





# QEEG Clinical Report BrainLens V0.4

### Report Description

### Personal & Clinical Data

Name	Mehdi Rahmani	Date of Recording	21-Jan-2025
Date of Birth - Age	15-Mar-2006 - 18.85	Gender	Male
Handedness(R/L)	Right	Source of Referral	Dr Tabatabaei
Initial Diagnosis		-	
Current Medication		-	

Dr Tabatabaei

### Summary Report



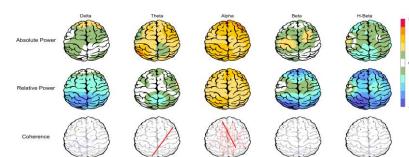




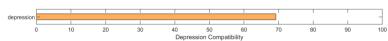
**QEEGhome** 



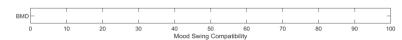
#### Z-score Information



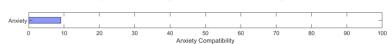
#### Compatibility with Depression



#### Compatibility with Mood Swing



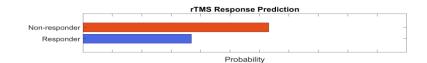
#### Compatibility with Anxiety



## TMS Responsibility

Arousal Level

Low Arousal



Normal

High arousal

#### Cognitive Performance





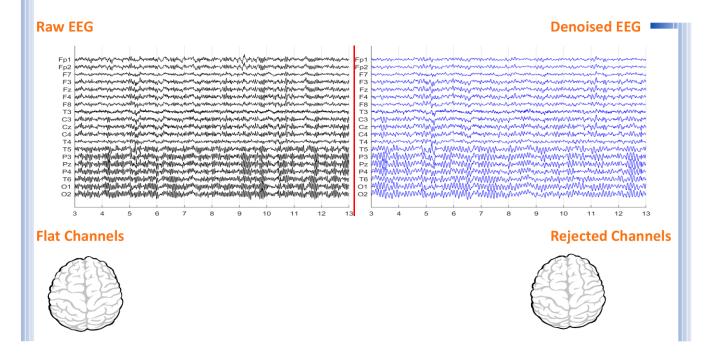
Posterior APF-EC= 09.25

To investigate QEEG-based predicting medication response, please refer to the Report.





### Denoising Information (EC)



Number of Eye and Muscle Elements				Low Artifact Percentage	
Eye	1	Muscle	0	0	
Total Artifact Percentage				High Artifact Percentage	
			0		
EEG Quali	ity	good		<b>Total Recording Time Remaining</b> 97.08 sec	





#### Pathological assessment for mood disorders and adult ADHD

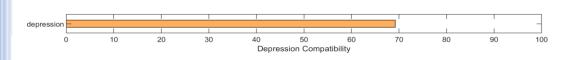
#### **Compare to Mood Disorders Database**

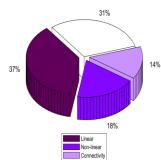


#### **Compare to Adult ADHD Database**

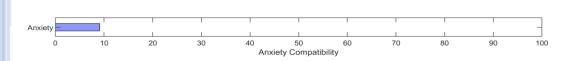


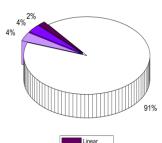
#### **EEG Compatibility with Depression Diagnosis**



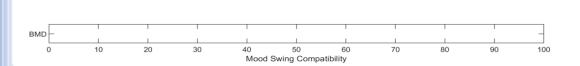


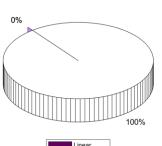
#### **EEG Compatibility with Anxiety Diagnosis**





#### **EEG Compatibility with Mood Swing Diagnosis \***





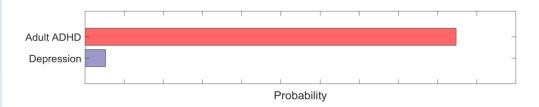
Non-linear Connectivity

<sup>\*</sup> This index can only be investigated if there are symptoms of mood swings (R/O BMD or R/O mood swings).





