## **QEEG Clinical Report**

**EEGLens** 





The QEEG report is provided by NPCindex Company, operating under the QEEGhome brand.

#### **Personal Data:**

Name: Fatemeh Hoseinpoor

Gender: Female

Age: 1999-06-10 - 26.4

Handedness: Right

## **Clinical Data:**

Initial diagnosis: Anxiety-Depression

Medication: -

Date of Recording: 2025-10-08 Source of Referral: Dr Dinarvand



This case belongs to Dr Dinarvand





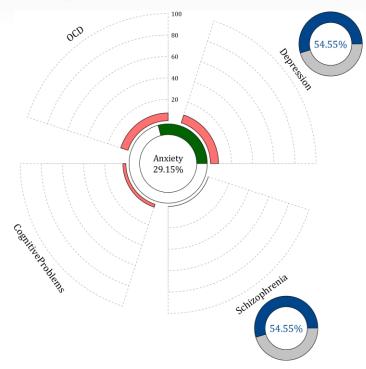




# **EEG** Quality EC EO **Z-score Information** EC EO **■** TMS Reponsibility rTMS Response Prediction

Probability

#### ■ Pathological Assessment



#### **■ EEG Neuromarker Values**

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	10.67	High
AFP - EC	Frontal	10.00	Normal
APF - EO	Occipital	11.88	High
AFP - EC	Occipital	11.62	High
Arousal Level - EO	-	-	Normal
Arousal Level - EC	-	-	Normal

QEEGhome Clinical Report

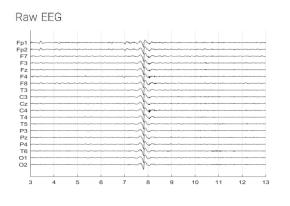
Dr Dinarvand





## **Denoising Information**

#### Eye Close



Rejected Channel



**Total Recording Time Remaining:** 

237.08 sec

**Number of Eye and Muscle Elements** 

Eye: 2 Muscle: 3

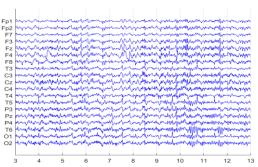
Low Artifact Percentage

High Artifact Percentage

**Total Artifact Percentage** 

**EEG Quality:** perfect

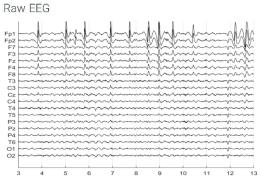
## Denoised EEG



Flat Channel



#### Eye Open



Rejected Channel



## **Total Recording Time Remaining:**

243.17 sec

**Number of Eye and Muscle Elements** 

Eye: 3 Muscle: 1

Low Artifact Percentage



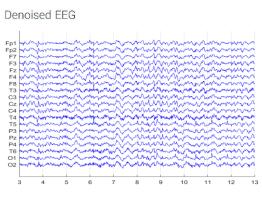
High Artifact Percentage



**Total Artifact Percentage** 



**EEG Quality:** perfect



Flat Channel

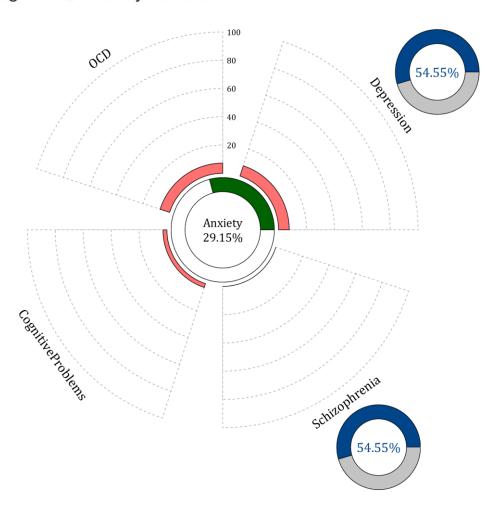






#### **Pathological Assessment**

#### Main Diagnosis: Anxiety Disorder



#### Description

According to the guidelines, the initial diagnosis of anxiety disorder could have comorbidities such as **alcohol abuse**, **depression**, **and OCD**. It also differentially diagnoses with **depression and schizophrenia**.

In the above graph, the **red area** shows the percentage of each comorbidity from your patient's EEG markers. Observe that each comorbidity marker is not unique and can be shared with other comorbidities.

