





QEEG Clinical Report BrainLens V0.4

Report Description

Personal & Clinical Data

Name	Mohammadmahdi Aleyasin	Date of Recording	03-Nov-2024		
Date of Birth - Age	03-Feb-2014 - 10.75	Gender	Male		
Handedness(R/L)	Right	Source of Referral	Asayesh Psychiatric Clinic -		
Initial Diagnosis	ADHD				
Current Medication	Risperidone-Ritalin				

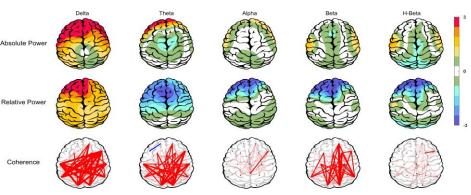
Asayesh Psychiatric Clinic -Dr Torabi



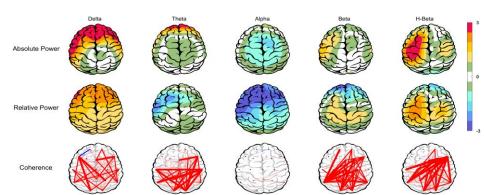


Z Score Summary Information (EC)

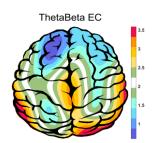


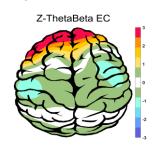


Z Score Summary Information (EO)

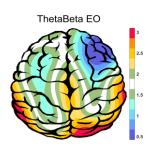


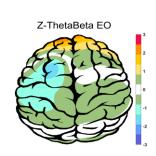
E.C.T/B Ratio (Raw- Z Score)



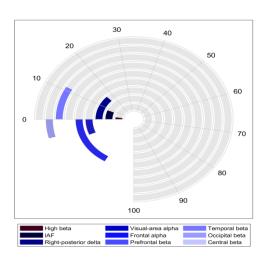


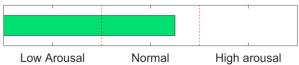
E.O.T/B Ratio (Raw- Z Score)





Arousal Level

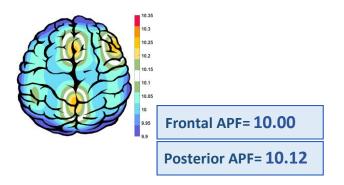




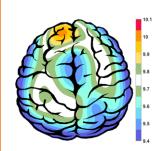




APF(EO)



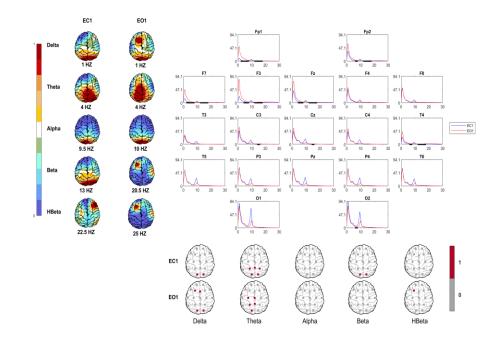
APF(EC)



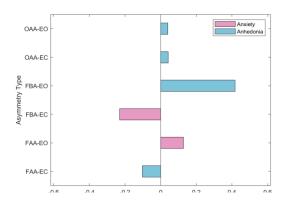
Frontal APF= 09.75

Posterior APF= 09.62

EEG Spectra



Alpha Asymmetry(AA)



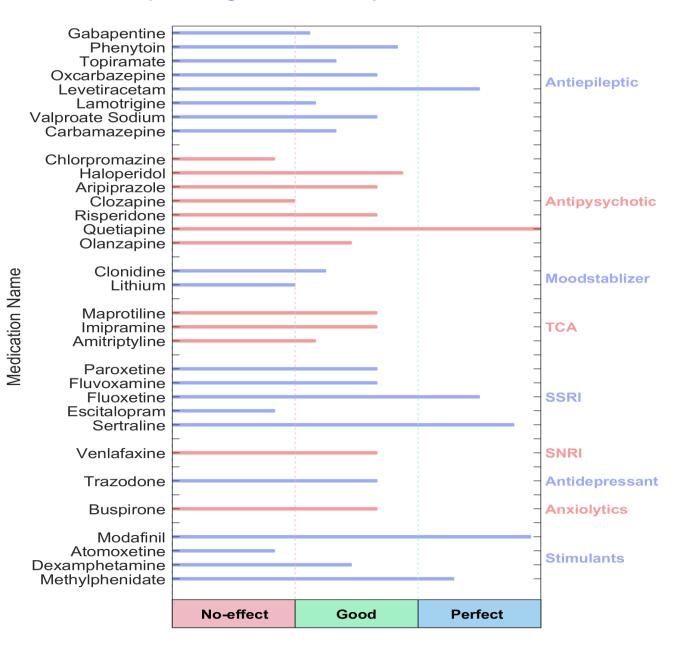
Alpha Blocking







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 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.

