



QEEG Clinical Report

BrainLens V0.4

Report Description

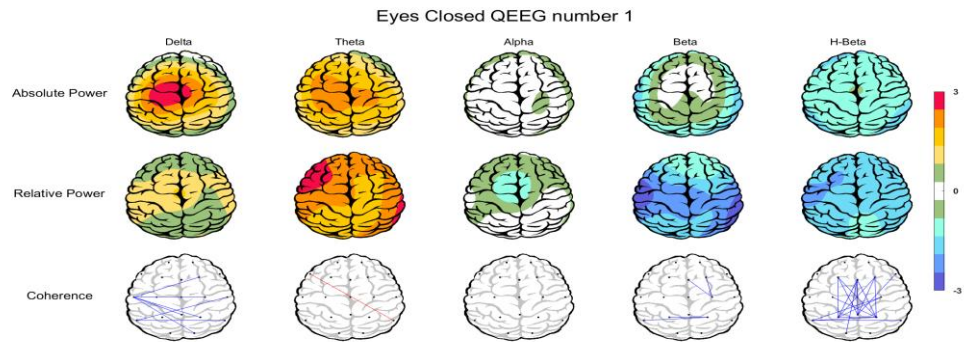


Personal & Clinical Data

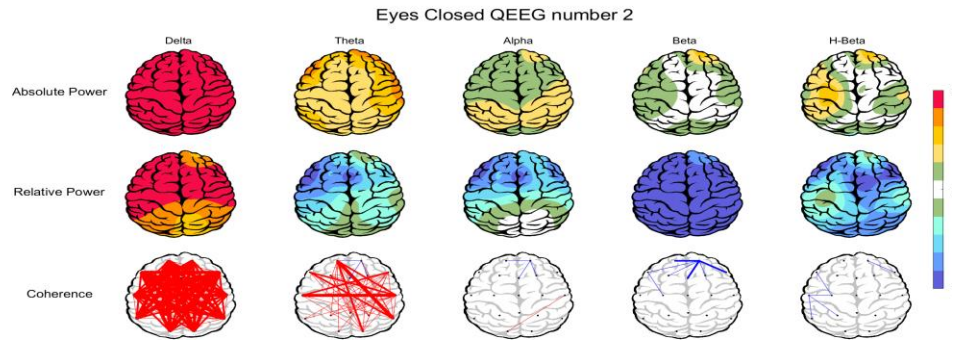
Name	Hossein Soltani	Date of Recording	29-Sep-2024
Date of Birth - Age	15-Jun-1979 - 42.44	Gender	Male
Handedness(R/L)	Right	Source of Referral	Dr Torabi
Initial Diagnosis	Epileptic		
Current Medication	ES-citalopram-Carbamazepine-Buspirone		

Dr Torabi

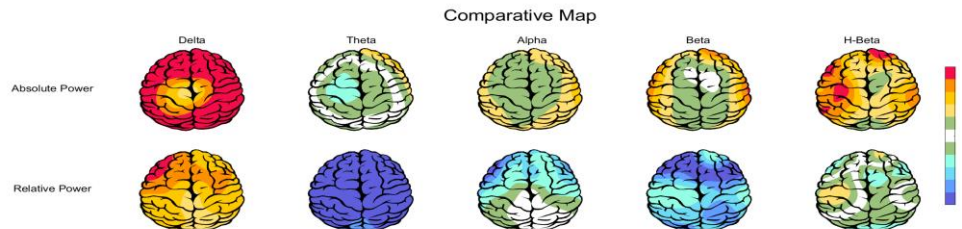
First Topographic Map



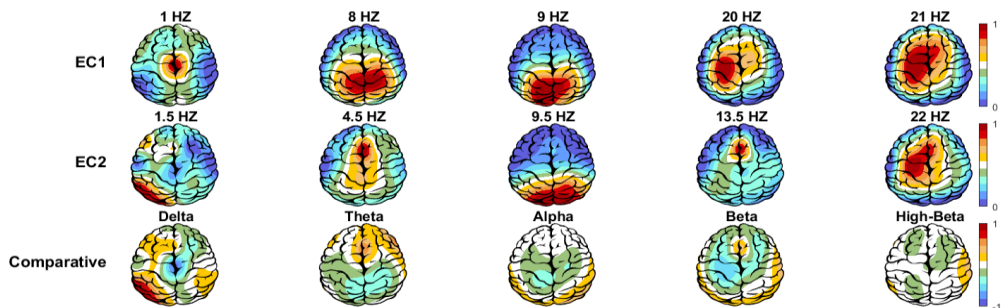
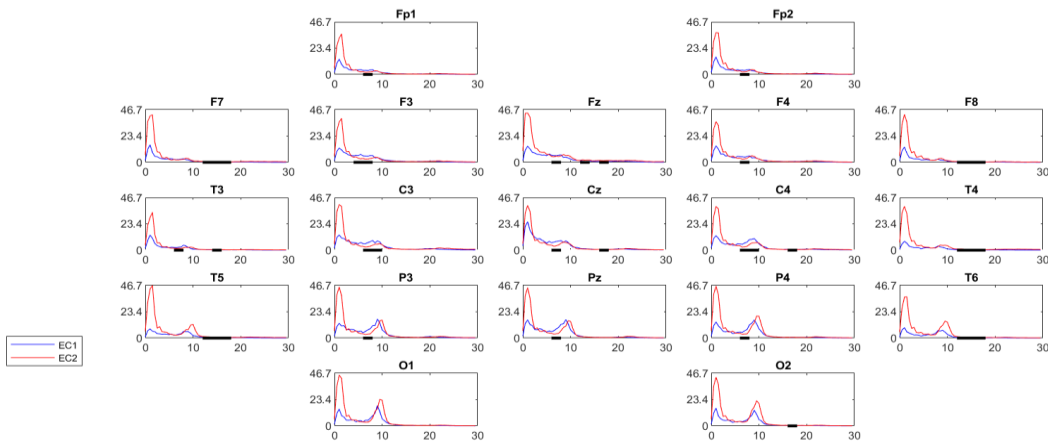
Second Topographic Map