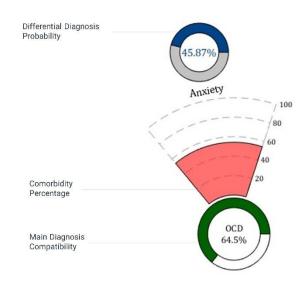
Side circles in the above graph represent the differential diagnosis between depression and its misdiagnosis conditions based on your patient's EEG markers and trained artificial intelligence. The differential diagnosis probability is represented by **the bold blue bars** in the circles, and the probability of depression is represented by the gray bars.

**Note:** In case your patient has drug abuse, obtain the substance abuse pathologic page of QEEGhome by registering the diagnosis under the initial diagnoses section of the website.

#### References:

Sadock, B. J., Sadock, V. A., & Ruiz, P. (Eds.). (2025). Kaplan and Sadock's comprehensive textbook of psychiatry (11th ed., Vols. 1–2). Wolters Kluwer Sadock, B. J., Sadock, V. A., & Ruiz, P. (2022). Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry (12th ed.). Wolters Kluwer

#### User Manual







## **rTMS Response Prediction**

#### Network Performance

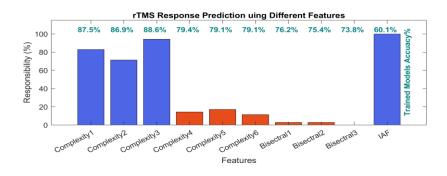
Accuracy: 92.10% Sensitivity: 89.13% Specificity: 97.47%

#### Participants Information

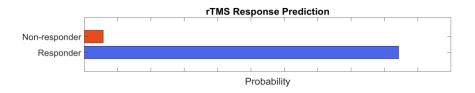




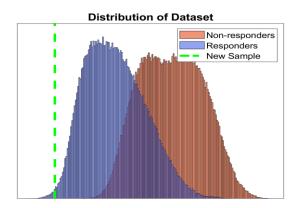
#### Features Information



#### Responsibility



#### Data Distribution



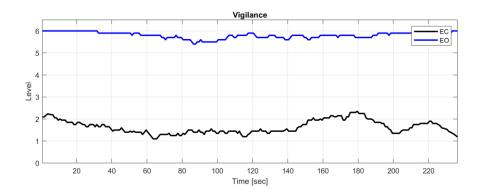
#### **About Predicting rTMS Response**

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.