two charts, calculate 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
4
1
نتایج تشخیصی:
1





Pathological assessment for ADHD

Compare to ADHD Database

















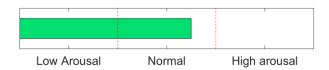




EEG Compatibility with ADHD Diagnosis

ADHD Table		EC	EO		
Feature Name	Threshold	Region	Threshold	Region	
Increased rDelta	1.00	global	1.00	global	
Increased rTheta	0.00	NAN	0.00	NAN	
Increased rAlpha	0.00	NAN	0.00	NAN	
Increased rBeta	0.00	NAN	0.00	NAN	
Decreased SMR	-1.00	global	0.00	NAN	
Increased T/B Ratio	0.50	Fz	0.00 NAN		
ADHD 10 20 30 40 50 60 70 80 90 100 ADHD Compatibility					
ADHD Probability					

Arousal Level Detection



ADHD Clustering

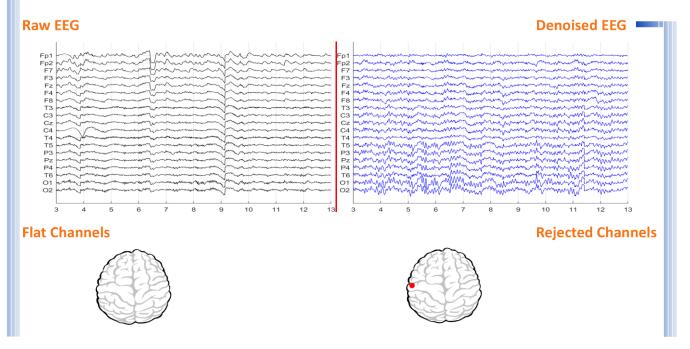
1. Same inattentive and hyperactive prevalence. Well respond to stimulants.

^{*} 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.



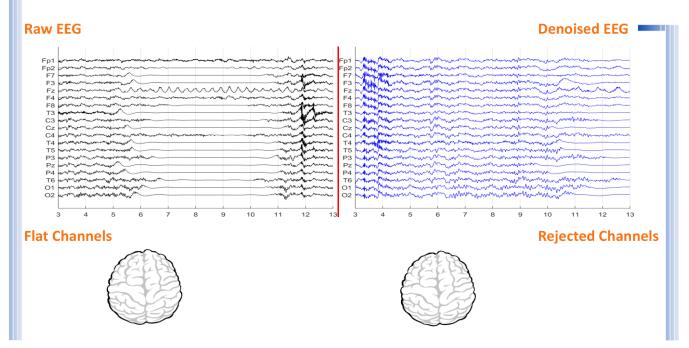


Denoising Information (EC)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	2	Muscle	2	0	
Total Artifact Percentage			High Artifact Percentage		
0					
EEG Quality		good		Total Recording Time Remaining	261.38 sec

Denoising Information (EO)

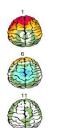


Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	3	Muscle 2			
Total Artifact Percentage		High Artifact Percentage			
EEG Quality		good		Total Recording Time Remaining 334.10 sec	





Absolute Power-Eye Closed (EC) 🌮























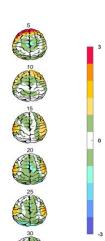












Relative Power-Eye Closed (EC) 🌮













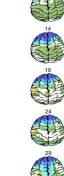


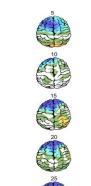












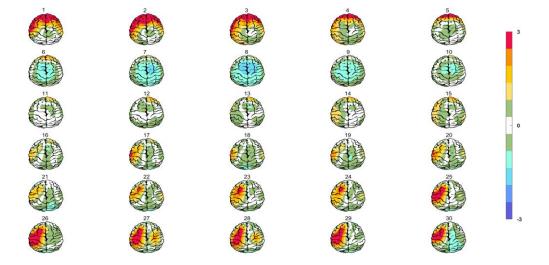






Absolute Power-Eye Open (EO) 📀





Relative Power-Eye Open (EO) 🕢

