QEEG Clinical Report

EEGLens





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

Personal Data:

Name: Setayesh Nikbakht

Gender: Female

Age: 2013-11-25 - 12.1 Handedness: Right

Clinical Data:

Initial diagnosis: MDD

Medication: -

Date of Recording: 2025-10-12 Source of Referral: Dr Raisie

This case belongs to Dr Raisie





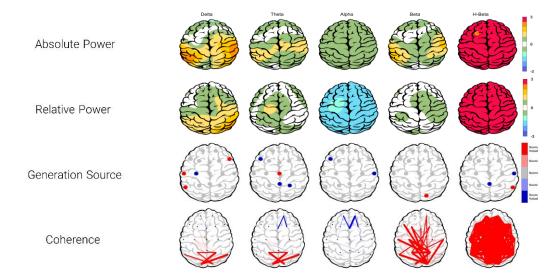




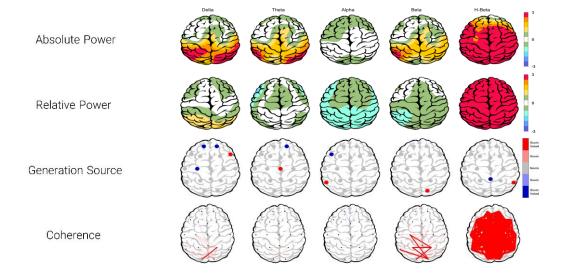


Z Score Summary Information

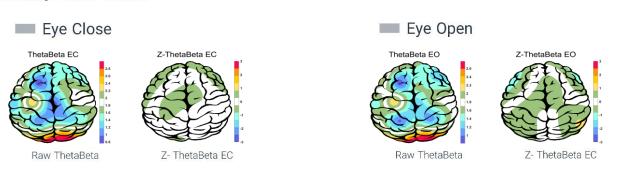
Eye Close



Eye Open



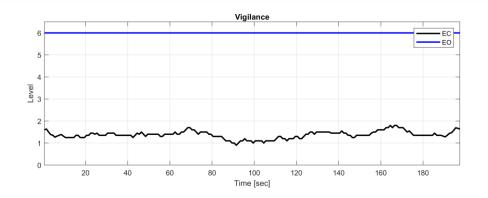
Theta/Beta Ratio

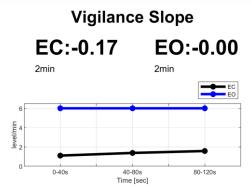






Vigilance





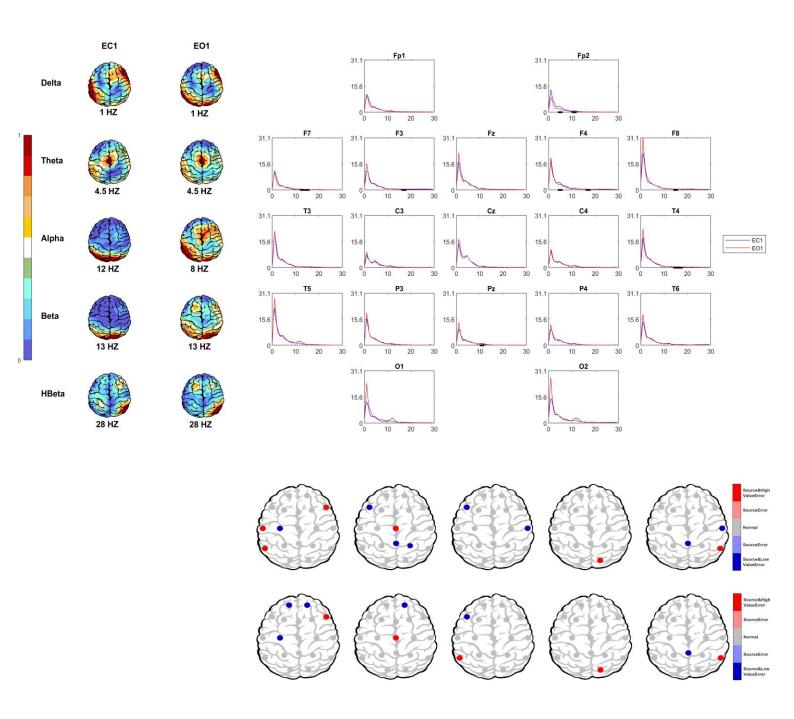
EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	09.17	Normal
AFP - EC	Frontal	09.83	Normal
APF - EO	Occipital	10.12	High
AFP - EC	Occipital	12.00	High
Alpha Asymmetry - EO	Frontal	-0.08	Anhedonia
Alpha Asymmetry - EC	Frontal	-0.05	Anhedonia
Alpha Asymmetry - EO	Occipital	-0.01	Anhedonia
Alpha Asymmetry - EC	Occipital	-0.08	Anhedonia
Beta Asymmetry - EO	Frontal	00.12	Anhedonia
Beta Asymmetry - EC	Frontal	-0.01	Anxiety
Alpha Blocking	P3	-	Observed
Arousal Level - EO	H	-	Low
Arousal Level - EC	i C	-	Normal
Vigilance Level - EO	-	06.00	Normal
Vigilance Level - EC	-	02.00	Low
Vigilance Mean - EO	-	06.00	Normal
Vigilance Mean - EC	-	01.37	Low
Vigilance Regulation - EO	-	-0.00	Normal
Vigilance Regulation - EC	÷:	-0.17	Normal
Vigilance 0 Stage (%) - E0	H	100.00	High
Vigilance 0 Stage (%) - EC	-	00.00	Normal
Vigilance A1 Stage (%) - E0	-	00.00	-
Vigilance A1 Stage (%) - EC	•	00.00	-





