





# QEEG Clinical Report BrainLens V0.4

# Report Description

# Personal & Clinical Data

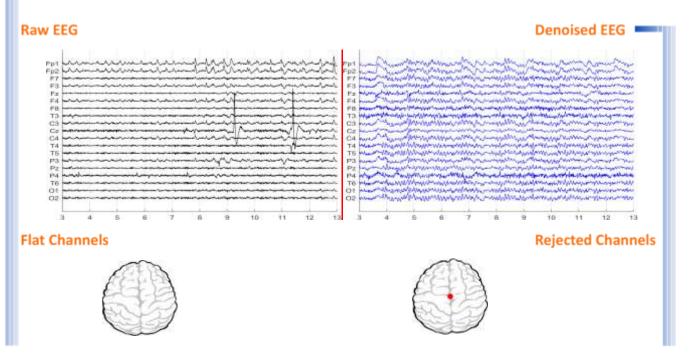
Name	Vahdat Asadi	Date of Recording	06-Oct-2024		
Date of Birth - Age	04-Dec-1982 - 41.84	Gender	Male		
Handedness(R/L)	Right	Source of Referral	Dr Haghi		
Initial Diagnosis	ADHD-ADD				
Current Medication	Medication Free				

Dr Haghi



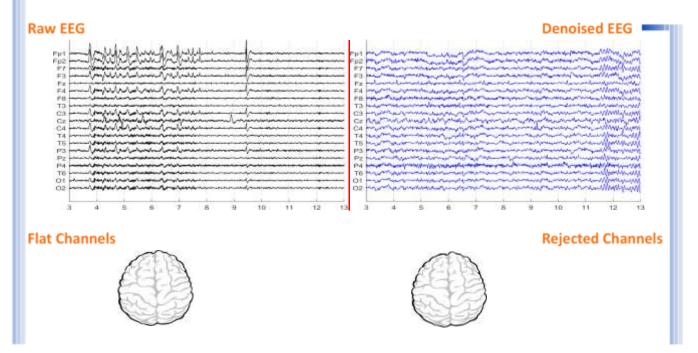


### Denoising Information (EC)



Number of Eye and Muscle Elements			Low Artifact Percentage		
Eye	2	Muscle	1	0	
Total Artifact Percentage			High Artifact Percentage		
			0		
<b>EEG Quality</b>		bad		<b>Total Recording Time Remaining</b>	128.88 sec

# Denoising Information (EO)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	0	Muscle	2	0	
Total Artifact Percentage			High Artifact Percentage		
0		0			
<b>EEG Quality</b>		bad		<b>Total Recording Time Remaining</b> 178.24 sec	





# Pathological assessment for adult ADHD

#### Compare to Adult ADHD Database





















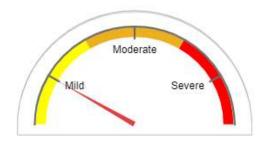
# **Cognitive Functions**



#### **Arousal Level Detection**



# **Adult ADHD Severity**



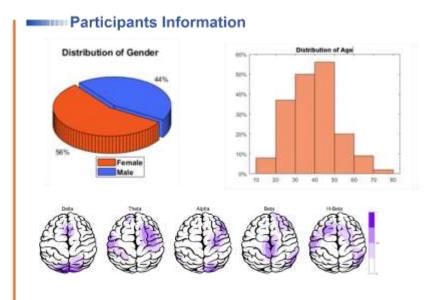




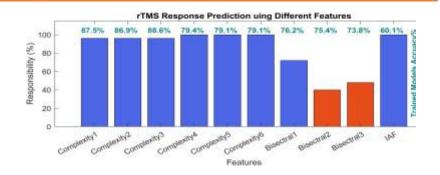
#### rTMS Response Prediction

#### Network Performance

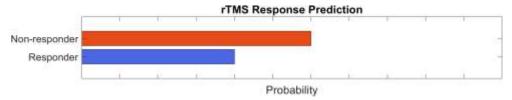
Accuracy: 92.1% Sensitivity: 89.13% Specificity: 97.47%



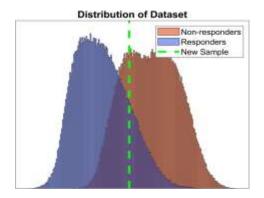
#### Features Information



#### Responsibility



#### Data Distribution



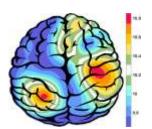
#### About Predicting rTMS Response

This index was obtained based on machine learning approaches and by examining the QEEG biomarkers of more than 470 cases treated with rTMS. The cases were diagnosed with depression (with and without comorbidity) and all were medication free. By examining more than 40 biomarkers capable of predicting response to rTMS treatment in previous studies and with data analysis, finally 10 biomarkers including bispectral and nonlinear features entered the machine learning process. The final chart can distinguish between RTMS responsive and resistant cases with 92.1% accuracy. This difference rate is much higher than the average response to treatment of 44%, in the selection of patients with clinical criteria, and is an important finding in the direction of personalized treatment for rTMS.





