QEEG Clinical Report

EEGLens





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

Personal Data:

Name: Mosleh Gender: Male

Age: 1980-06-15 - 45.4 Handedness: Right

Clinical Data:

Initial diagnosis: Attention and Concentration Problem-Sleep Problems

Medication: -

Date of Recording: 2025-10-09 Source of Referral: Clinicbrain

This case belongs to Clinicbrain









	EEG Quality
EC _[
EO _	
F	
	Z-score Information
EC	
Absolute Power	
Relative Power	
Generation Source Relative Power Absolute Power	
EO	
Absolute Power	
Relative Power	
Generation Source	
	TMS Reponsibility
F	

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■ EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
APF - E0	Frontal	10.50	High
AFP - EC	Frontal	10.50	Normal
APF - EO	Occipital	10.88	High
AFP - EC	Occipital	10.50	Normal
Arousal Level - EO	-	-	Normal
Arousal Level - EC	-	-	Normal

QEEGhome Clinical Report

Clinicbrain





Denoising Information

Eye Close

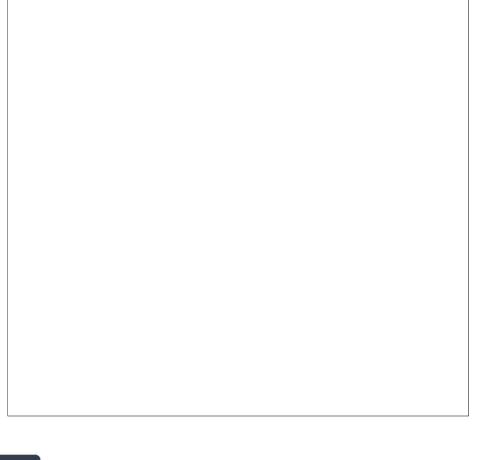
Raw EEG		
	Rejected Channel	Total Recording Time Remaining: 215.74 sec
		Number of Eye and Muscle Elements Eye: 1 Muscle: 0
		Low Artifact Percentage
Denoised EEG	Flat Channel	High Artifact Percentage
		Total Artifact Percentage
		EEG Quality: perfect
Eye Open Raw EEG	Rejected Channel	Total Recording Time Remaining: 190.84 sec
		Number of Eye and Muscle Elements Eye: 2 Muscle: 2
		Low Artifact Percentage
Denoised EEG	Fl-1 Ol-	High Artifact Percentage
	Flat Channel	Total Artifact Percentage
		EEG Quality: perfect





Pathological Assessment

Main Diagnosis: Adult ADHD



Description

According to the guidelines, the initial diagnosis of adult ADHD could have comorbidities such as alcohol abuse, anxiety, and depression. It also differentially diagnoses with depression, anxiety, and BMD.

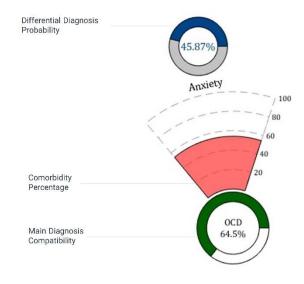
In the above graph, the **red area** shows the percentage of each comorbidity from your patient's EEG markers. Observe that each comorbidity marker is not unique and can be shared with other comorbidities.

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.

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







QEEG Based Predicting Medication Response

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Explanation

These two tables can be considered the most important finding that can be extracted from QEEG. To prepare this list, the NPCIndex Article Review Team has studied, categorized, and extracted algorithms from many authoritative published articles on predict medication response and Pharmaco EEG studies. These articles are published between 1970 and 2021. The findings extracted from this set include 85 different factors in the raw band domains, spectrum, power, coherence, and loreta that have not been segregated to avoid complexity, and their results are shown in these diagrams. One can review details in NPCIndex.com .

Medication Recommendation

These two charts, calculate response probability to various medications, according only to QEEG indicators. Blue charts favor drug response and red charts favor drug resistance. The longer the bar, the more evidence there is in the articles. Only drugs listed in the articles are listed. These tables present the indicators reviewed in the QEEG studies and are not a substitute for physician selection.



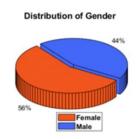


rTMS Response Prediction

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.





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EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	10.50	High
AFP - EC	Frontal	10.50	Normal
APF - EO	Occipital	10.88	High
AFP - EC	Occipital	10.50	Normal
Alpha Asymmetry - EO	Frontal	00.00	Anxiety
Alpha Asymmetry - EC	Frontal	-0.06	Anhedonia
Alpha Asymmetry - EO	Occipital	00.22	Anxiety
Alpha Asymmetry - EC	Occipital	00.36	Anxiety
Beta Asymmetry - EO	Frontal	00.00	Anhedonia
Beta Asymmetry - EC	Frontal	-0.06	Anxiety
Alpha Blocking	-	-	Not Observed
Arousal Level - EO	-	-	Normal
Arousal Level - EC	i Že	-	Normal
Vigilance Level - EO	<u>-</u> 0	04.00	Normal
Vigilance Level - EC	-	04.00	Normal
Vigilance Mean - EO	-	04.81	Normal
Vigilance Mean - EC		04.07	Normal
Vigilance Regulation - EO	-0	00.42	High
Vigilance Regulation - EC	-	00.23	Normal
Vigilance 0 Stage (%) - EO	-	40.53	Normal
Vigilance 0 Stage (%) - EC	-	00.00	Normal
Vigilance A1 Stage (%) - E0	-	00.00	-
Vigilance A1 Stage (%) - EC		40.00	-





EEG Spectra

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Z Score Summary Information

Eye Close

Absolute Power	
Relative Power	
Generation Source	
Coherence	

Eye Open

Absolute Power	
Relative Power	
Generation Source	_
Coherence	

Theta/Beta Ratio

Eye Close

Eye Open

Raw ThetaBeta

Z- ThetaBeta EC

Raw ThetaBeta

Z- ThetaBeta EC

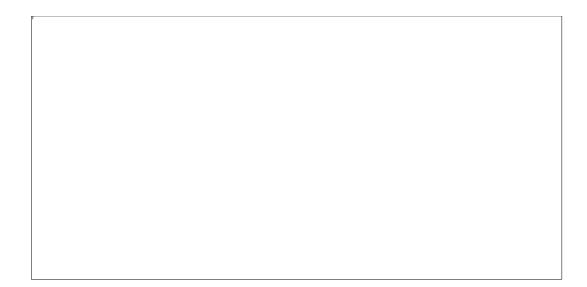




Absolute Power-Eye Close

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Relative Power-Eye Close







Absolute Power-Eye Open

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Relative Power-Eye Open