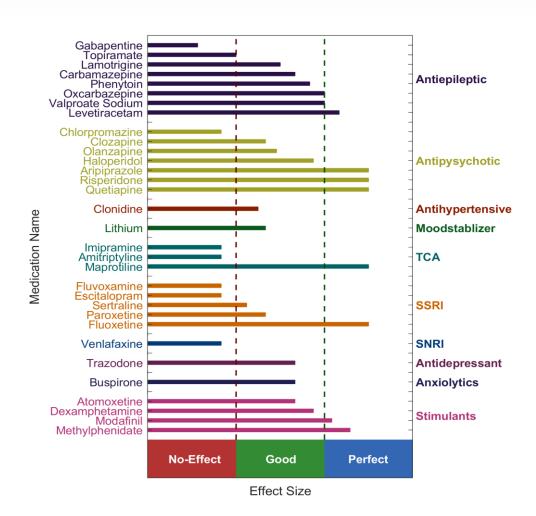
EEG Spectra







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:

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نتایج تشخیصی:

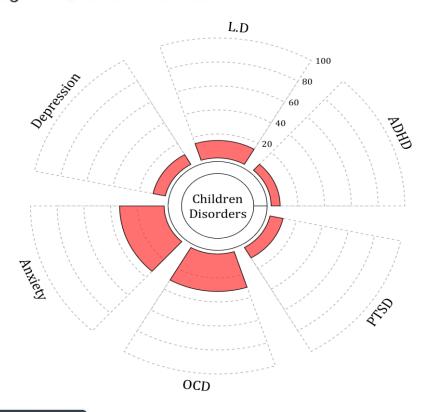
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Pathological Assessment

Main Diagnosis: Children Disorder



ADHD Subtypes

1. May be anxious, may be highly intelligent, need sufficient sleep, and should avoid high carbohydrate intake. Avoide stimulants, benzodiazepines and SNRI. Consider clonidine.

Description

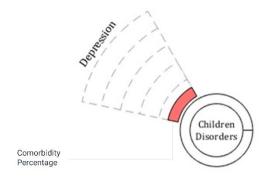
According to the guidelines, psychiatric disorders in children (under 17 years) include *ADHD*, learning disorder (LD), PTSD, OCD, depression, and anxiety.