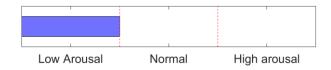
#### Depression and Adult ADHD Diagnosis Probabiliy



#### Cognitive Functions Asessment



#### Arousal Level Detection





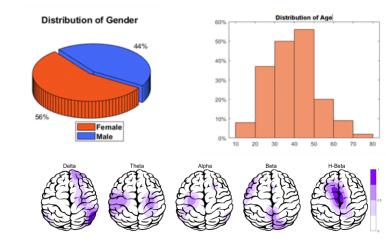


#### rTMS Response Prediction

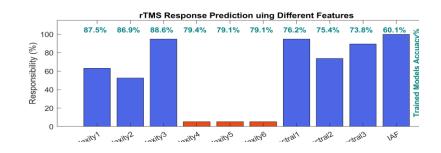
#### Network Performance

Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%

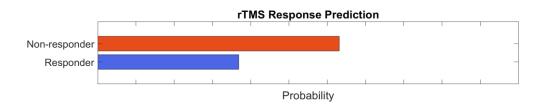
#### Participants Information



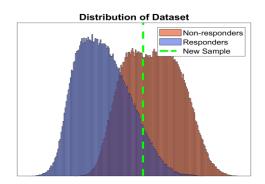
#### Features Information



#### Responsibility



#### Data Distribution



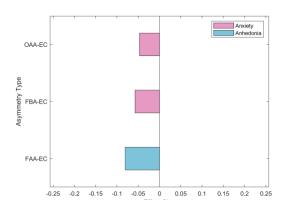
#### About Predicting rTMS Response

This index was obtained based on machine learning approaches and by examining the QEEG biomarkers of more than 470 cases treated with rTMS. The cases were diagnosed with depression (with and without comorbidity) and all were medication free. By examining more than 40 biomarkers capable of predicting response to rTMS treatment in previous studies and with data analysis, finally 10 biomarkers including bispectral and nonlinear features entered the machine learning process. The final chart can distinguish between RTMS responsive and resistant cases with 92.1% accuracy. This difference rate is much higher than the average response to treatment of 44%, in the selection of patients with clinical criteria, and is an important finding in the direction of personalized treatment for rTMS.

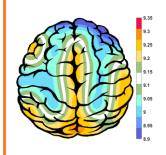




### Alpha Asymmetry(AA)



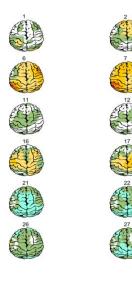
#### APF(EC)

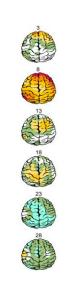


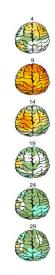
Frontal APF= 09.00

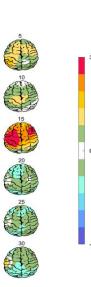
Posterior APF= 09.25

### Absolute Power-Eye Closed (EC) 🌮

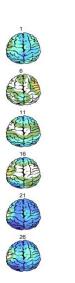


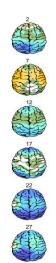


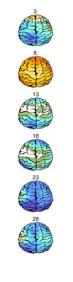


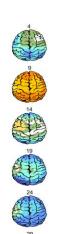


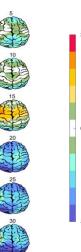
#### Relative Power-Eye Closed (EC) 🌮







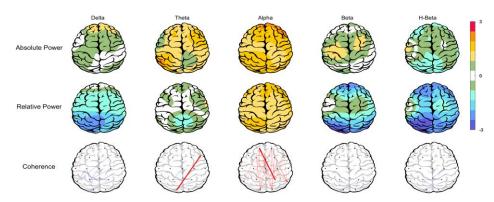




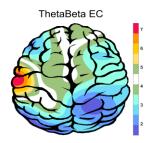


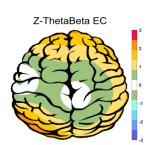


#### Z Score Summary Information (EC)

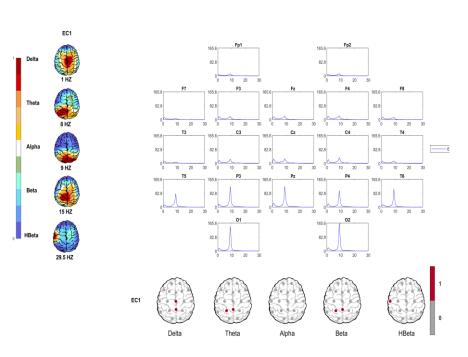


#### E.C.T/B Ratio ( Raw- Z Score)





#### EEG Spectra



#### Arousal Level

