



QEEG Clinical Report

BrainLens V0.4

Report Description



Personal & Clinical Data

Name	Anas Masrur	Date of Recording	24-Dec-2024
Date of Birth - Age	05-Jul-2013 - 11.47	Gender	Male
Handedness(R/L)	Right	Source of Referral	Ms Jafari
Initial Diagnosis	ADHD-Aggressive-Anxiety-Attention and Concentration Problem-Boredom		
Current Medication	-		

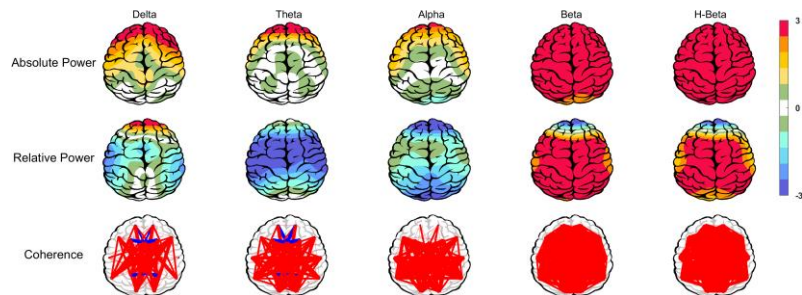
Ms Jafari

Summary Report

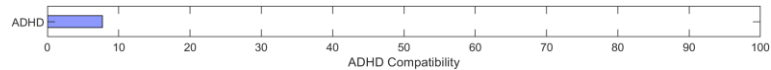
EEG Quality



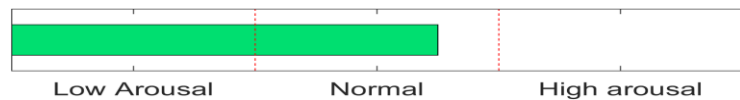
Z-score Information



Compatibility with ADHD



Arousal Level



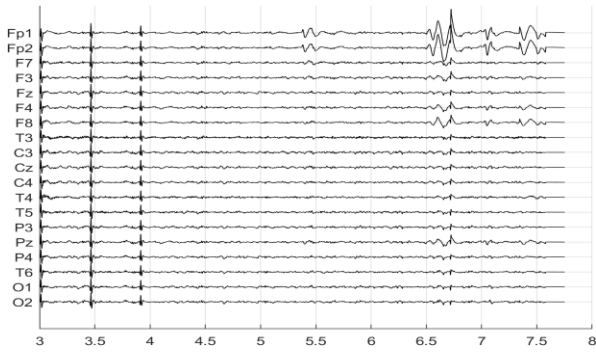
APF

Posterior APF-EC= 11.00

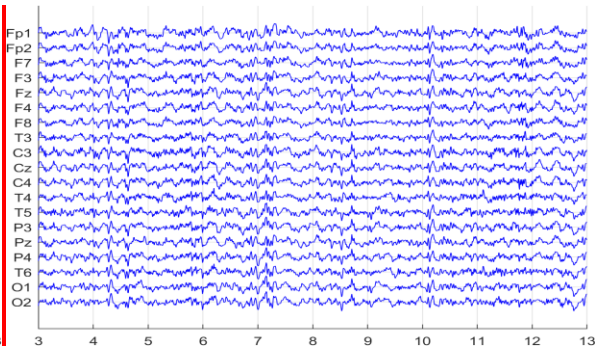
To investigate QEEG-based predicting medication response, please refer to the Report.

Denoising Information (EC)

Raw EEG



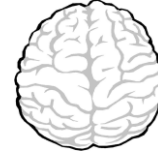
Denoised EEG



Flat Channels



Rejected Channels



Number of Eye and Muscle Elements

Eye 2 Muscle 2

Total Artifact Percentage



EEG Quality bad

Low Artifact Percentage



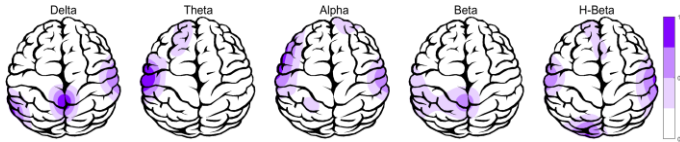
High Artifact Percentage



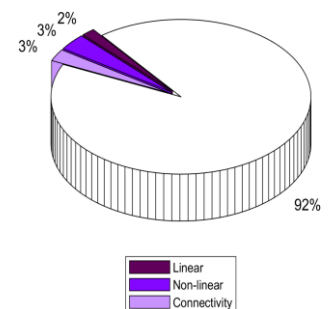
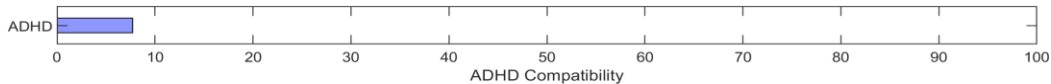
Total Recording Time Remaining 26.89 sec

