QEEG Clinical Report

EEGLens





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

Personal Data:

Name: Nasrin Ghorbani

Gender: Female

Age: 1988-08-02 - 37.3

Handedness: Right

Clinical Data:

Initial diagnosis: ADHD-Anxiety-Panic Attacks

Medication: ES-citalopram

Date of Recording: 2025-10-09 Source of Referral: Ms Shakour

This case belongs to Ms Shakour





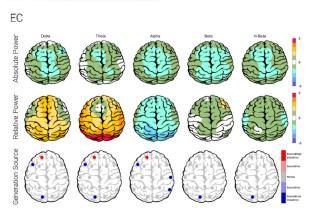




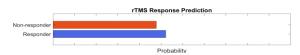
EEG Quality

EC

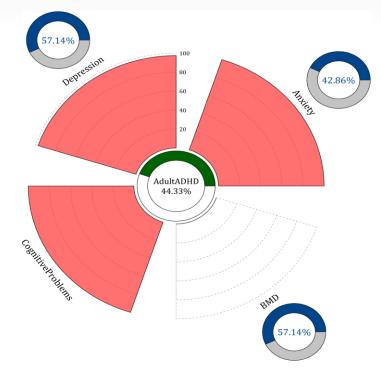
Z-score Information



■ TMS Reponsibility



■ Pathological Assessment



EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
AFP	Frontal	10.25	Normal
AFP	Occipital	10.88	Normal
Arousal Level		-	Normal

QEEGhome Clinical Report

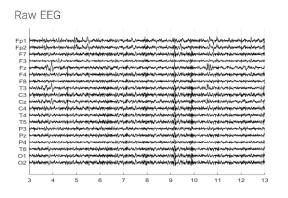
Ms Shakour





Denoising Information

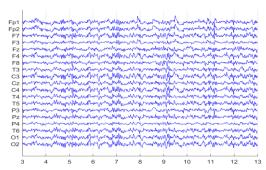
Eye Close





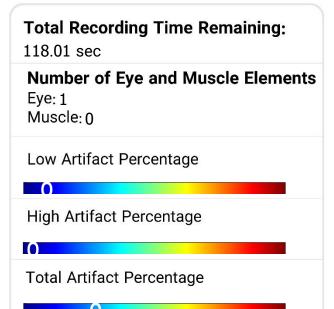


Denoised EEG



Flat Channel





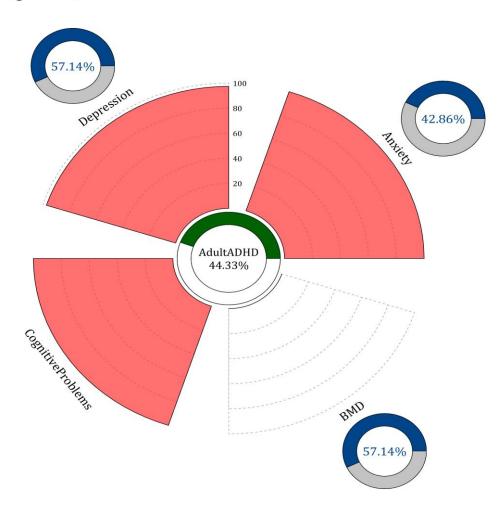
EEG Quality: good





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.

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

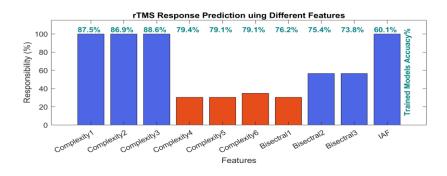
Accuracy: 92.10% Sensitivity: 89.13% Specificity: 97.47%

