



QEEG Clinical Report

BrainLens V0.4

Report Description



Personal & Clinical Data

Name	Aeenbarmala	Date of Recording	23-Feb-2025
Date of Birth - Age	29-Nov-2015 - 9.23	Gender	Male
Handedness(R/L)	Right	Source of Referral	Ms Mazlumi
Initial Diagnosis	-		
Current Medication	-		

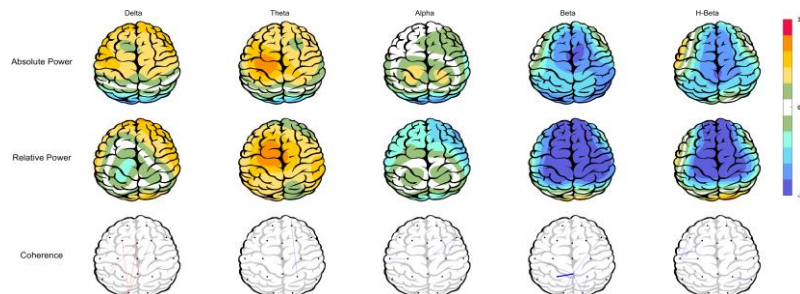
Ms Mazlumi

Summary Report

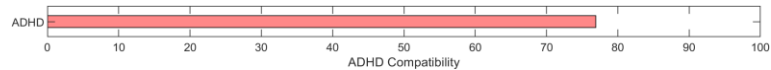
EEG Quality



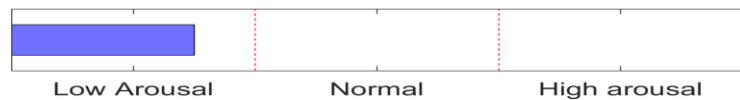
Z-score Information



Compatibility with ADHD



Arousal Level



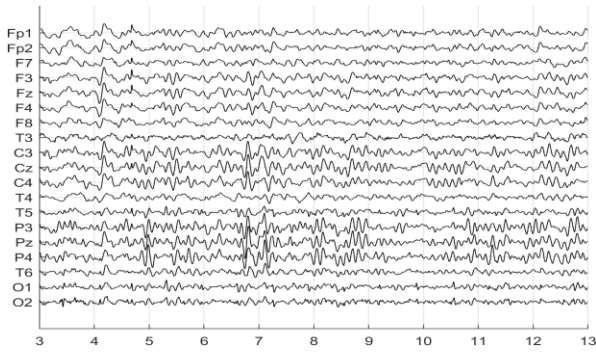
APF

Posterior APF-EC= 09.25

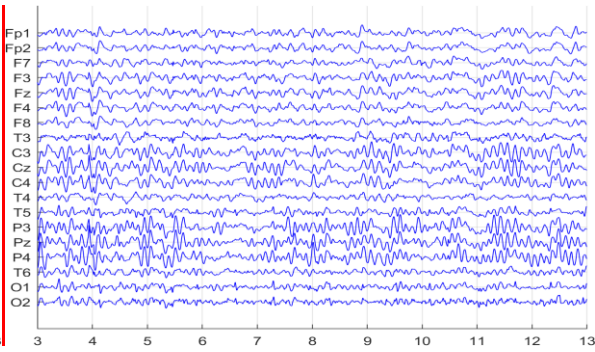
To investigate QEEG-based predicting medication response, please refer to the Report.

Denoising Information (EC)

Raw EEG



Denoised EEG



Flat Channels



Rejected Channels



Number of Eye and Muscle Elements

Eye	0	Muscle	0
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Total Artifact Percentage



EEG Quality	bad
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Low Artifact Percentage



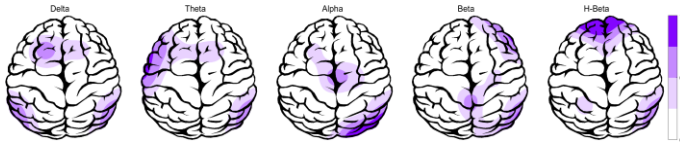
High Artifact Percentage



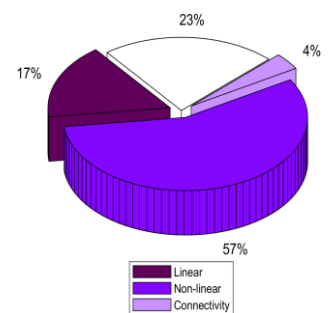
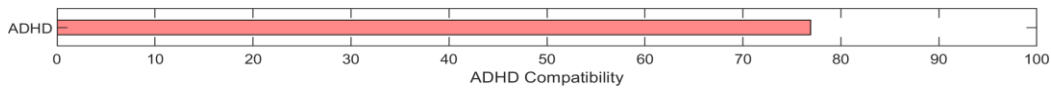
Total Recording Time Remaining	40.74 sec
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Pathological assessment for ADHD