Pathological assessment for ADHD

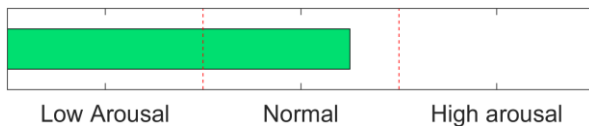
Compare to ADHD Database



EEG Compatibility with ADHD Diagnosis



Arousal Level Detection

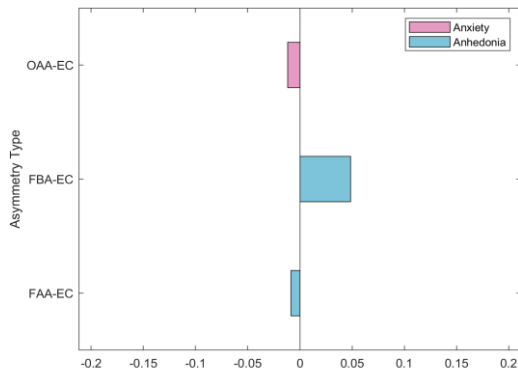


ADHD Clustering *

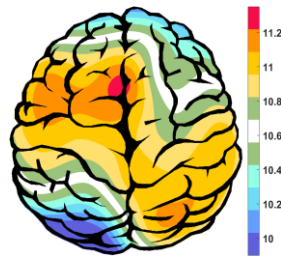
1. Prone to moody behavior and temper tantrums. May respond to stimulants, consider anticonvulsants or clonidine, avoid SSRI.

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

Alpha Asymmetry(AA)



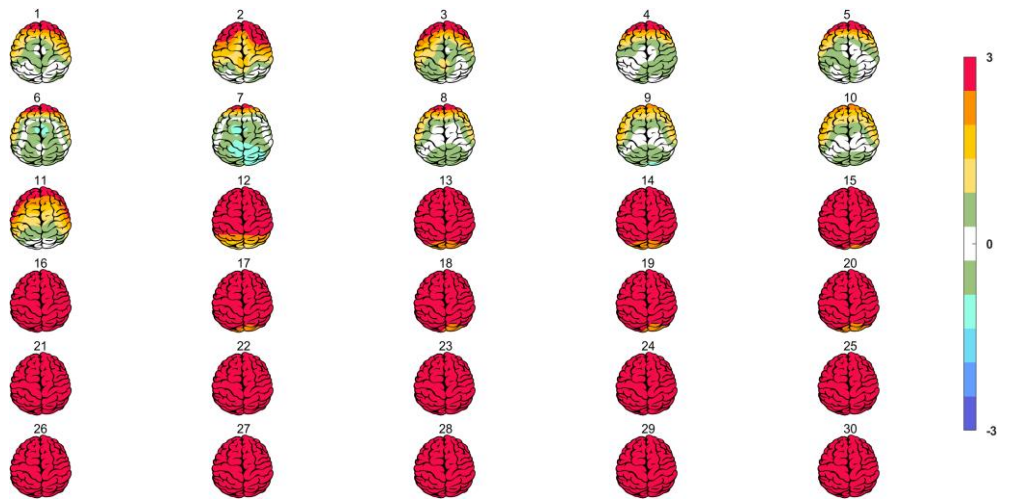
APF(EC)