## **Vigilance**



## 

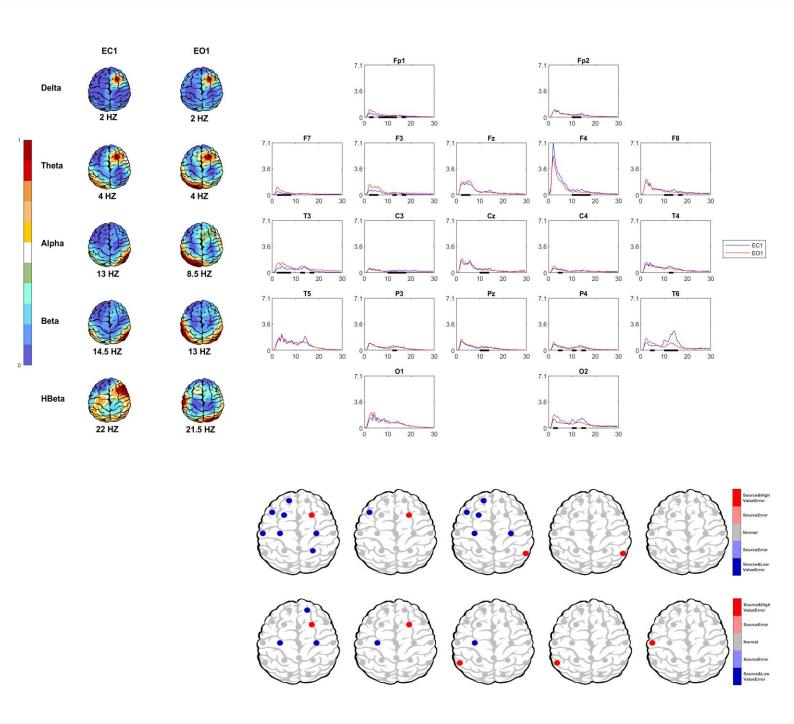
## **EEG Neuromarker Values**

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	10.67	High
AFP - EC	Frontal	10.00	Normal
APF - EO	Occipital	11.88	High
AFP - EC	Occipital	11.62	High
Alpha Asymmetry - EO	Frontal	-0.21	Anhedonia
Alpha Asymmetry - EC	Frontal	-0.53	Anhedonia
Alpha Asymmetry - EO	Occipital	00.14	Anxiety
Alpha Asymmetry - EC	Occipital	00.05	Anxiety
Beta Asymmetry - EO	Frontal	-0.01	Anxiety
Beta Asymmetry - EC	Frontal	-0.48	Anxiety
Alpha Blocking	01	-	Observed
Arousal Level - EO	H	-	Normal
Arousal Level - EC	i C	-	Normal
Vigilance Level - EO	-	06.00	Normal
Vigilance Level - EC	-	02.00	Low
Vigilance Mean - EO	-	05.80	Normal
Vigilance Mean - EC	-	01.63	Low
Vigilance Regulation - EO	-	-0.25	Normal
Vigilance Regulation - EC	¥i	-0.33	Normal
Vigilance 0 Stage (%) - E0	H	89.87	High
Vigilance 0 Stage (%) - EC	F*	00.00	Normal
Vigilance A1 Stage (%) - E0	-	00.00	-
Vigilance A1 Stage (%) - EC	•	00.00	-





## **EEG Spectra**

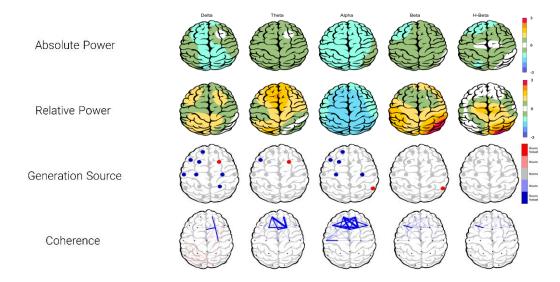




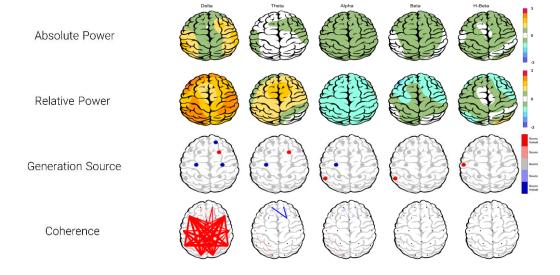


## **Z Score Summary Information**

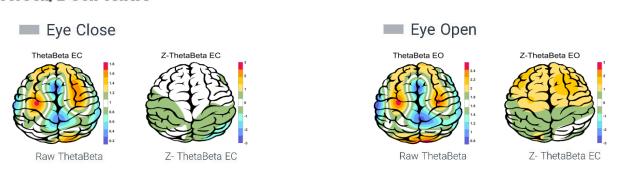
#### Eye Close



#### Eye Open



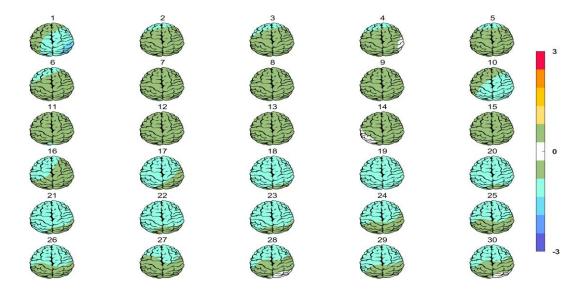
#### **Theta/Beta Ratio**



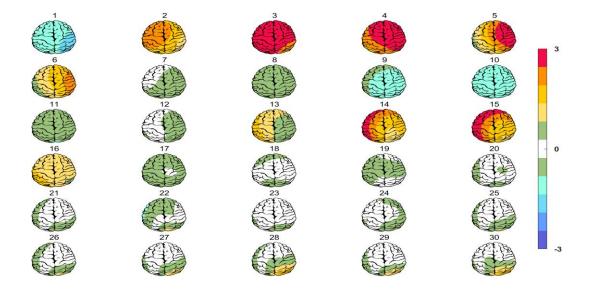




## **Absolute Power-Eye Close**



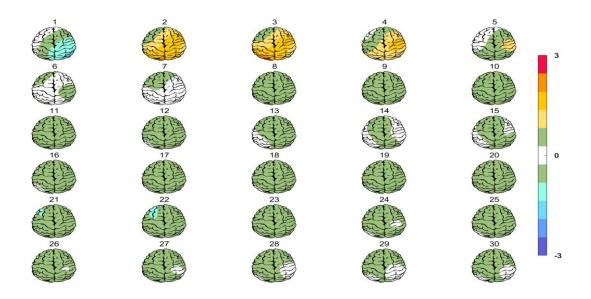
## **Relative Power-Eye Close**







## **Absolute Power-Eye Open**



## **Relative Power-Eye Open**