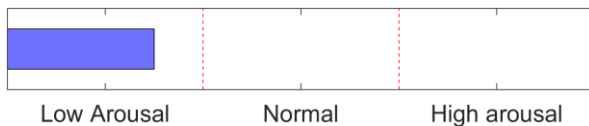
Compare to ADHD Database



EEG Compatibility with ADHD Diagnosis



Arousal Level Detection

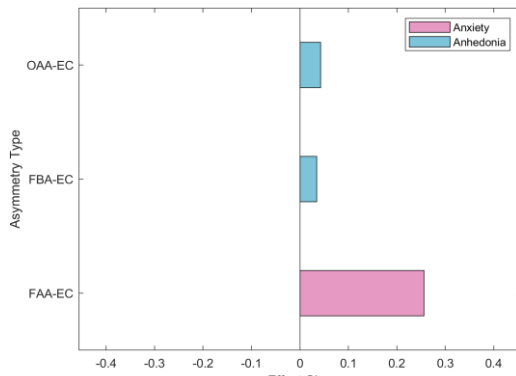


ADHD Clustering *

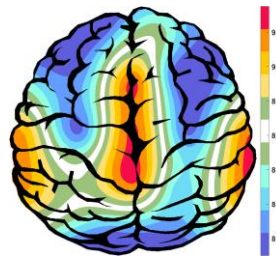
1. Same inattentive and hyperactive prevalence. Well respond to stimulants.

* If there is Paroxymal epileptic discharge in EEG data, this case needs sufficient sleep and should avoid high carbohydrate intake.
You can consider anticonvulant medications.

Alpha Asymmetry(AA)



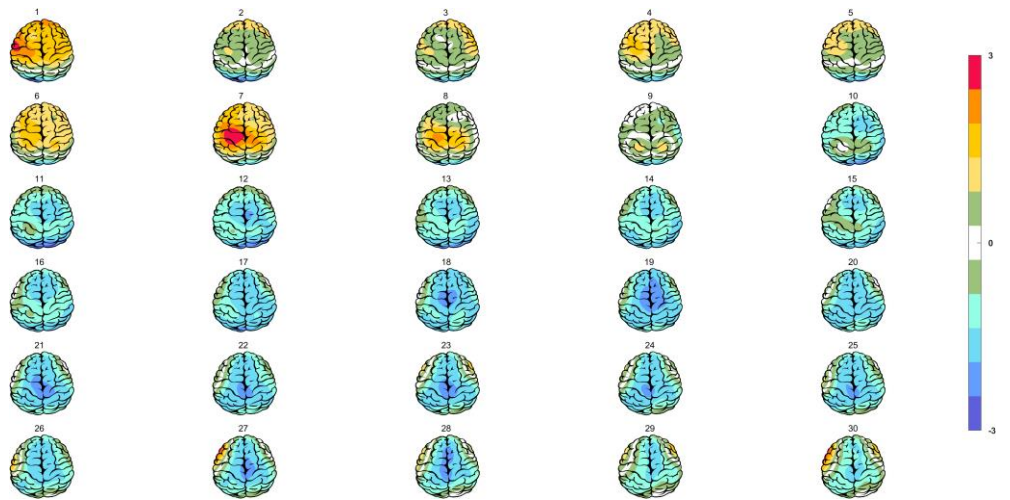
APF(EC)