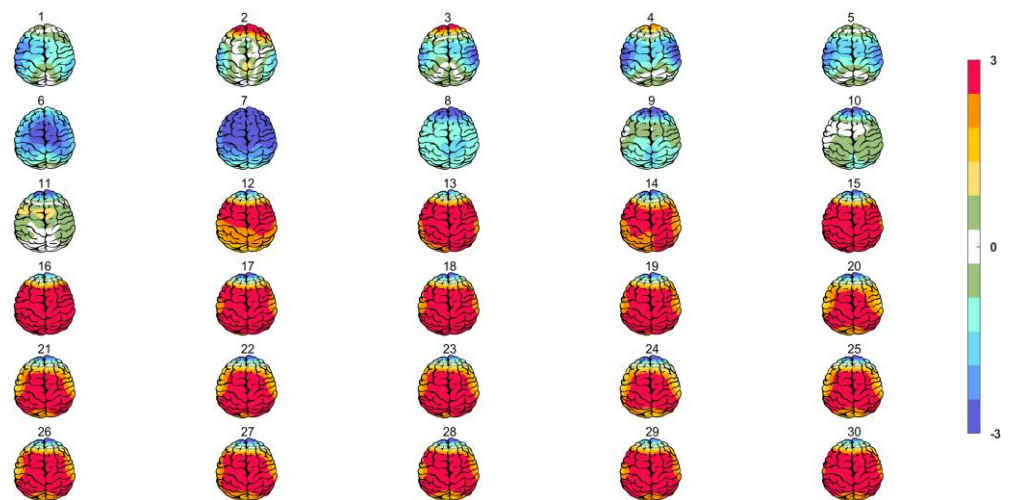
Frontal APF= 10.75

Posterior APF= 11.00

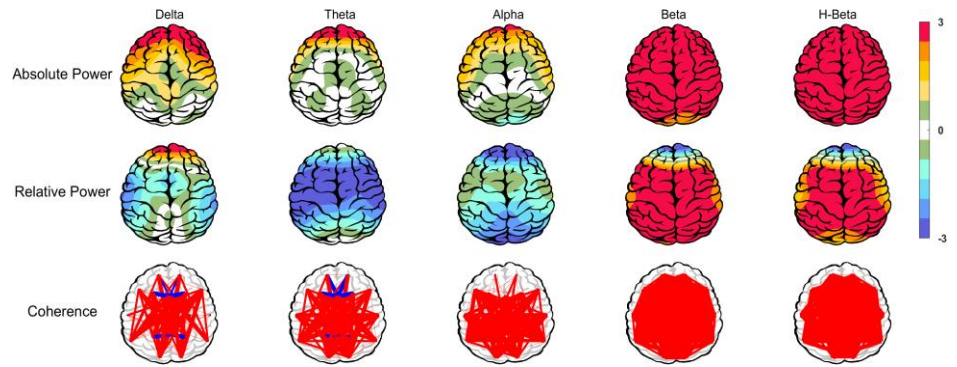
Absolute Power-Eye Closed (EC)



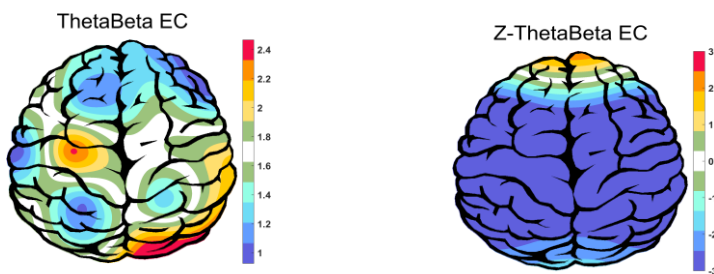
Relative Power-Eye Closed (EC)



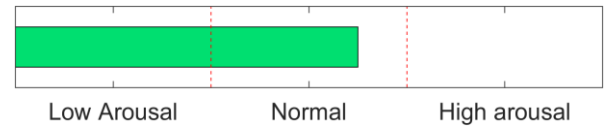
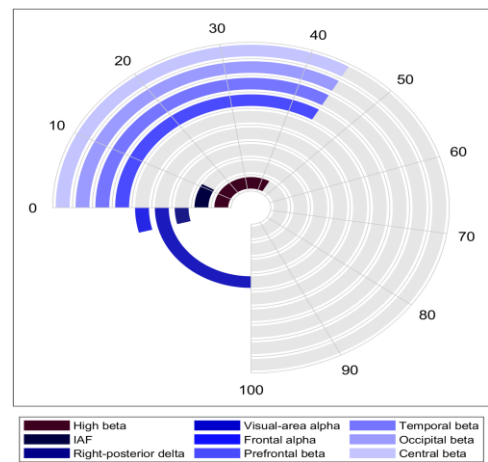
Z Score Summary Information (EC)



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



Arousal Level



EEG Spectra