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

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

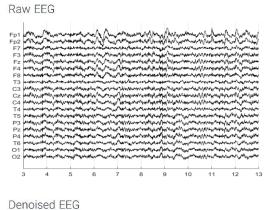






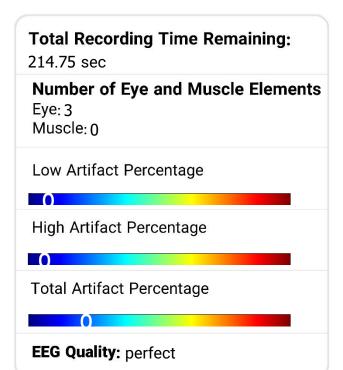
Denoising Information

Eye Close

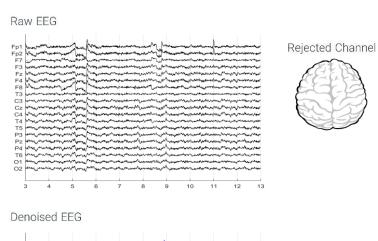


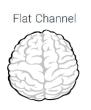
Rejected Channel

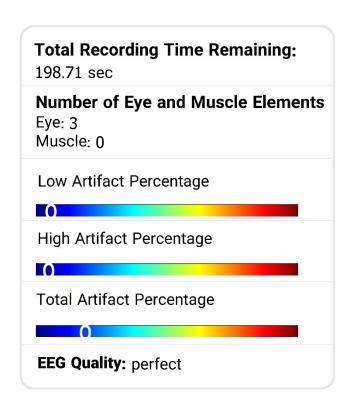
Flat Channel



Eye Open



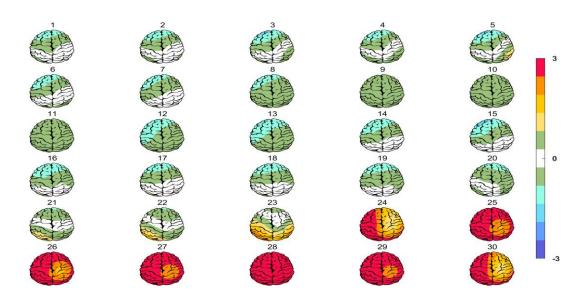




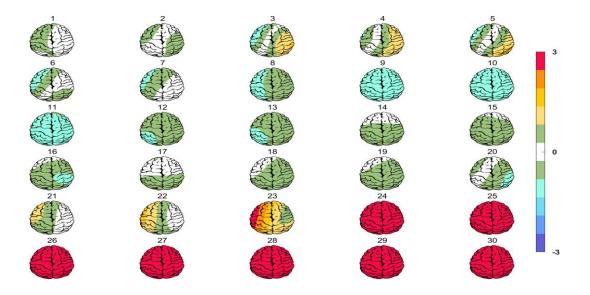




Absolute Power-Eye Close



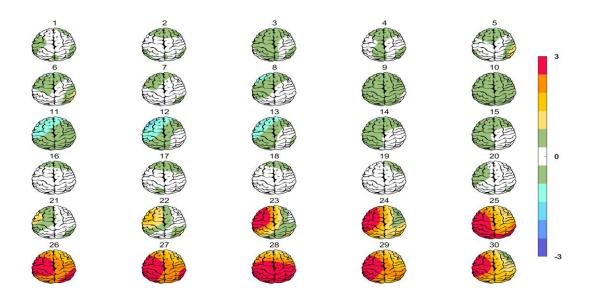
Relative Power-Eye Close



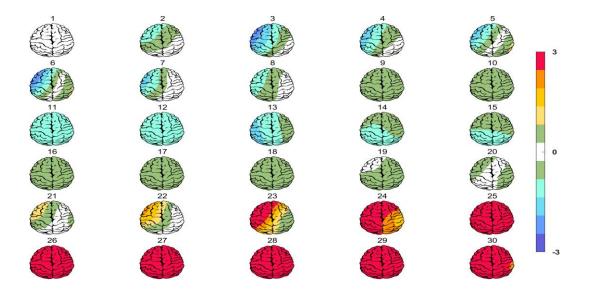




Absolute Power-Eye Open



Relative Power-Eye Open

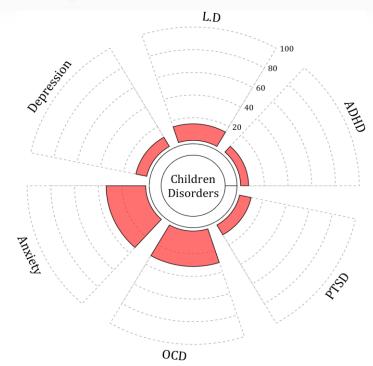






■ EEG Quality EC EO Z-score Information EC ΕO

■ Pathological Assessment



■ EEG Neuromarker Values

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Dr Raisie