## **QEEG Clinical Report**

**EEGLens** 





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

#### **Personal Data:**

Name: Naznin Hashemi

Gender: Female

Age: 1984-05-15 - 41.5

Handedness: Left

#### **Clinical Data:**

Initial diagnosis: OCD

Medication: Asentra-Clomipramine-Risperidone

Date of Recording: 2025-10-11

Source of Referral: Dr Sabourmoghaddam

This case belongs to Dr Sabourmoghaddam





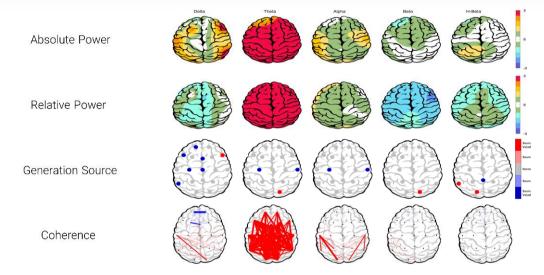




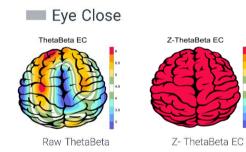


## **Z Score Summary Information**

Eye Close



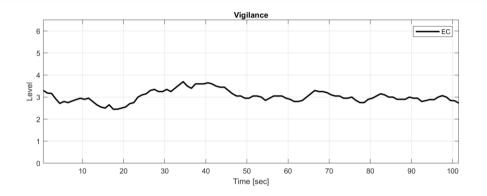
#### **Theta/Beta Ratio**



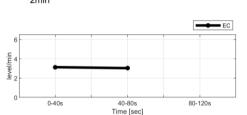




## Vigilance



# Vigilance Slope -0.14



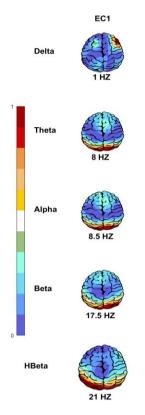
## **EEG Neuromarker Values**

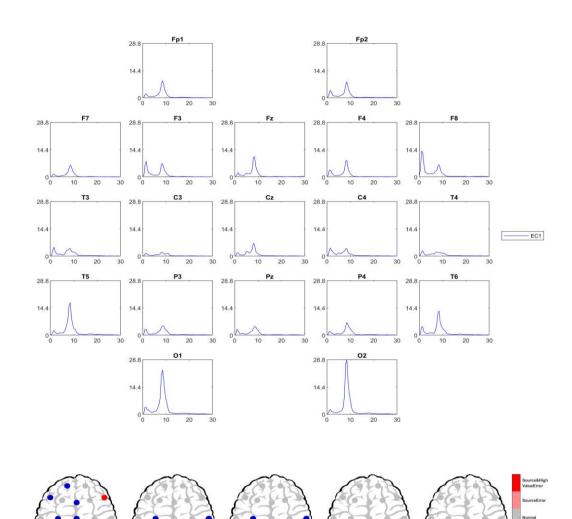
Neuromarker	Region	Value	Assessment
APF	Frontal	08.75	Low
APF	Occipital	08.88	Low
Alpha Asymmetry	Frontal	-0.03	Anhedonia
Alpha Asymmetry	Occipital	-0.03	Anhedonia
Beta Asymmetry	Frontal	00.02	Anhedonia
Arousal Level	<b>-</b>	-	Low
Vigilance Level	<b>-</b>	03.00	Normal
Vigilance Mean		03.02	Normal
Vigilance Regulation		-0.14	Normal
Vigilance 0 Stage (%)	<b>-</b>	00.00	Normal
Vigilance A1 Stage (%)		18.63	-





## **EEG Spectra**

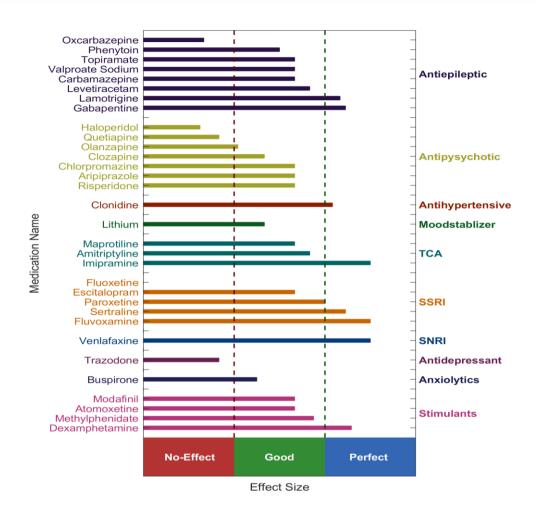


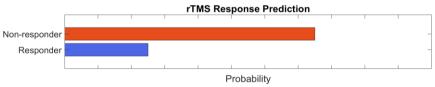






#### **QEEG Based Predicting Medication Response**





#### **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.





## Report

گزارش:

.1

نتایج تشخیصی:

.1



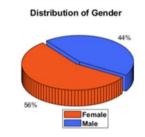


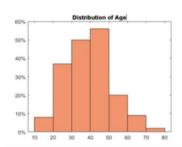
#### **rTMS Response Prediction**

#### Network Performance

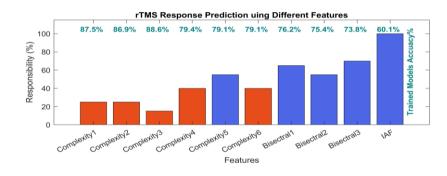
Accuracy: 92.10% Sensitivity: 89.13% Specificity: 97.47%

#### Participants Information

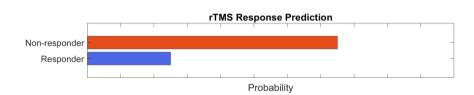




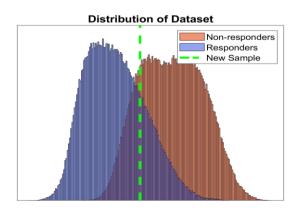
#### Features Information



#### Responsibility



#### Data Distribution



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

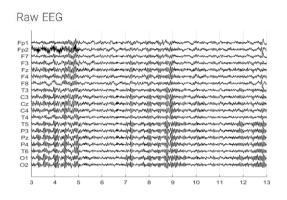
This index was obtained based on machine learning approaches and by examining the QEEG biomarkers of more than 470 cases treated with rTMS. The cases were diagnosed with depression (with and without comorbidity) and all were medication free. By examining more than 40 biomarkers capable of predicting 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.





## **Denoising Information**

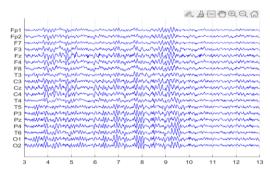
#### Eye Close







Denoised EEG



Flat Channel



## **Total Recording Time Remaining:**

102.13 sec

## **Number of Eye and Muscle Elements**

Eye: 3 Muscle: 0

Low Artifact Percentage

0

High Artifact Percentage

0

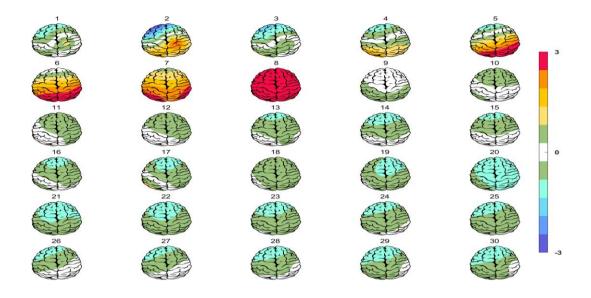
**Total Artifact Percentage** 

**EEG Quality:** perfect

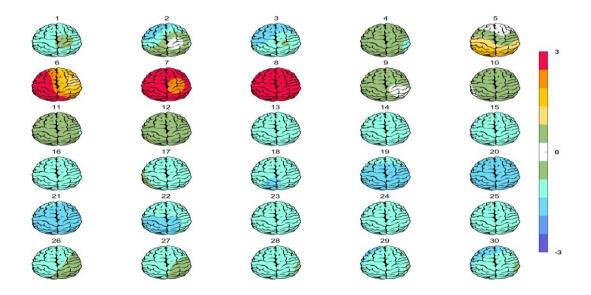




## **Absolute Power-Eye Close**



## **Relative Power-Eye Close**

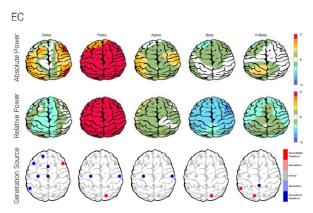




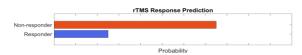
#### **EEG** Quality

EC O

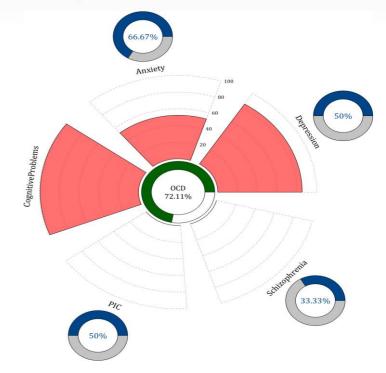
#### Z-score Information



#### **■** TMS Reponsibility



#### ■ Pathological Assessment



#### **■ EEG Neuromarker Values**

Neuromarker	Region	Value	Assessment
AFP	Frontal	08.75	Low
AFP	Occipital	88.80	Low
Arousal Level		-	Low

QEEGhome Clinical Report

Dr Sabourmoghaddam