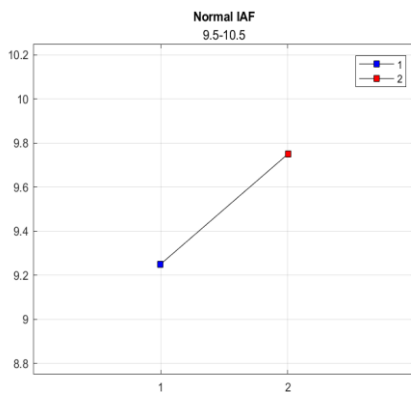
Comparsion Topographic Map



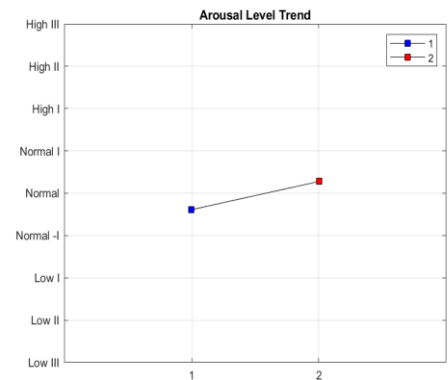
Power Spectrum



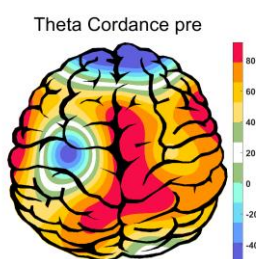
IAF



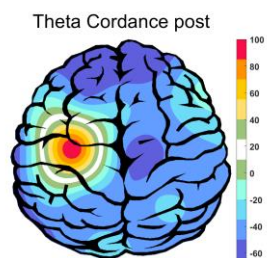
Arousal Level



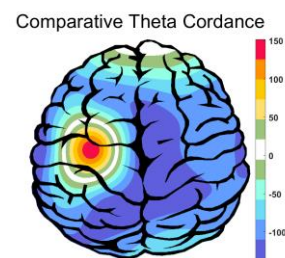
Theta Cordance-Pre



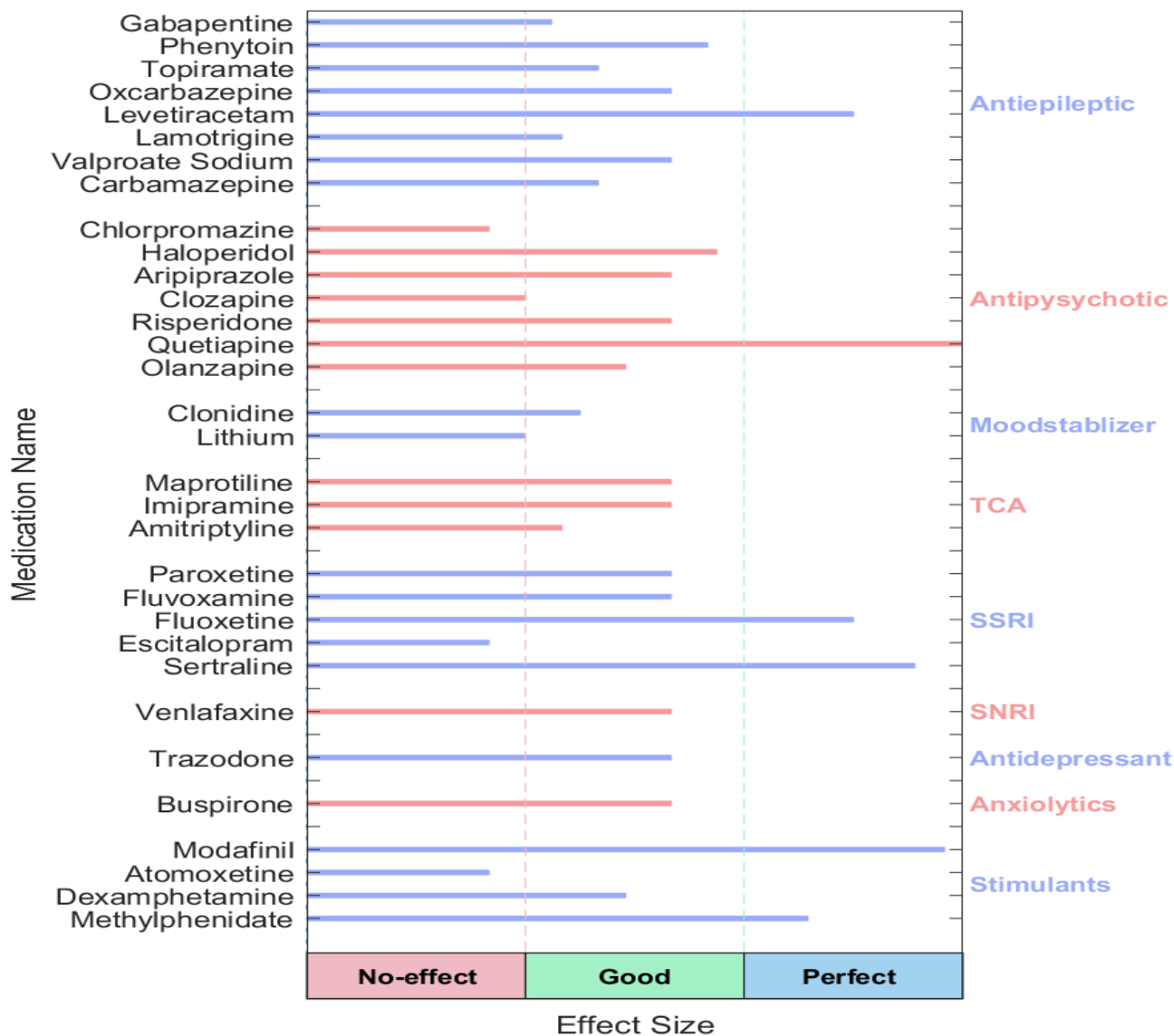
Theta Cordance-Post



Theta Cordance Comparative



QEEG based predicting medication response



Explanation

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 .

Medication Recommendation

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.

Report

گزارش:

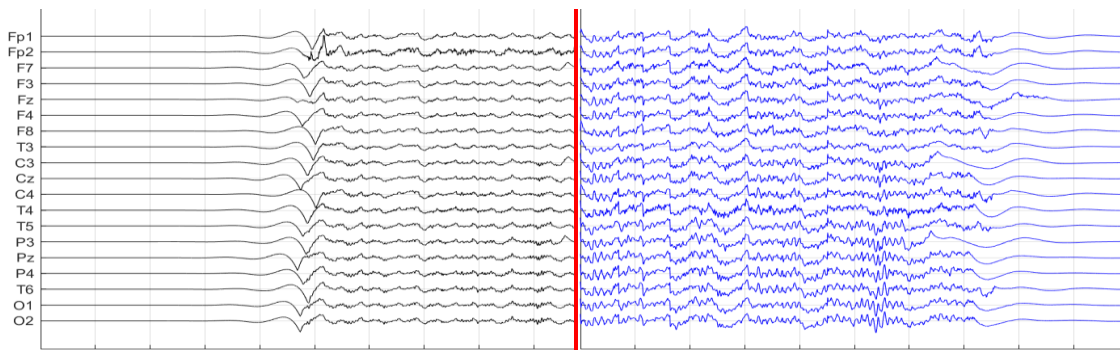
- 1- ارزیابی تحت تاثیر مصرف دارو قرار دارد.
- 2- اسپایک مشاهده میشود.
- 3- Hyper-coherence و Hypo-coherence مشاهده میشود.
- 4- در مقیاس Z-score، افزایش توان مطلق در فرکانسهای دلتا و بتای بالا مشاهده میشود.
- 5- افزایش IAF مشاهده میشود.
- 6- کاهش توان مطلق در فرکانس آلفا مشاهده میشود.
- 7- اختلال عملکرد در ناحیه Medial dorsal pre-frontal مشاهده میشود.
- 8- مارکهای اختلال در کارکردهای اجرایی مشاهده میشود.
- 9- مارکهای نوشخوار فکری مشاهده میشود.

نتایج تشخیصی:

- 1- اختلال در کارکردهای اجرایی توام با نوشخوار فکری

Denoising Information

Raw EEG



Denoised EEG

Flat Channels



Rejected Channels



Number of Eye and Muscle Elements				Low Artifact Percentage	
Eye	2	Muscle	1		
Total Artifact Percentage				High Artifact Percentage	
					
EEG Quality		good		Total Recording Time Remaining	231.77 sec