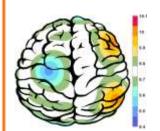
### APF(EO)



Frontal APF= 10.08

Posterior APF= 09.75

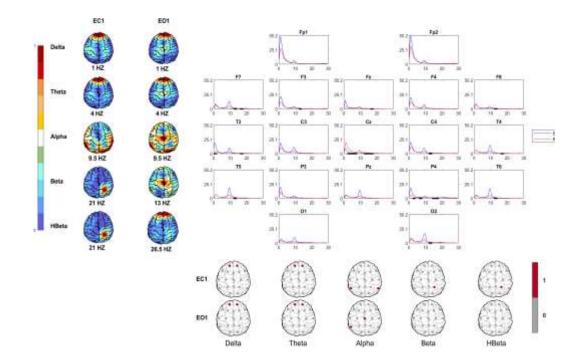
### APF(EC)



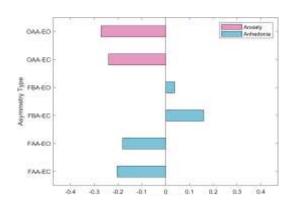
Frontal APF= 09.67

**Frontal APF= 09.75** 

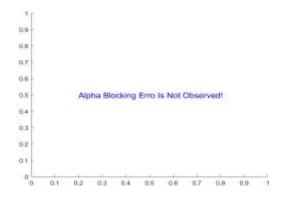
#### EEG Spectra



# Alpha Asymmetry(AA)



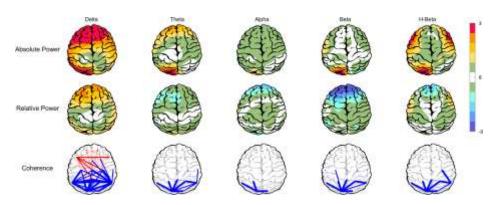
#### Alpha Blocking



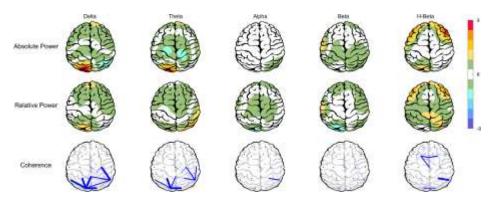




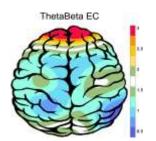
#### Z Score Summary Information (EC)

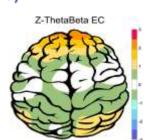


#### Z Score Summary Information (EO)

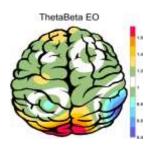


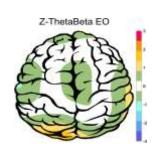
#### E.C.T/B Ratio ( Raw- Z Score)



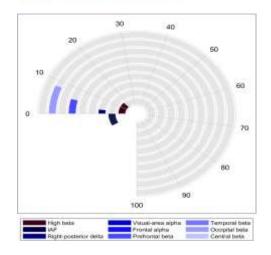


#### E.O.T/B Ratio ( Raw- Z Score)





#### Arousal Level









# 🚃 Absolute Power-Eye Closed (EC) 🠠























































# ====Relative Power-Eye Closed (EC) 🐠





















































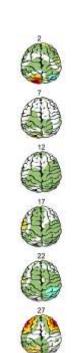


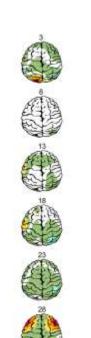


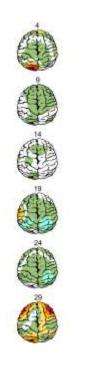


# Absolute Power-Eye Open (EO) 🐠











# Relative Power-Eye Open (EO) 🕢



