QEEG Clinical Report

EEGLens

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

Personal Data:

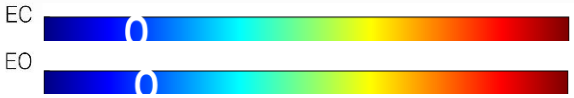
Name: Shahpari Dinarvand
Gender: Female
Age: 1942-11-28 - 83.1
Handedness: Right

Clinical Data:

Initial diagnosis: Negative Thoughts-OCD-Poor Sleep-Rumination
Medication: ASA-Atorvastatin
Date of Recording: 2025-10-14
Source of Referral: Dr Dinarvand

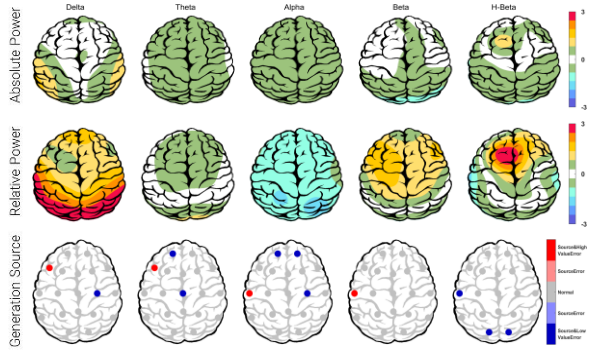
This case belongs to Dr Dinarvand

EEG Quality

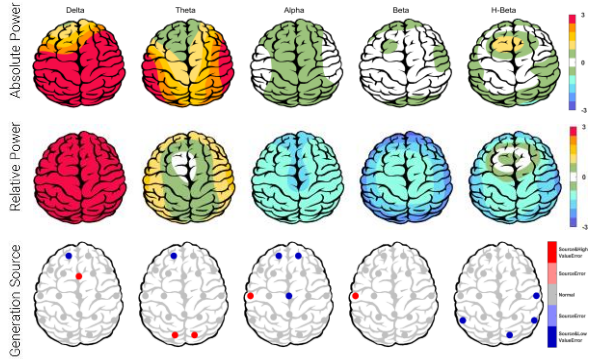


Z-score Information

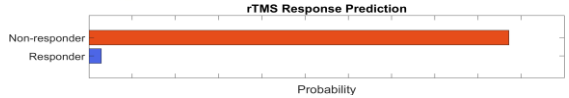
EC



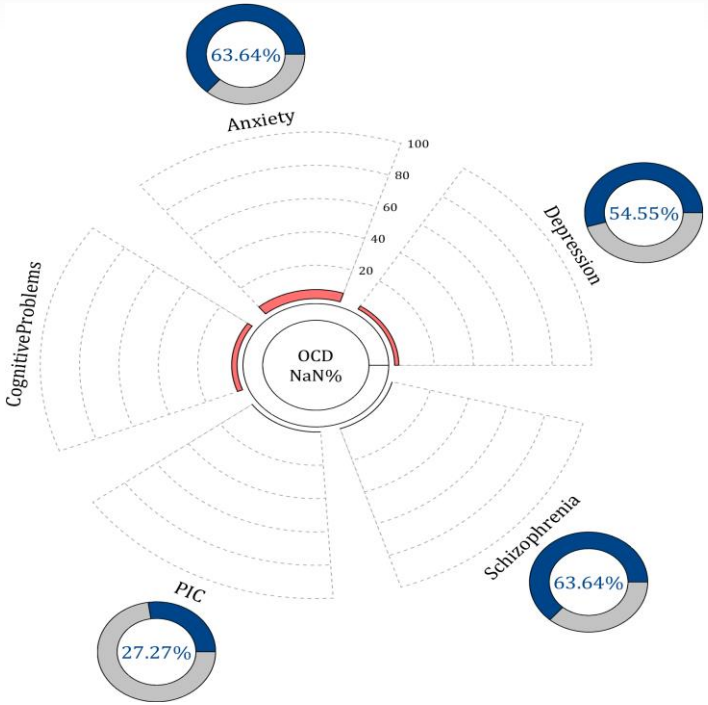
EO



TMS Reponsibility



Pathological Assessment



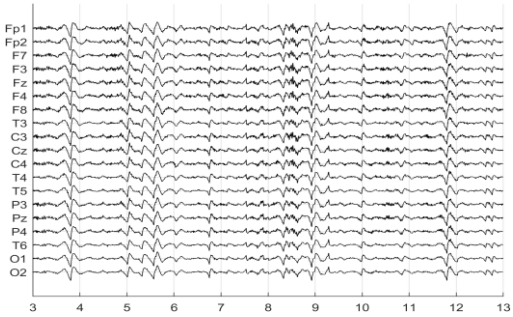
EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	11.75	High
AFP - EC	Frontal	12.33	High
APF - EO	Occipital	12.12	High
AFP - EC	Occipital	12.88	High
Arousal Level - EO	-	-	Normal
Arousal Level - EC	-	-	High

