

# QEEG Clinical Report

EEGLens



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

## Personal Data:

Name: Parsa Bravar

Gender: Male

Age: 2015-05-14 - 10.6

Handedness: Right

## Clinical Data:

Initial diagnosis: ADHD-Anxiety

Medication: -

Date of Recording: 2025-10-13

Source of Referral: Saya Clinic

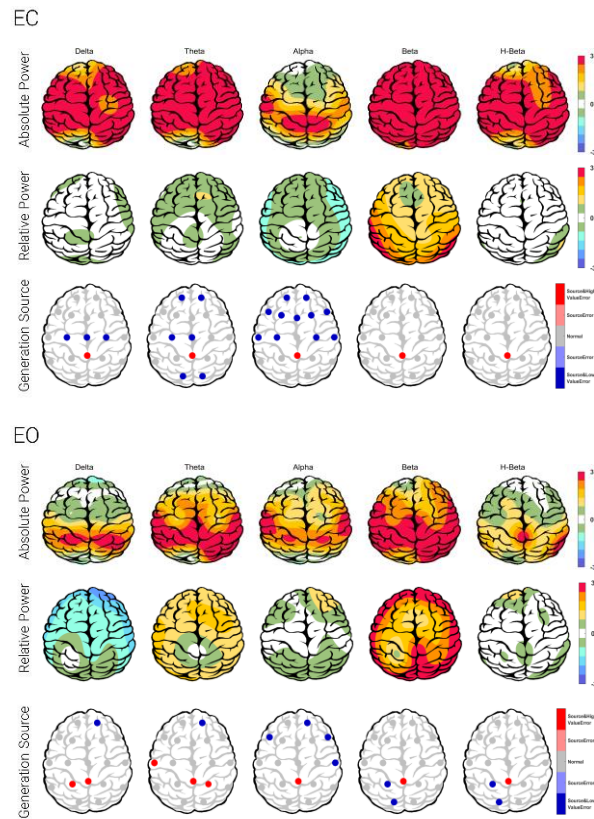


This case belongs to Saya Clinic

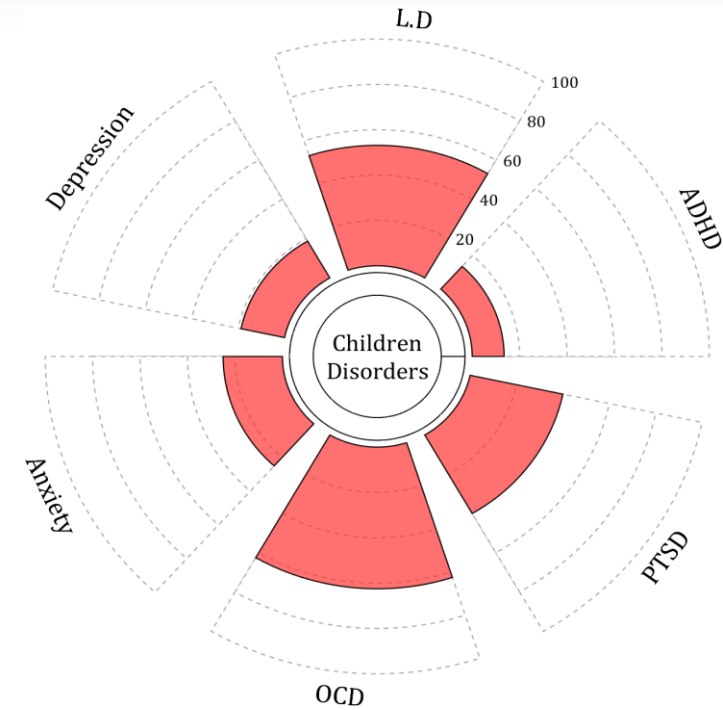
## EEG Quality



## Z-score Information



## Pathological Assessment



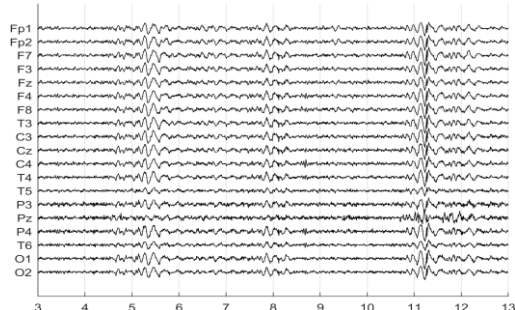
## EEG Neuromarker Values

| Neuromarker        | Region    | Value | Assessment |
|--------------------|-----------|-------|------------|
| APF - EO           | Frontal   | 12.00 | High       |
| AFP - EC           | Frontal   | 10.17 | High       |
| APF - EO           | Occipital | 10.00 | High       |
| AFP - EC           | Occipital | 10.00 | High       |
| Arousal Level - EO | -         | -     | Normal     |
| Arousal Level - EC | -         | -     | Normal     |

