



QEEG Clinical Report

BrainLens V0.4



Report Description



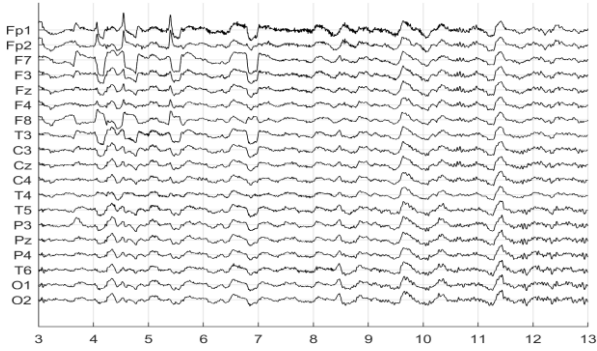
Personal & Clinical Data

Name	Maryam Gohari Asl	Date of Recording	05-Nov-2024
Date of Birth - Age	05-Jul-2010 - 14.33	Gender	Female
Handedness(R/L)	Right	Source of Referral	Dr Mohammadhasani
Initial Diagnosis	Bipolar Disorder		
Current Medication	Depakine-Propranolol-Tranqopine		

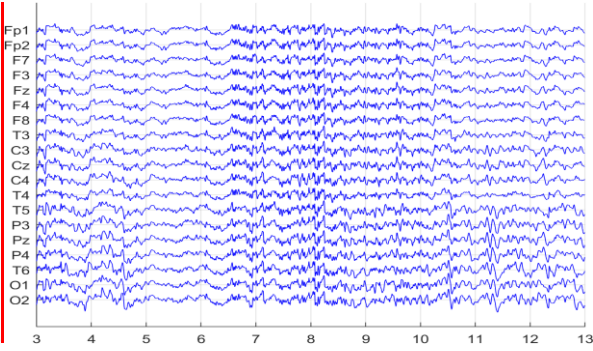
Dr Mohammadhasani

Noising Information (EC)

Raw EEG



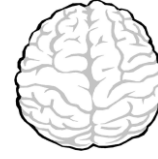
Denoised EEG



Flat Channels



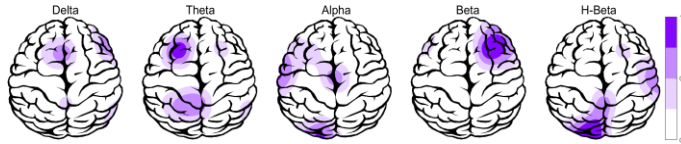
Rejected Channels



Number of Eye and Muscle Elements		Low Artifact Percentage	
Eye	4	Muscle	0
Total Artifact Percentage		High Artifact Percentage	
[Progress bar: 0%]		[Progress bar: 100%]	
EEG Quality	good	Total Recording Time Remaining	480.08 sec

Pathological assessment for ADHD

Compare to ADHD Database



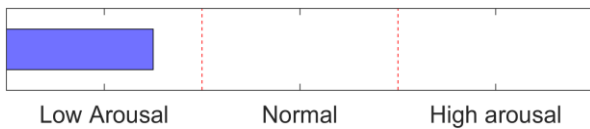
EEG Compatibility with ADHD Diagnosis

ADHD Table	EC	
Feature Name	Threshold	Region
Increased rDelta	2.00	global
Increased rTheta	0.00	NAN
Increased rAlpha	0.00	NAN
Increased rBeta	0.00	NAN
Decreased SMR	-1.00	global
Increased T/B Ratio	0.50	Fz

ADHD Compatibility: 0 10 20 30 40 50 60 70 80 90 100

ADHDProbability

Arousal Level Detection

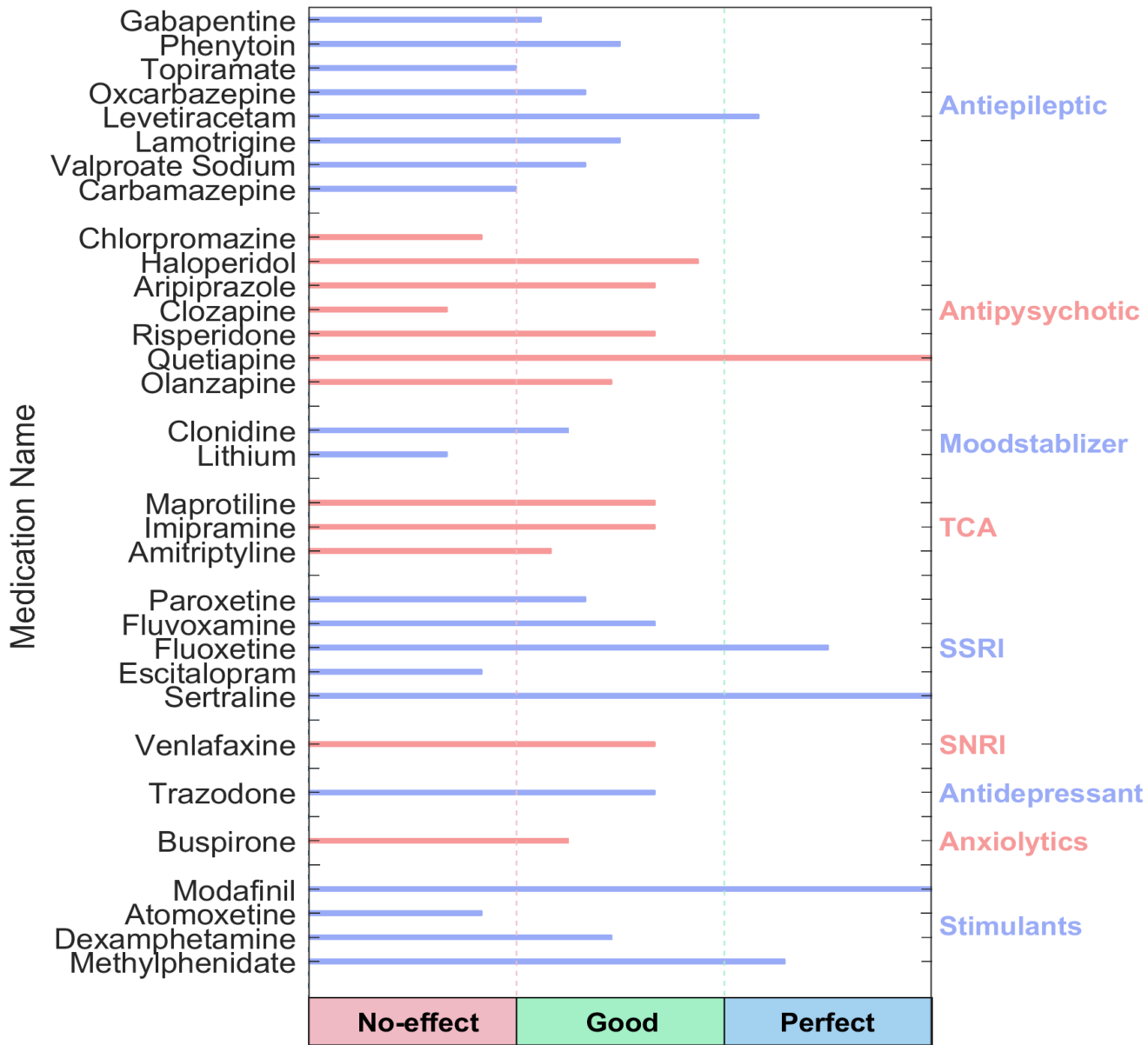


ADHD Clustering *

1. Same inattentive and hyperactive prevalence. Well respond to stimulants.

* If there is Paroxymal epileptic discharge in EEG data, this case needs sufficient sleep and should avoid high carbohydrate intake. You can consider anticonvulsant medications.

QEEG based predicting medication response



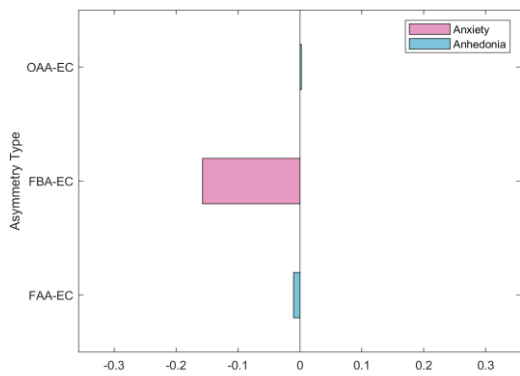
Explanation

Medication Recommendation

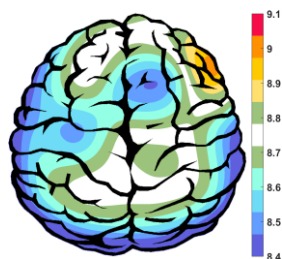
These two tables can be considered the most important finding that can be extracted from QEEG. To prepare this list, the NPCIndex Article Review Team has studied, categorized, and extracted algorithms from many authoritative published articles on predict medication response and Pharmacoe EEG studies.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

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.

Alpha Asymmetry(AA)



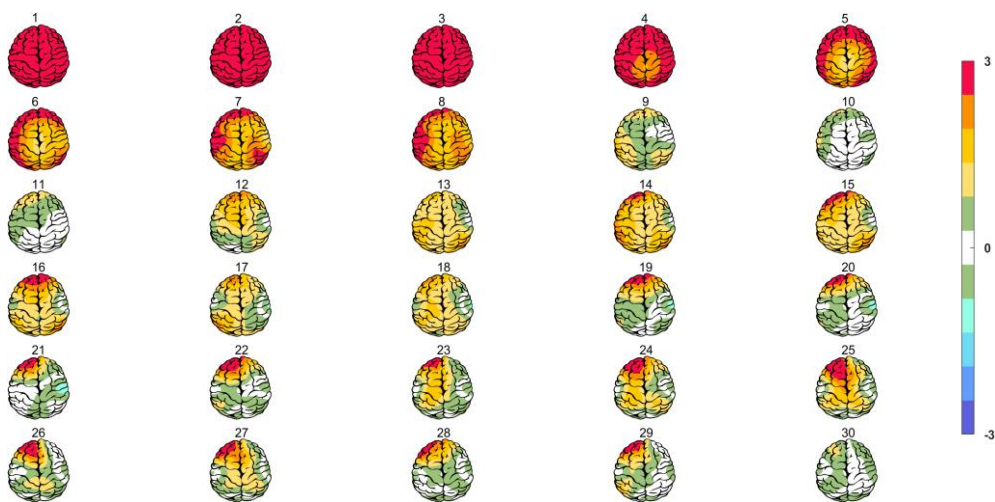
APF(EC)



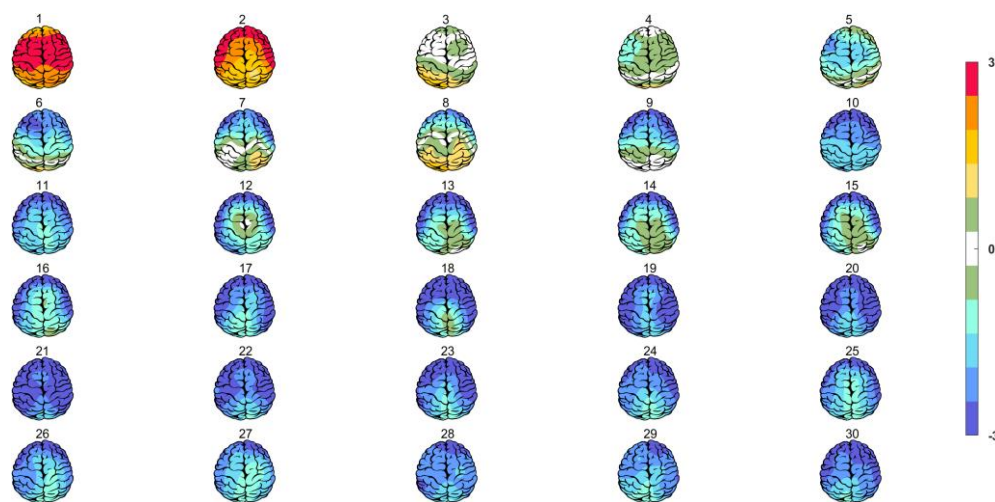
Frontal APF= 08.58

Posterior APF= 08.75

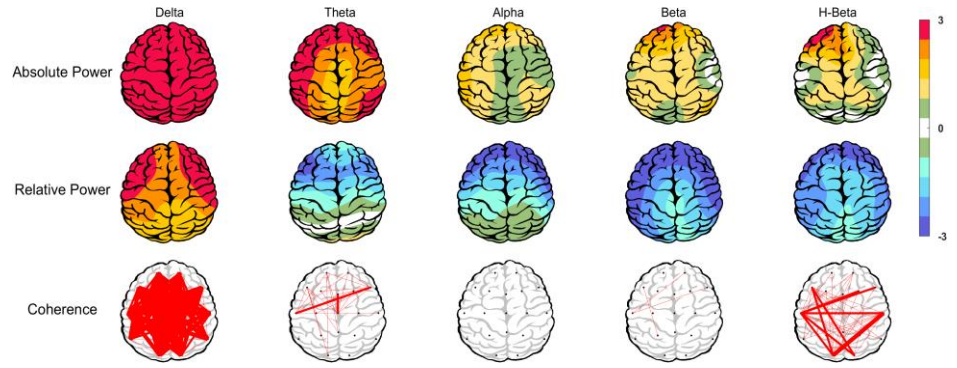
Absolute Power-Eye Closed (EC)



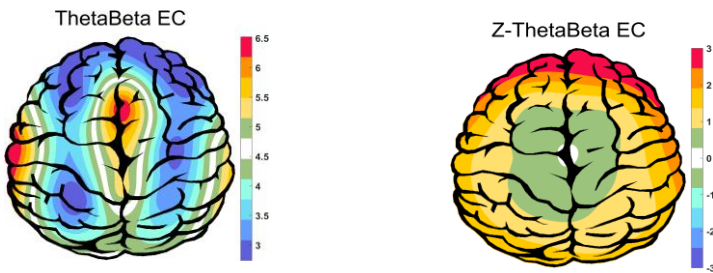
Relative Power-Eye Closed (EC)



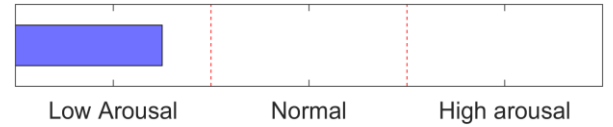
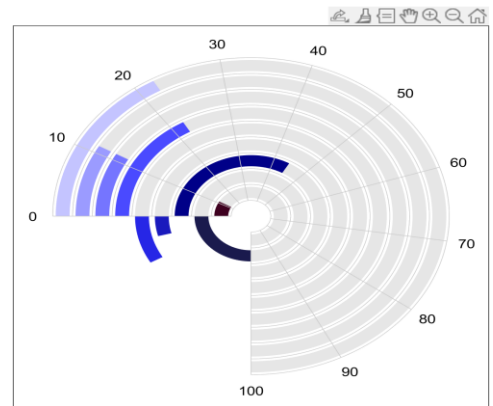
Z Score Summary Information (EC)



E.C.T/B Ratio (Raw- Z Score)



Arousal Level



EEG Spectra