Participants Information

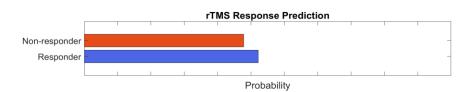




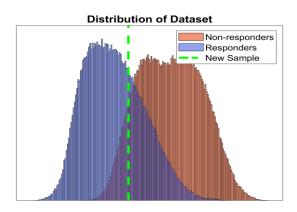
Features Information



Responsibility



Data Distribution



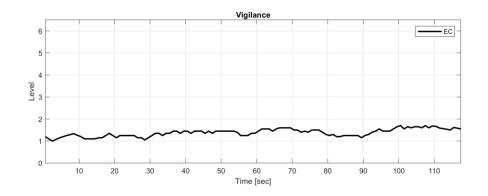
About Predicting rTMS Response

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



Vigilance Slope **0.19**

6 4

80-120s

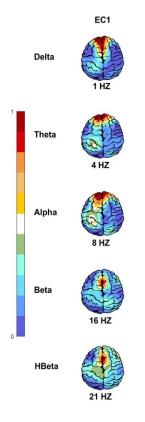
EEG Neuromarker Values

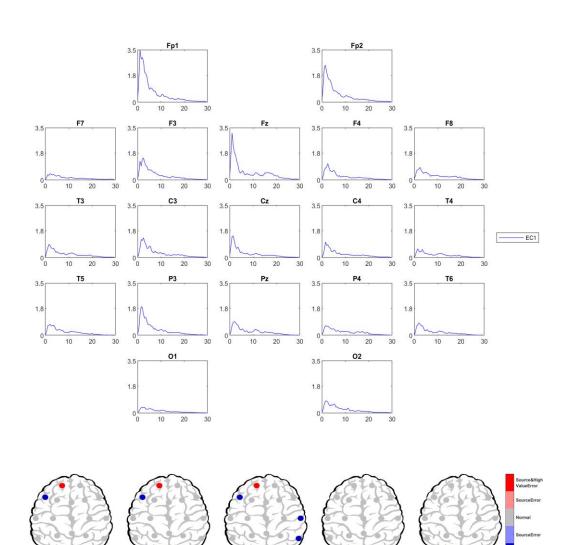
Neuromarker	Region	Value	Assessment
APF	Frontal	10.25	Normal
APF	Occipital	10.88	Normal
Alpha Asymmetry	Frontal	00.21	Anxiety
Alpha Asymmetry	Occipital	-0.19	Anhedonia
Beta Asymmetry	Frontal	00.06	Anhedonia
Arousal Level		-	Normal
Vigilance Level		02.00	Low
Vigilance Mean		01.38	Low
Vigilance Regulation		00.19	Normal
Vigilance 0 Stage (%)	-	00.00	Normal
Vigilance A1 Stage (%)	-	00.00	-





EEG Spectra



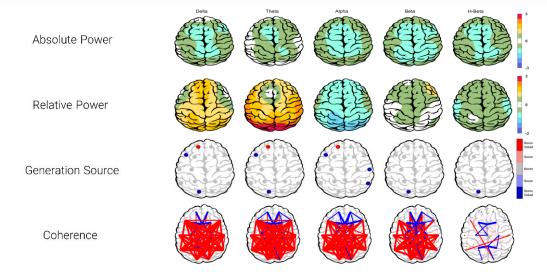




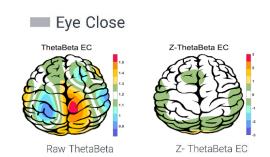


Z Score Summary Information

Eye Close



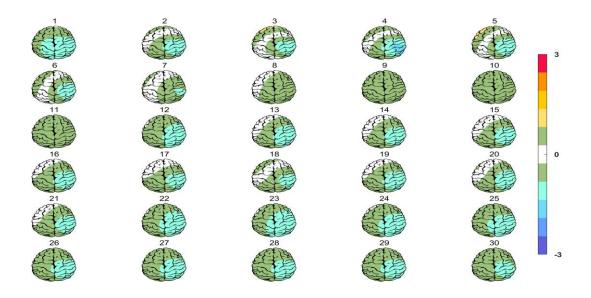
Theta/Beta Ratio







Absolute Power-Eye Close



Relative Power-Eye Close