Denoising Information

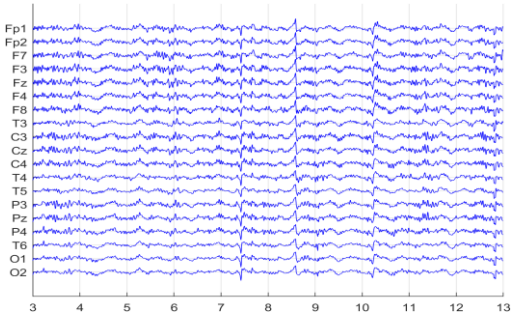
Eye Close

Raw EEG



Rejected Channel

Denoised EEG



Flat Channel

Total Recording Time Remaining:
252.06 sec

Number of Eye and Muscle Elements
Eye: 2
Muscle: 1

Low Artifact Percentage

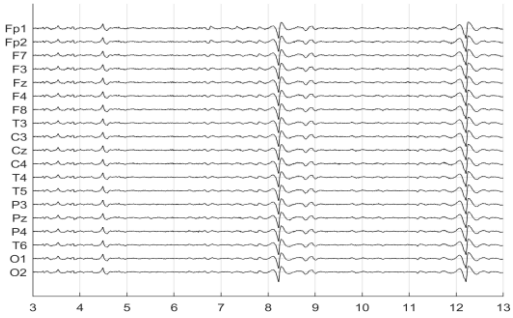
High Artifact Percentage

Total Artifact Percentage

EEG Quality: perfect

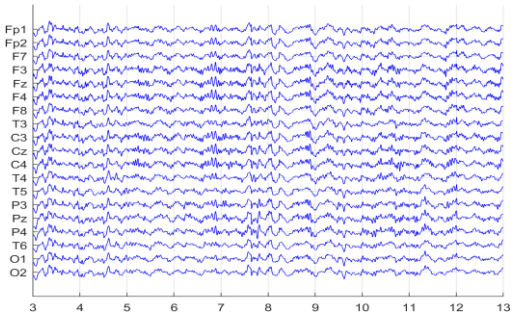
Eye Open

Raw EEG



Rejected Channel

Denoised EEG



Flat Channel

Total Recording Time Remaining:
246.22 sec

Number of Eye and Muscle Elements
Eye: 2
Muscle: 1

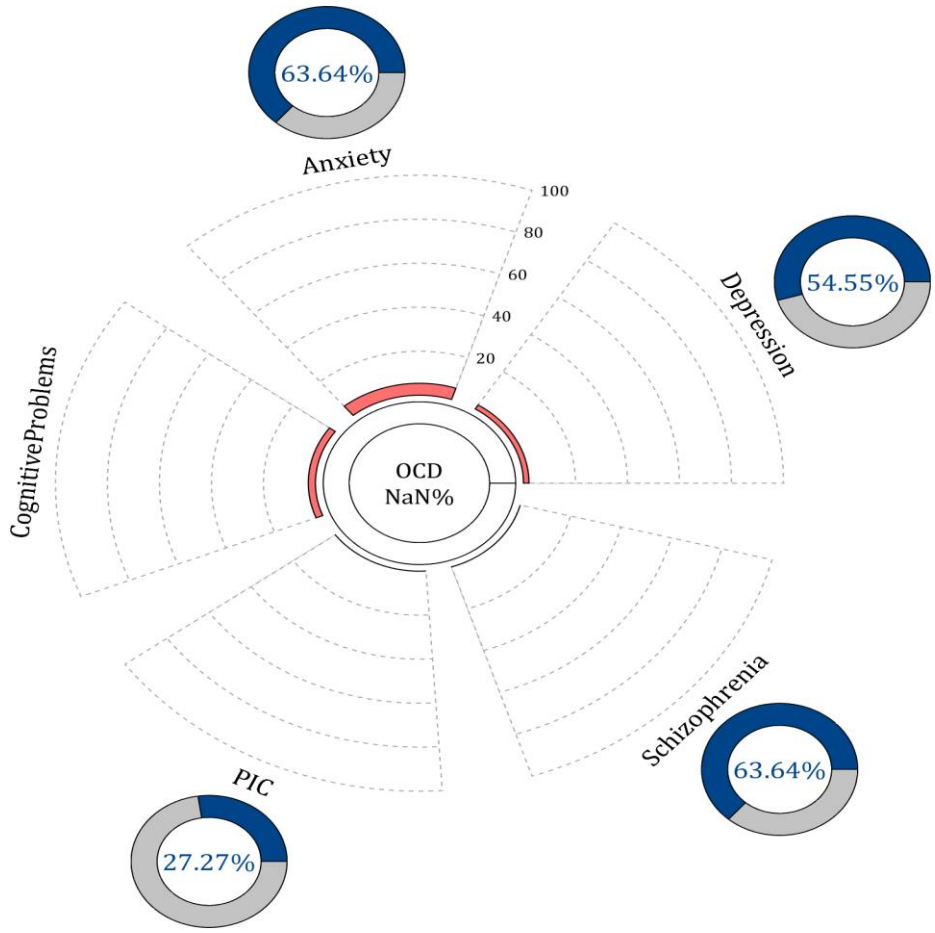
Low Artifact Percentage

High Artifact Percentage

Total Artifact Percentage

EEG Quality: perfect

Pathological Assessment
Main Diagnosis: OCD



Description