## Denoising Information

Eye Close

Raw EEG



Rejected Channel



**Total Recording Time Remaining:**

254.58 sec

**Number of Eye and Muscle Elements**

Eye: 1

Muscle: 0

Low Artifact Percentage



High Artifact Percentage

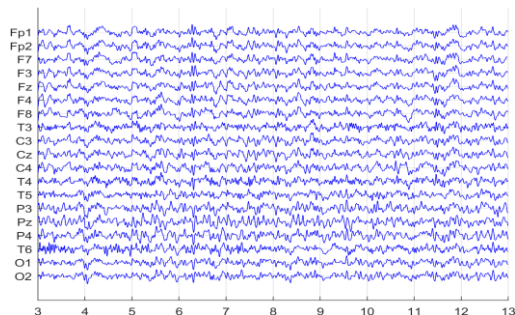


Total Artifact Percentage



**EEG Quality:** perfect

Denoised EEG

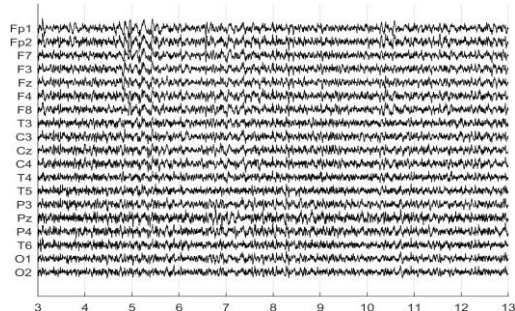


Flat Channel



Eye Open

Raw EEG



Rejected Channel



**Total Recording Time Remaining:**

225.59 sec

**Number of Eye and Muscle Elements**

Eye: 2

Muscle: 0

Low Artifact Percentage



High Artifact Percentage

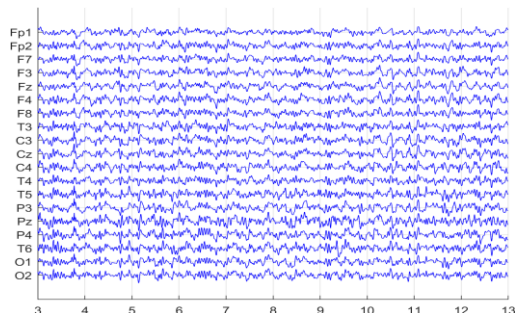


Total Artifact Percentage



**EEG Quality:** perfect

Denoised EEG

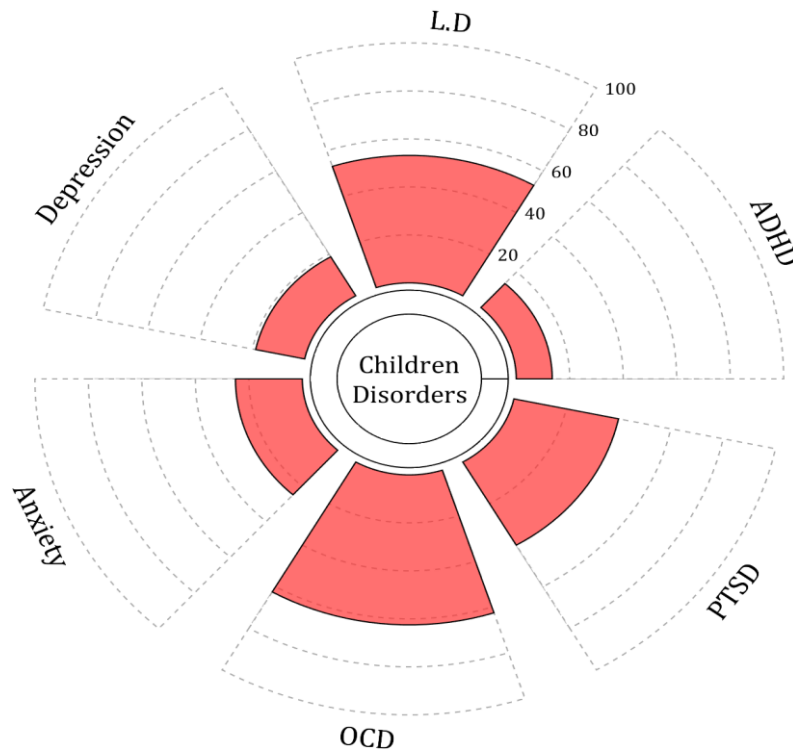


Flat Channel



## Pathological Assessment

Main Diagnosis: Children Disorder



### ADHD Subtypes

1. Prone to moody behavior and temper tantrums. May respond to stimulants, consider anticonvulsants or clonidine, avoid SSRI.

### Description

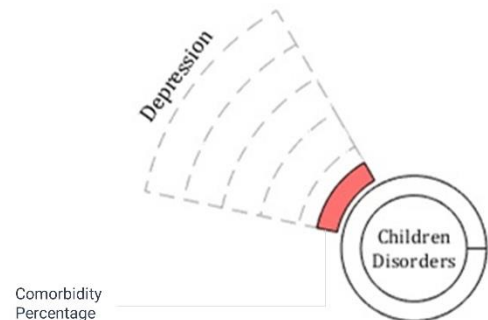
According to the guidelines, psychiatric disorders in children (under 17 years) include *ADHD*, *learning disorder (LD)*, *PTSD*, *OCD*, *depression*, and *anxiety*.

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.

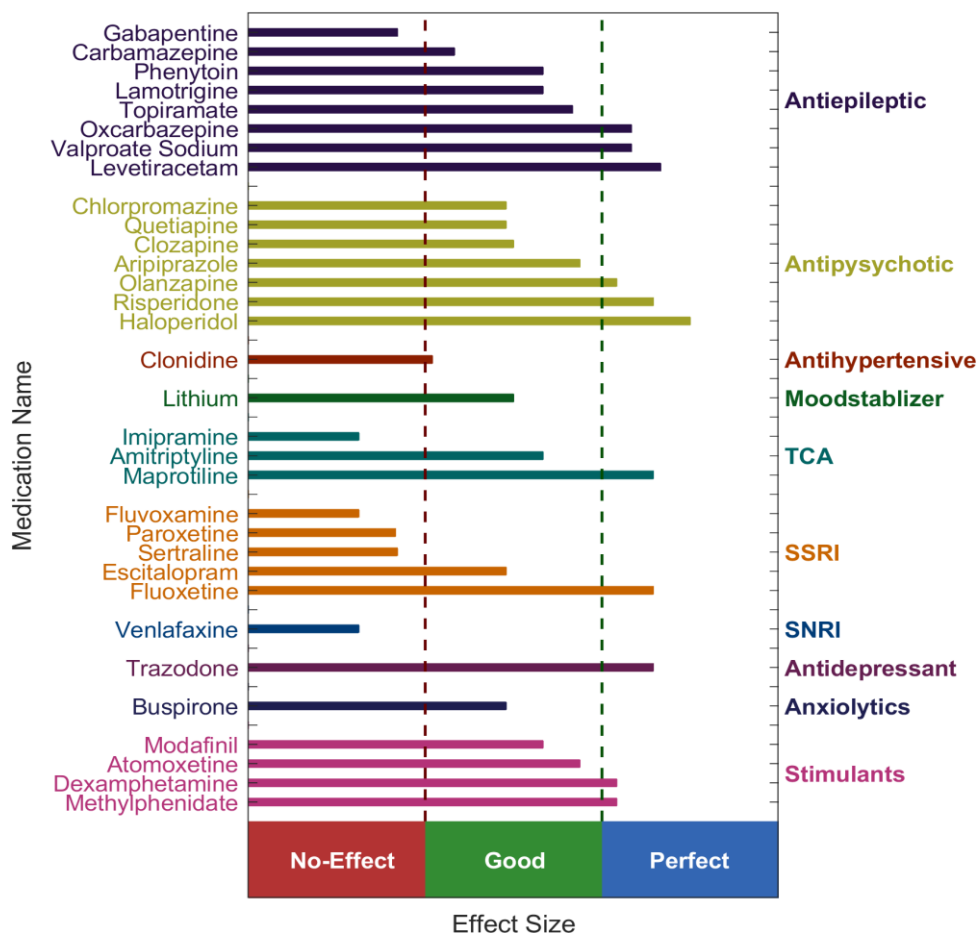
#### References:

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



## QEEG Based Predicting Medication Response



### Explanation

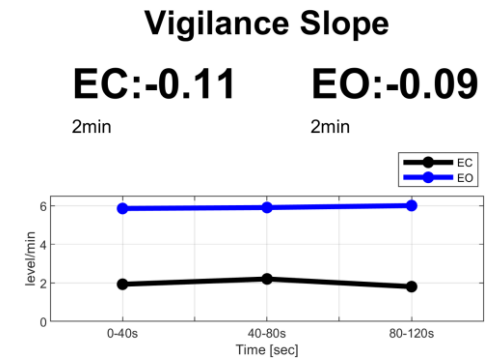
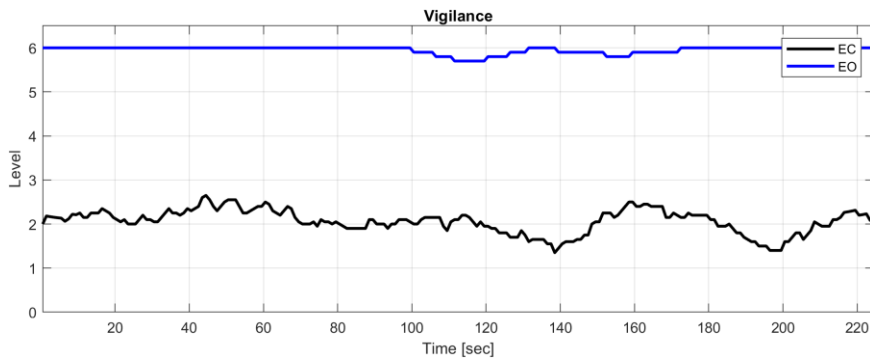
These two tables can be considered the most important finding that can be extracted from QEEG. To prepare this list, the NPCIndex Article Review Team has studied, categorized, and extracted algorithms from many authoritative published articles on predict medication response and Pharmacoe EEG studies. 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.



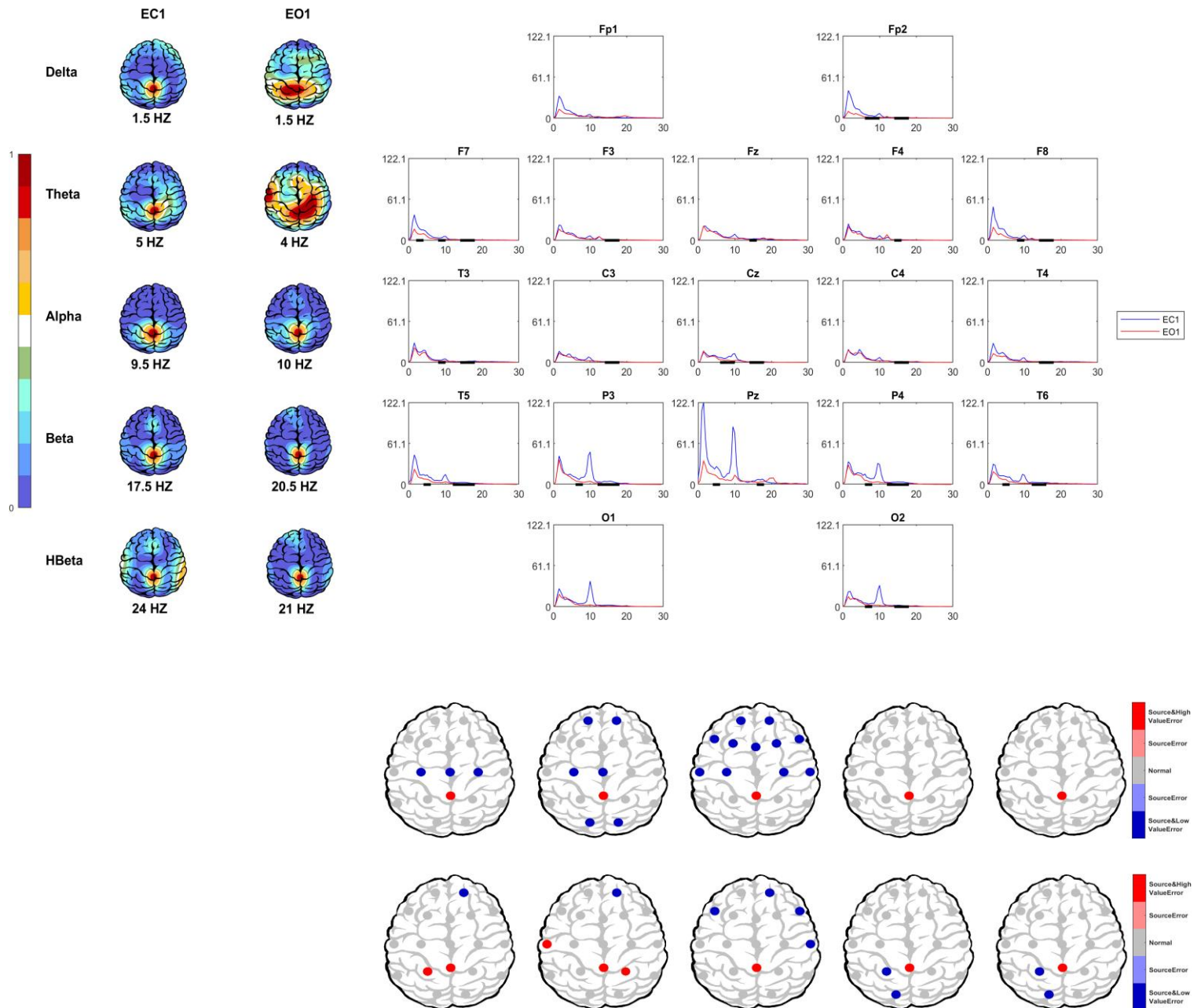
## Vigilance



## EEG Neuromarker Values

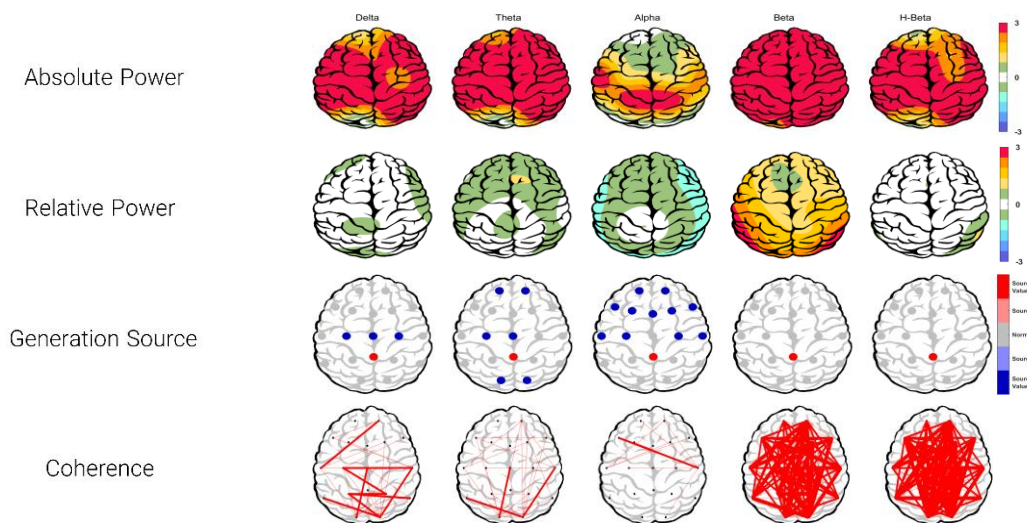
| Neuromarker                 | Region    | Value | Assessment   |
|-----------------------------|-----------|-------|--------------|
| APF - EO                    | Frontal   | 12.00 | High         |
| AFP - EC                    | Frontal   | 10.17 | High         |
| APF - EO                    | Occipital | 10.00 | High         |
| AFP - EC                    | Occipital | 10.00 | High         |
| Alpha Asymmetry - EO        | Frontal   | -0.17 | Anhedonia    |
| Alpha Asymmetry - EC        | Frontal   | -0.02 | Anhedonia    |
| Alpha Asymmetry - EO        | Occipital | 00.05 | Anxiety      |
| Alpha Asymmetry - EC        | Occipital | 00.05 | Anxiety      |
| Beta Asymmetry - EO         | Frontal   | 00.02 | Anhedonia    |
| Beta Asymmetry - EC         | Frontal   | 00.10 | Anhedonia    |
| Alpha Blocking              | -         | -     | Not Observed |
| Arousal Level - EO          | -         | -     | Normal       |
| Arousal Level - EC          | -         | -     | Normal       |
| Vigilance Level - EO        | -         | 06.00 | Normal       |
| Vigilance Level - EC        | -         | 02.00 | Low          |
| Vigilance Mean - EO         | -         | 05.96 | Normal       |
| Vigilance Mean - EC         | -         | 02.06 | Low          |
| Vigilance Regulation - EO   | -         | -0.09 | Normal       |
| Vigilance Regulation - EC   | -         | -0.11 | Normal       |
| Vigilance 0 Stage (%) - EO  | -         | 97.78 | High         |
| Vigilance 0 Stage (%) - EC  | -         | 00.00 | Normal       |
| Vigilance A1 Stage (%) - EO | -         | 00.00 | -            |
| Vigilance A1 Stage (%) - EC | -         | 01.33 | -            |

## EEG Spectra

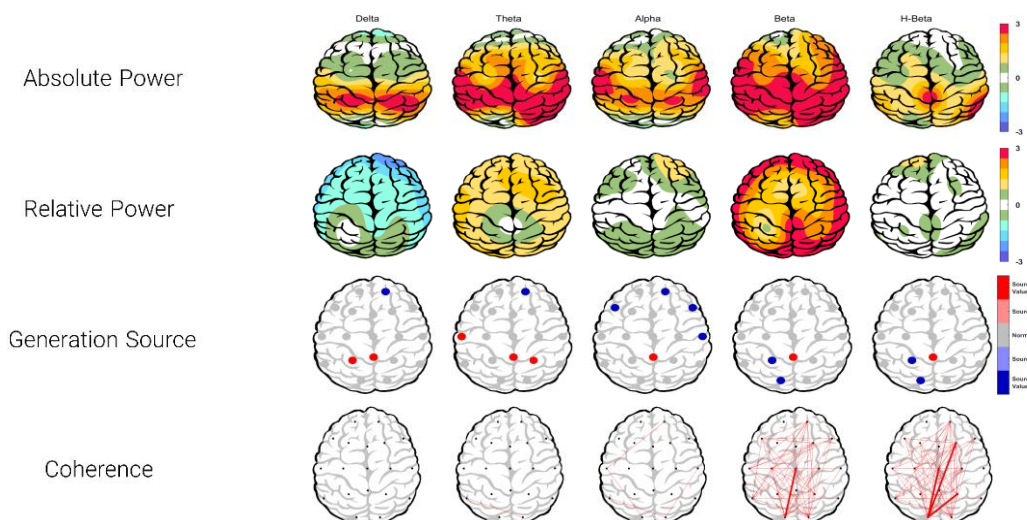


## Z Score Summary Information

### Eye Close

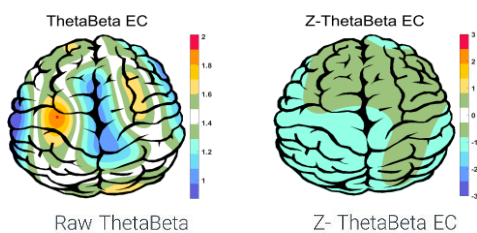


### Eye Open

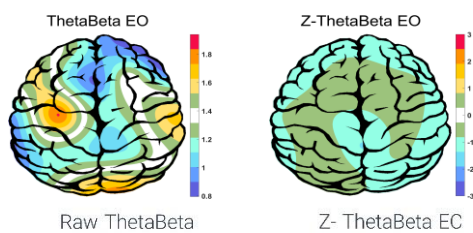


## Theta/Beta Ratio

### Eye Close

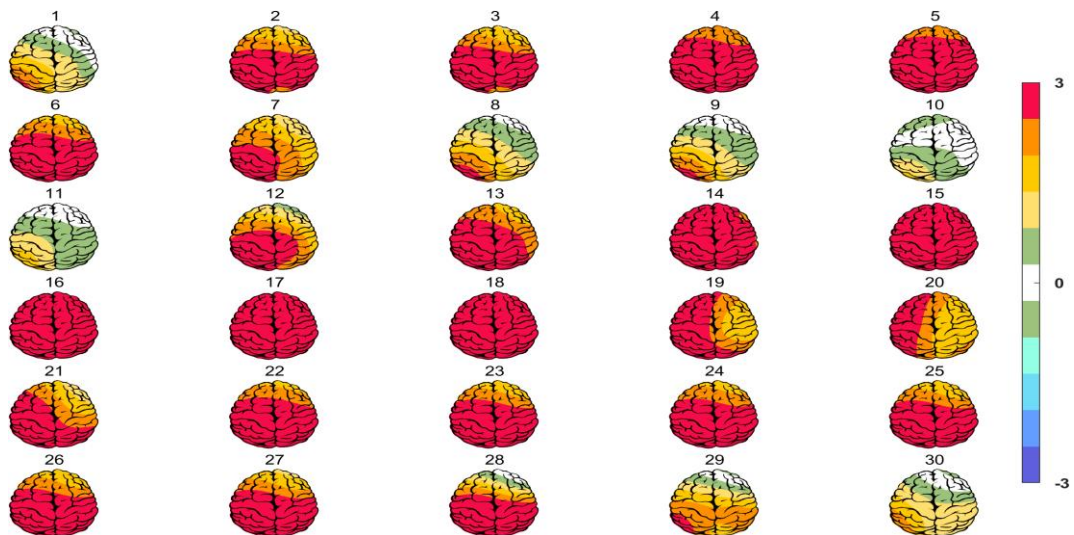