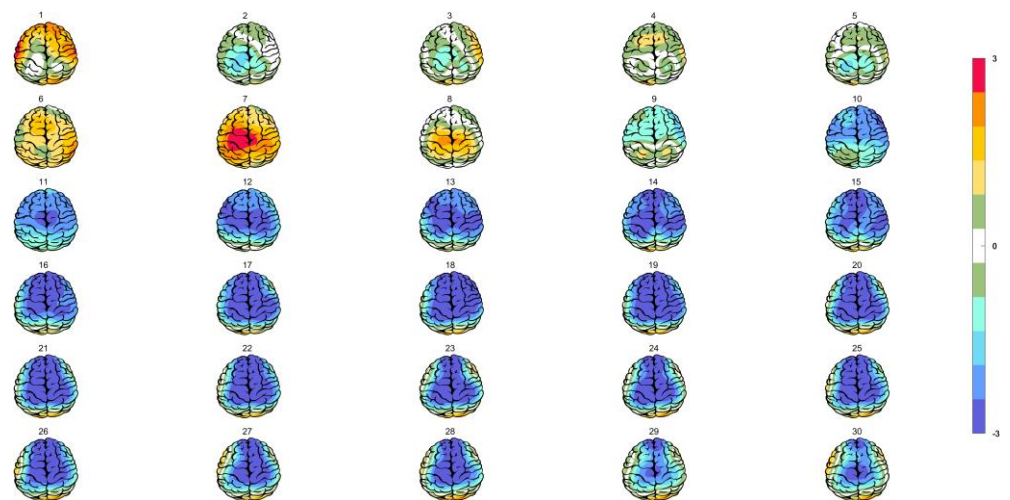
Frontal APF= 08.00

Posterior APF= 09.25

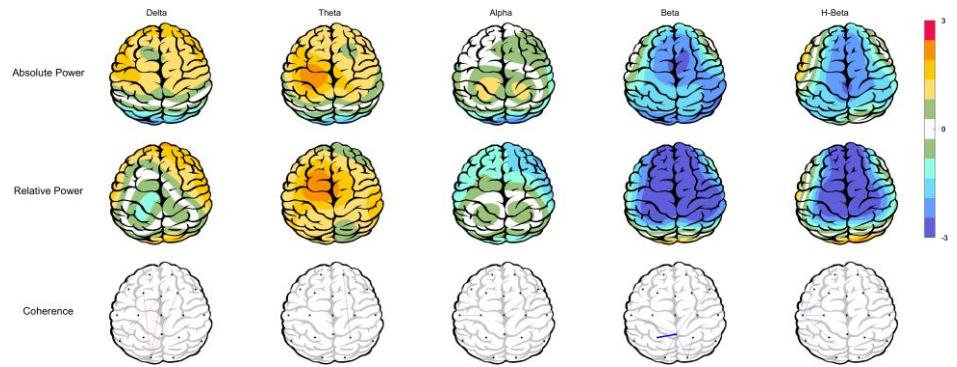
Absolute Power-Eye Closed (EC)



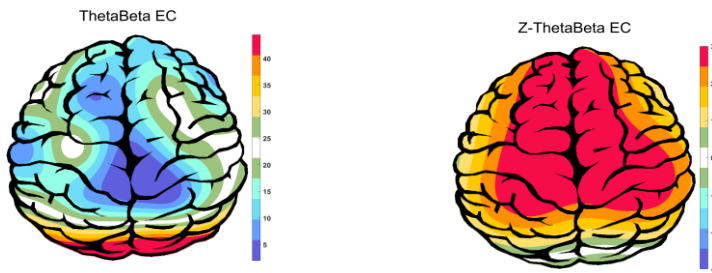
Relative Power-Eye Closed (EC)



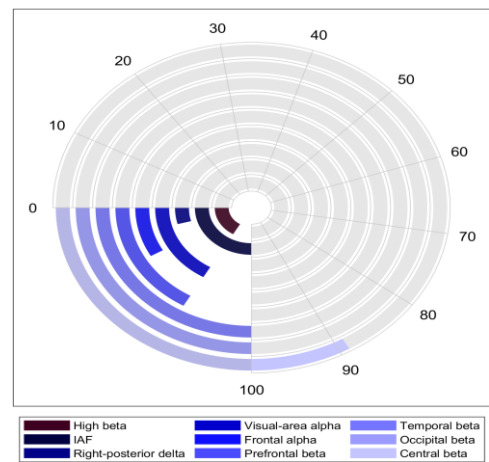
Z Score Summary Information (EC)



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



Arousal Level



EEG Spectra