According to the guidelines, the initial diagnosis of OCD could have comorbidities such as **alcohol abuse, depression, and anxiety**. It also differentially diagnoses with **anxiety, impulsive control disorder, depression, and schizophrenia**.

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.

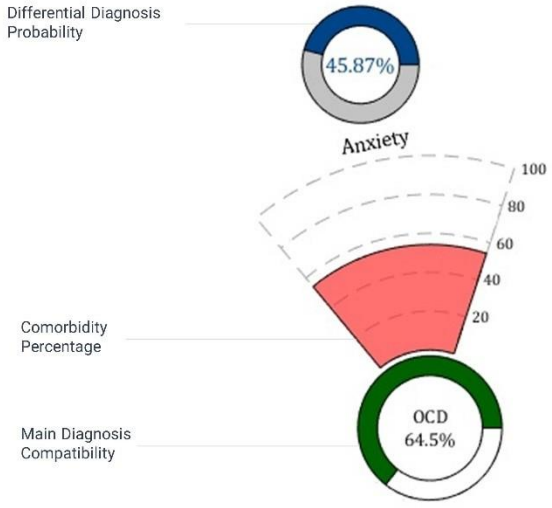
Note: In case your patient has drug abuse, obtain the substance abuse pathologic page of QEEGhome by registering the diagnosis under the initial diagnoses section of the website.

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

User Manual

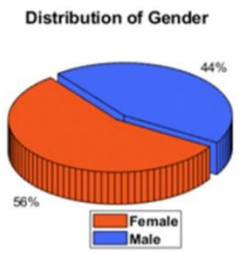


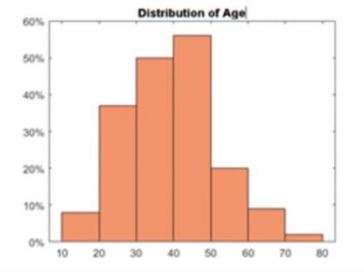
rTMS Response Prediction

Network Performance

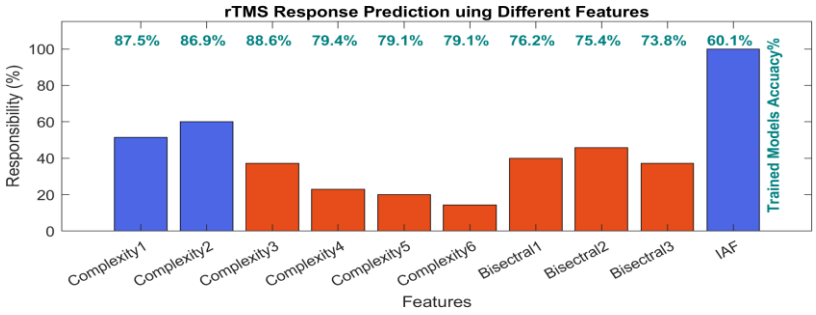
Accuracy: 92.10%
Sensitivity: 89.13%
Specificity: 97.47%

