尿胆原 Normnl | | | | | | | | | | | 胆红素 Neg | | | | | | | 亚硝酸盐 Neg | | | | |
| 维生素C 0 mnol/L | | | | | | | 比重 ﹥=1.030 | | | | | | | | | | 酸碱度 5.5 | | | | | | | 微白蛋白 Neg g/L | | | | |
| 心电图检查： 正常心电图 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **医生签字：**  **吕晓梅** | |
| 胸部X光检查： 心肺透视未见异常 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 医生签字：  **邱晶** | |
| **体**  **检**  **结**  **果** | **所检项目未见异常 合格** | | | | | | | | | | | | | | | | | | | **体**  **检**  **建**  **议** | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主检医师: | | | | | | | | | | | | | 体检日期： 2019-04-30 | | | | | | | | | | | | | | | | |  | |  |
|  | | | | | | | | | | | | | 打印日期： 2019-04-30 | | | | | | | | | | | | | | | | |  | |  |
| 复查注意事项： | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | 扫一扫 辩真伪 | | |
| 1.复查凭本报告单周一至周六上午7:00-11:00在本体检中心进行复查，请先在服务台办理相关手续；2.只复查一次； | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3.复查前请注意休息，避免激烈运动； 4.复查肝功能当日请空腹； 5.复查尿常规请避开月经期。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |