

# Report Description

# Personal & Clinical Data

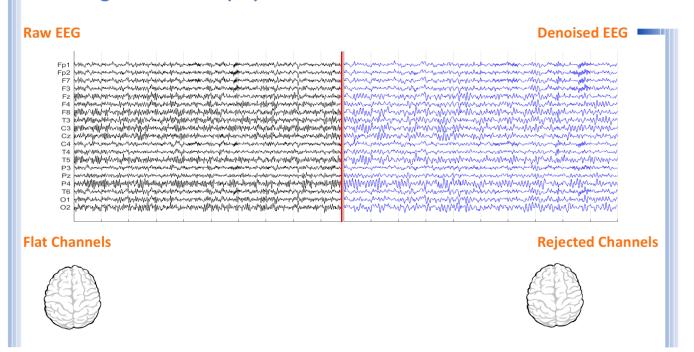
Name	Ali Eftekhari	Date of Recording	10-Aug-2024	
Date of Birth - Age	23-Jul-2015 - 9.05	Gender	Male	
Handedness(R/L)	Right	Source of Referral	Dr Soshiyan Center Clinic	
Initial Diagnosis	Anxiety-ADHD-Cognition disorder			
Current Medication	Medication Free			

Dr Soshiyan Center Clinic





## Denoising Information (EC)



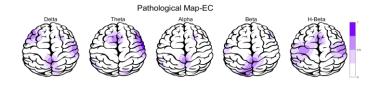
Number of Eye and Muscle Elements				Low Artifact Percentage	
Eye	0	Muscle	0	0	
Total Artifact Percentage				High Artifact Percentage	
()				0	
EEG Quali	ty	bad		Total Recording Time Remaining	229.84 sec





## **Pathological assessment for ADHD**

#### **Compare to ADHD Database**



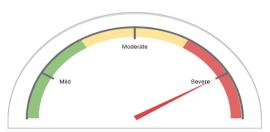
#### **EEG Compatibility with ADHD Diagnosis**

	ADHD Table	EC		
	Feature Name	Threshold	Region	
	Increased rDelta	0.00	NAN	
	Increased rTheta	0.00	NAN	
	Increased rAlpha	1.00	global	
	Increased rBeta	0.00	NAN	
[	Decreased SMR	0.00	NAN	
lr	ncreased T/B Ratio	0.00	NAN	
	ADHD 0	10 20	1	
ADHD Probability				

#### **Arousal Level Detection**



# **ADHD Severity**



# **ADHD Clustering**

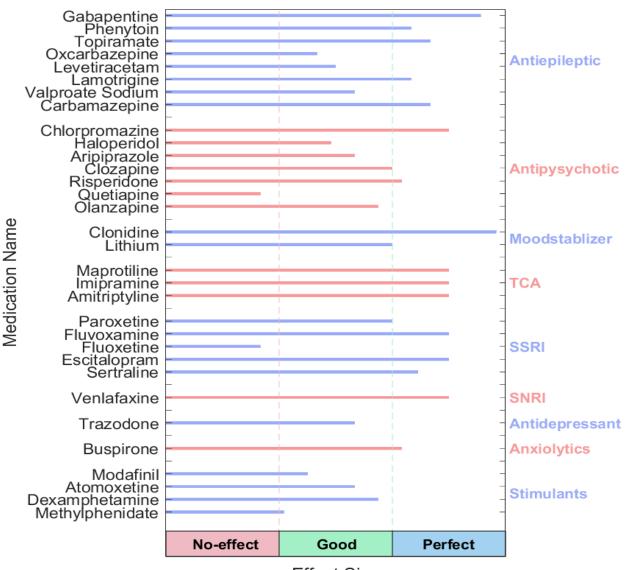
1. Least impulsive group, almost only inattentive. May respond to stimulants.

<sup>\*</sup> 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



Effect Size

#### **Explanation**



#### Medication Recommendation

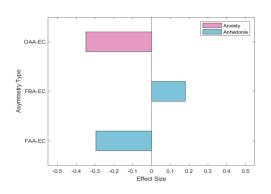
These two tables can be considered the most important finding that can be extracted from QEEG. To prepare this list, the NPCIndex Article Review Team has studied, categorized, and extracted algorithms from many authoritative published articles on predict medication response and Pharmaco EEG studies.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

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.

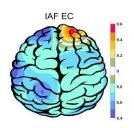




# Alpha Asymmetry(AA)



# APF(EC)



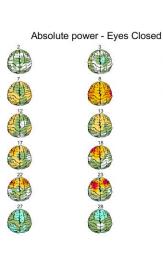
Frontal APF= 08.75

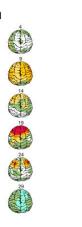
Posterior APF= 08.75

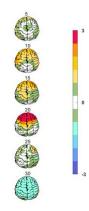
#### 🚃 Absolute Power-Eye Closed (EC) 🌮









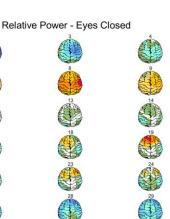


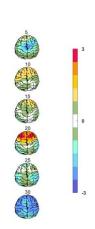
## Relative Power-Eye Closed (EC)







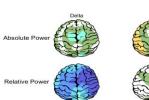








## Z Score Summary Information (EC)



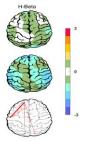




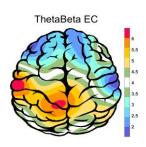


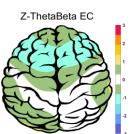


Arousal Level

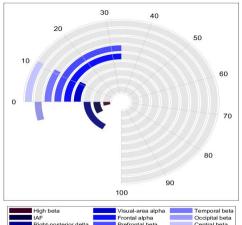


## E.C.T/B Ratio ( Raw- Z Score)





# 2



## EEG Spectra