Participants Information

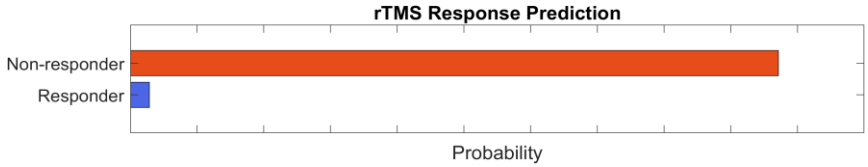




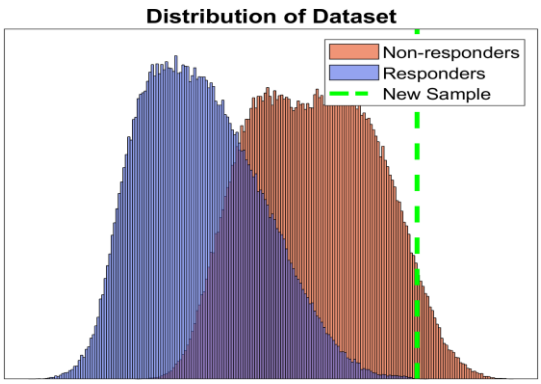
Features Information



Responsibility



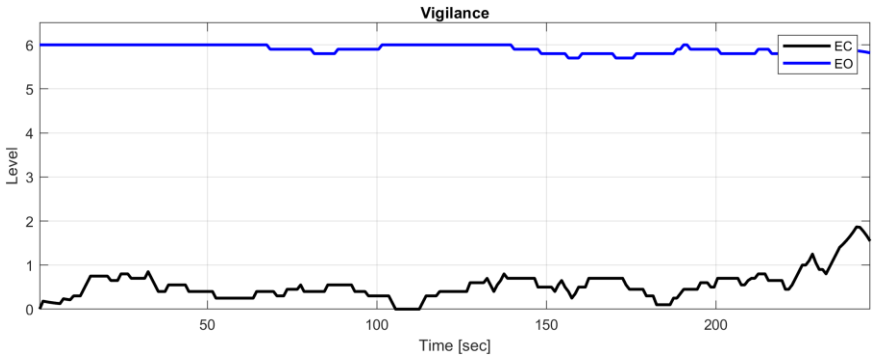
Data Distribution



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.