### Eye Open

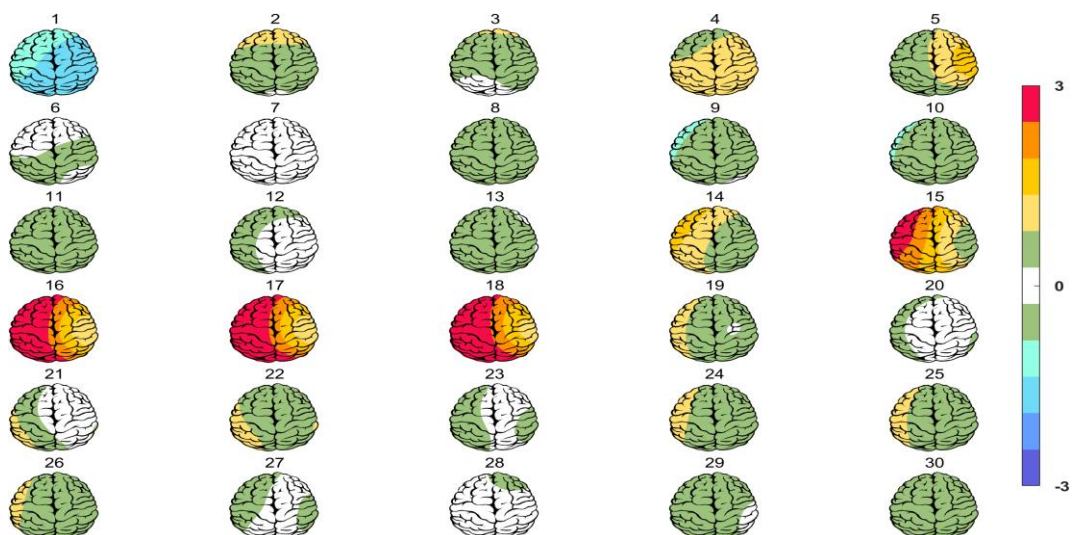




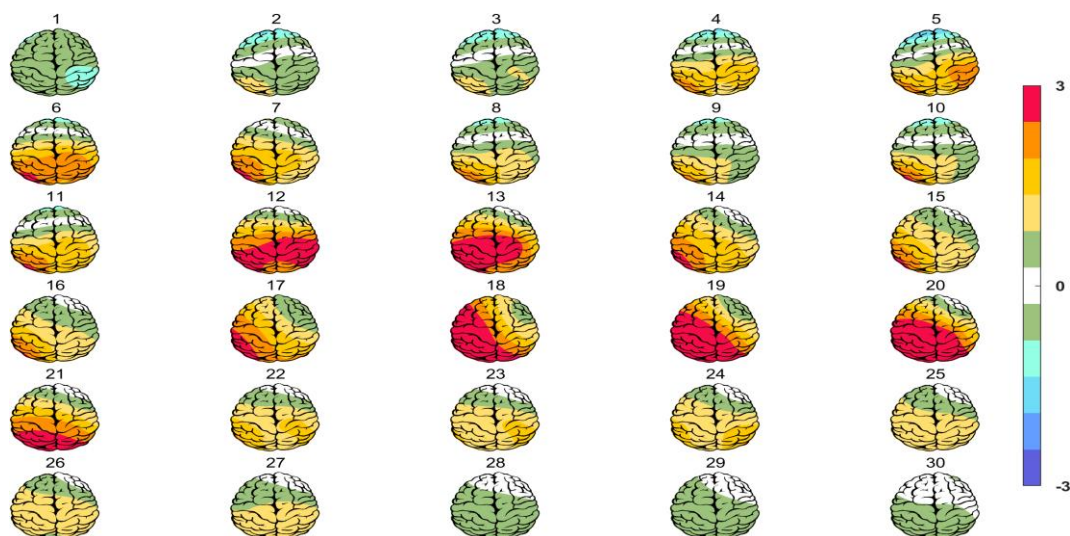
## Absolute Power-Eye Close



## Relative Power-Eye Close



## Absolute Power-Eye Open



## Relative Power-Eye Open