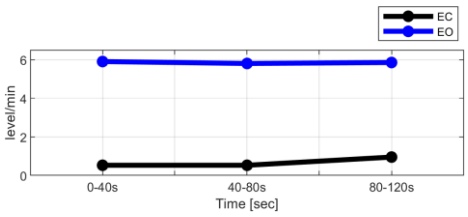
Vigilance



Vigilance Slope

EC:-0.18 2min

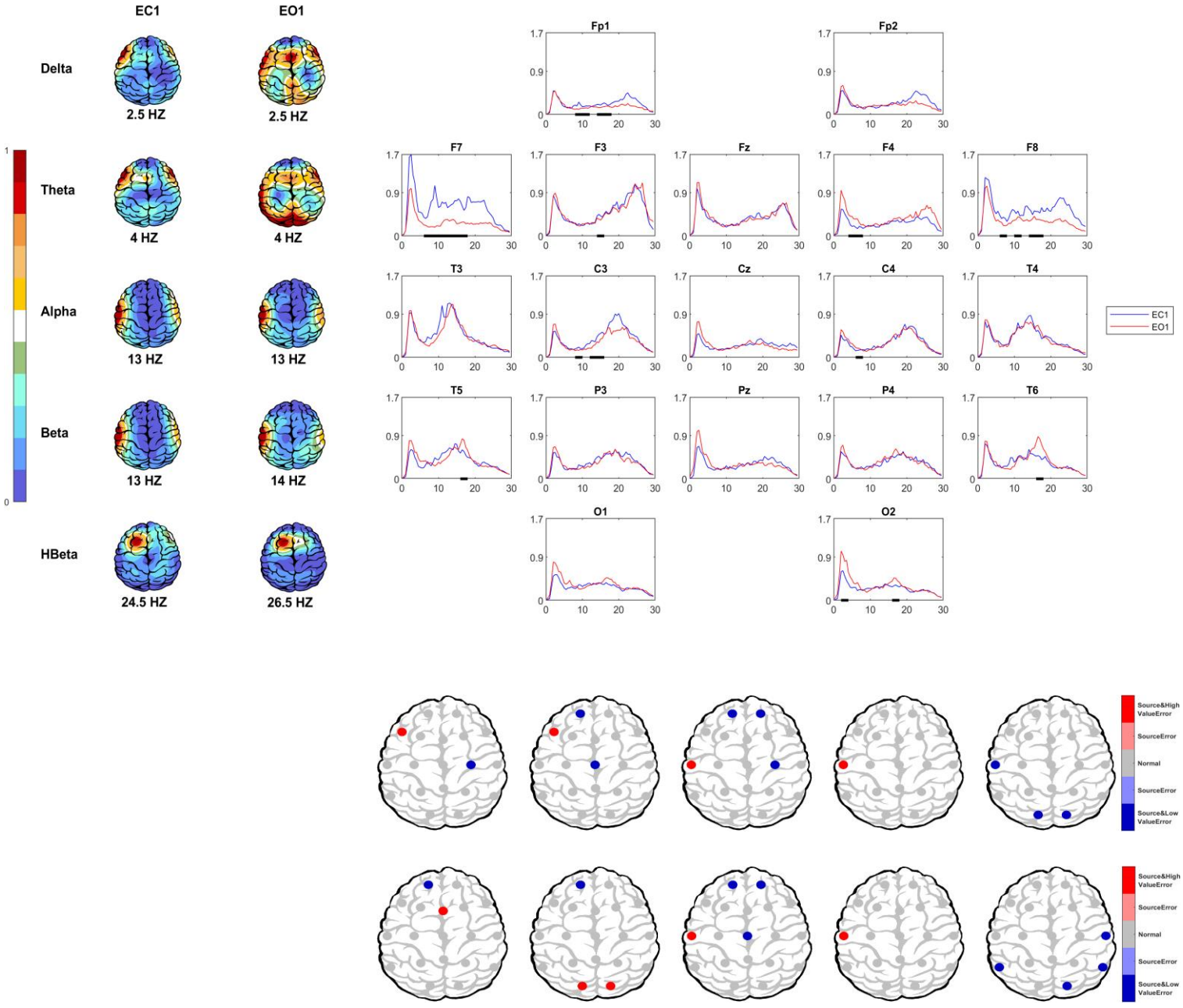
EO:-0.04 2min



EEG Neuromarker Values

Neuromarker	Region	Value	Assessment
APF - EO	Frontal	11.75	High
AFP - EC	Frontal	12.33	High
APF - EO	Occipital	12.12	High
AFP - EC	Occipital	12.88	High
Alpha Asymmetry - EO	Frontal	00.03	Anxiety
Alpha Asymmetry - EC	Frontal	00.06	Anxiety
Alpha Asymmetry - EO	Occipital	00.14	Anxiety
Alpha Asymmetry - EC	Occipital	00.11	Anxiety
Beta Asymmetry - EO	Frontal	00.17	Anhedonia
Beta Asymmetry - EC	Frontal	00.26	Anhedonia
Alpha Blocking	P4	-	Observed
Arousal Level - EO	-	-	Normal
Arousal Level - EC	-	-	High
Vigilance Level - EO	-	06.00	Normal
Vigilance Level - EC	-	00.00	Low
Vigilance Mean - EO	-	05.91	Normal
Vigilance Mean - EC	-	00.54	Low
Vigilance Regulation - EO	-	-0.04	Normal
Vigilance Regulation - EC	-	-0.18	Normal
Vigilance 0 Stage (%) - EO	-	95.53	High
Vigilance 0 Stage (%) - EC	-	00.00	Normal
Vigilance A1 Stage (%) – EO	-	00.00	-
Vigilance A1 Stage (%) – EC	-	00.00	-

EEG Spectra

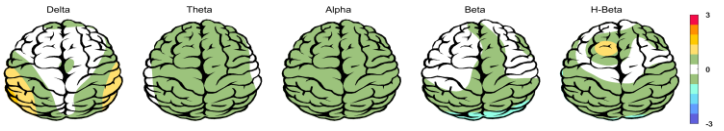

EC1
EO1
Delta
2.5 HZ
2.5 HZ
Theta
4 HZ
4 HZ
Alpha
13 HZ
13 HZ
Beta
13 HZ
14 HZ
HBeta
24.5 HZ
26.5 HZ
Fp1
Fp2
F7
F3
Fz
F4
F8
T3
C3
Cz
C4
T4
T5
P3
Pz
P4
T6
O1
O2
EC1
EO1

Source&High ValueError
SourceError
Normal
SourceError
Source&Low ValueError

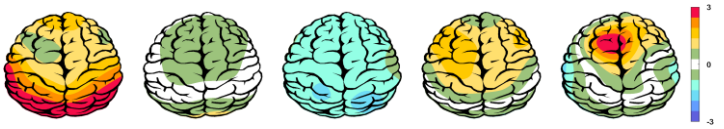
Z Score Summary Information

Eye Close

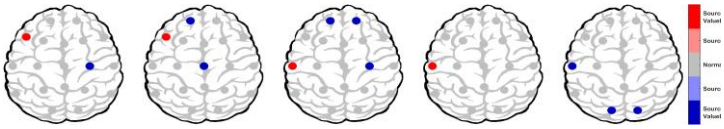
Absolute Power



Relative Power



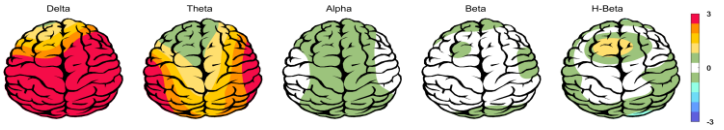
Generation Source



Coherence

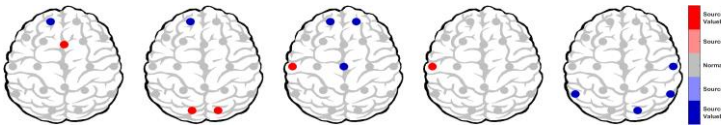
Eye Open

Absolute Power



Relative Power

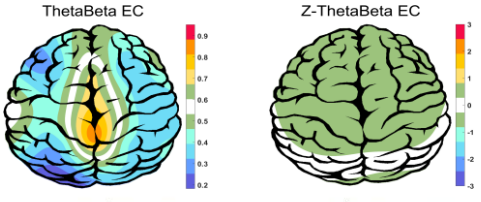
Generation Source



Coherence

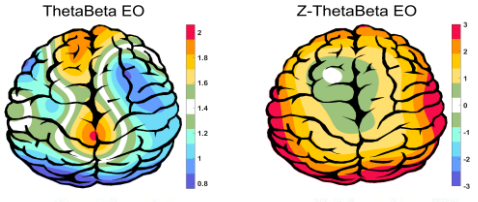
Theta/Beta Ratio

Eye Close



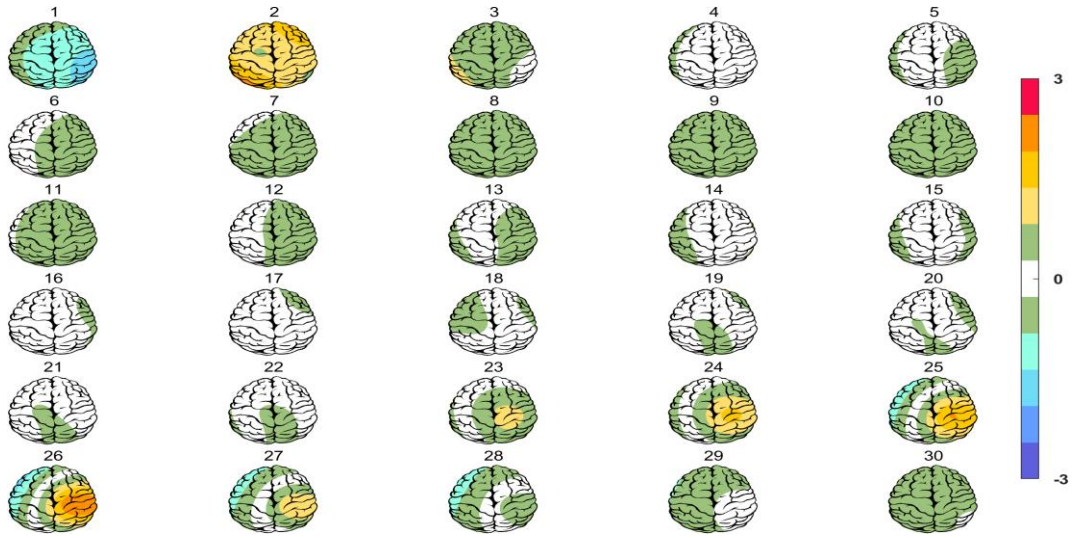
Raw ThetaBeta | Z- ThetaBeta EC

Eye Open

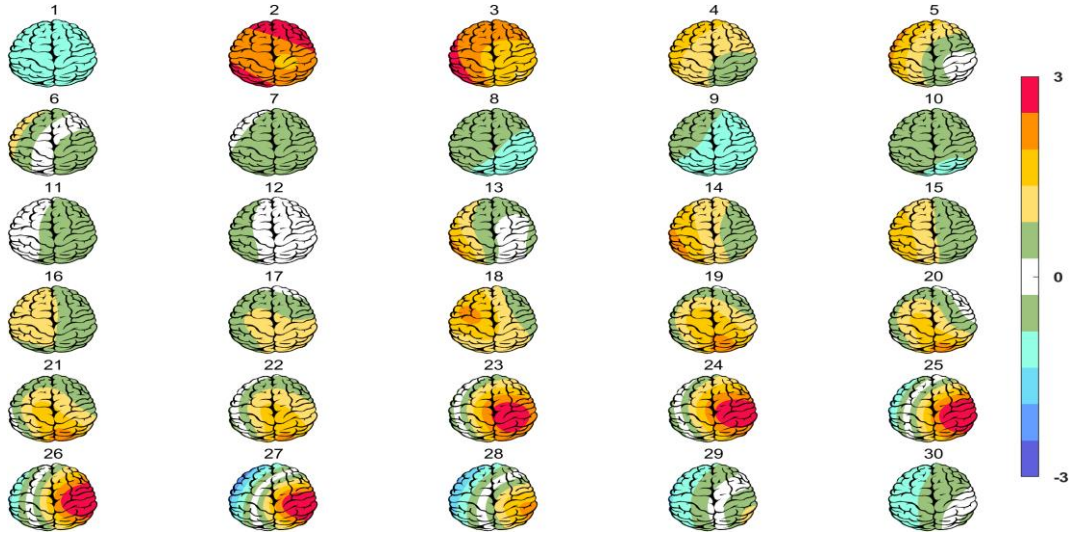


Raw ThetaBeta | Z- ThetaBeta EC

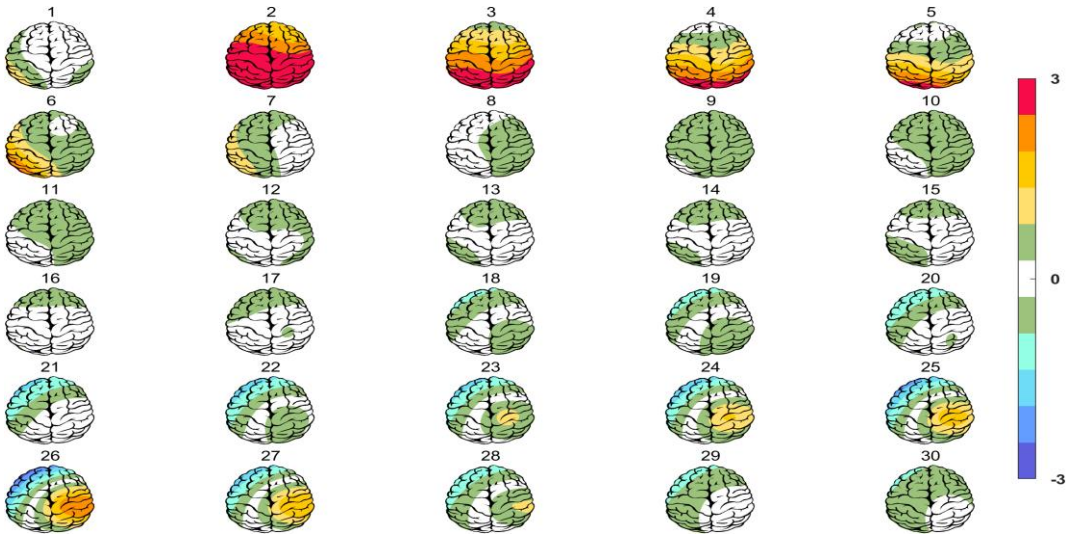
Absolute Power-Eye Close



Relative Power-Eye Close



Absolute Power-Eye Open



Relative Power-Eye Open