





Report Description

Personal & Clinical Data

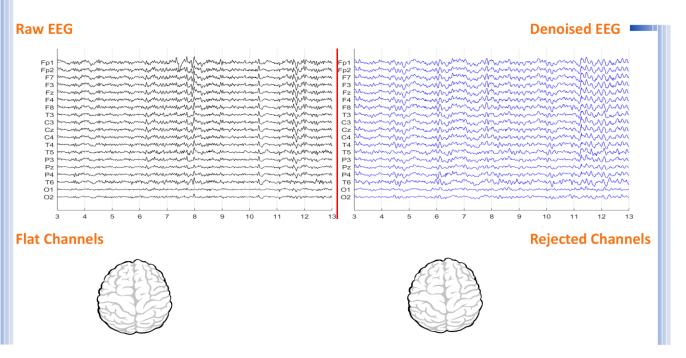
Name	Vihan Allahverdi	Date of Recording	14-Oct-2024	
Date of Birth - Age	31-May-2017 - 7.37	Gender	Male	
Handedness(R/L)	Right	Source of Referral	Dr AtefeSafavi	
Initial Diagnosis	initial assessment			
Current Medication	Clomipramine-Risperidone			

Dr AtefeSafavi



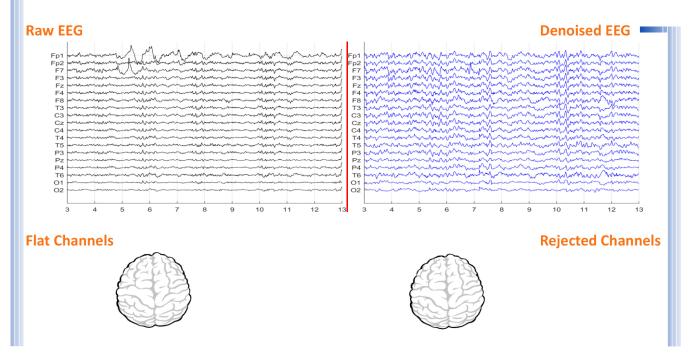


Denoising Information (EC)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	2	Muscle	0	()	
Total Artifact Percentage		High Artifact Percentage			
EEG Quali	ity	bad		Total Recording Time Remaining 145.86 sec	

Denoising Information (EO)



Number of Eye and Muscle Elements		Low Artifact Percentage			
Eye	2	Muscle	0	0	
Total Artifact Percentage		High Artifact Percentage			
EEG Quality		bad		Total Recording Time Remaining 136.34 sec	





Pathological assessment for ADHD

Compare to ADHD Database

















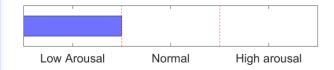




EEG Compatibility with ADHD Diagnosis

ADHD Table		EC	EO				
Feature Name	Threshold	Region	Threshold	Region			
Increased rDelta	0.00	NAN	2.00	global			
Increased rTheta	1.00	frontal	0.00	NAN			
Increased rAlpha	0.00	NAN	0.00	NAN			
Increased rBeta	0.00	frontal	0.00	NAN			
Decreased SMR	-1.00	global	-3.00	global			
Increased T/B Ratio	1.00	Fz	0.75	Fz and Cz			
ADHD							
ADHD Probability							

Arousal Level Detection



ADHD Clustering

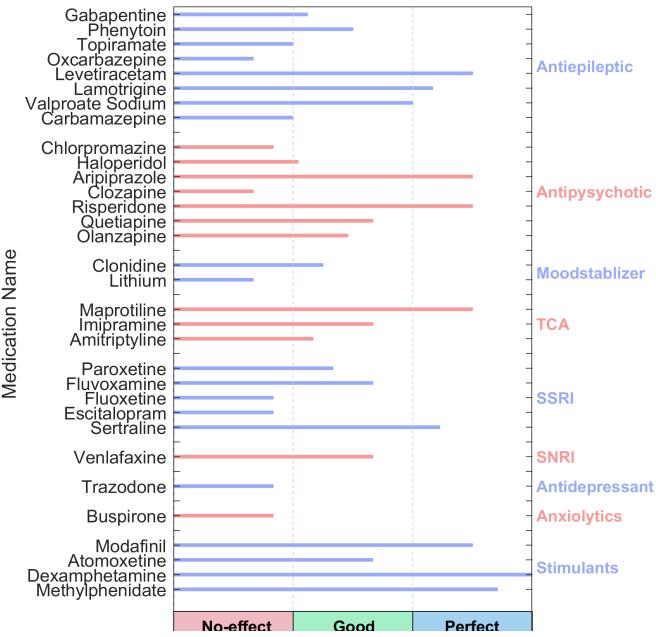
1. Mostly inattentive and hyper-active prevalence. Well respond to amphetamine-type stimulants and neurofeedback.

^{*} 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



Explanation

NPCIndex.com.

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

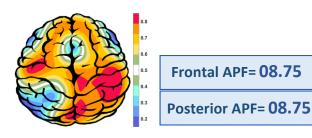


These two charts, calculate response probability to various medications, according only to QEEG indicators. Blue charts favor drug response and red charts favor drug resistance. The longer the bar, the more evidence there is in the articles. Only drugs listed in the articles are listed. These tables present the indicators reviewed in the QEEG studies and are not a substitute for physician selection.

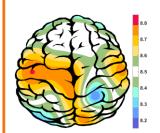




APF(EO)



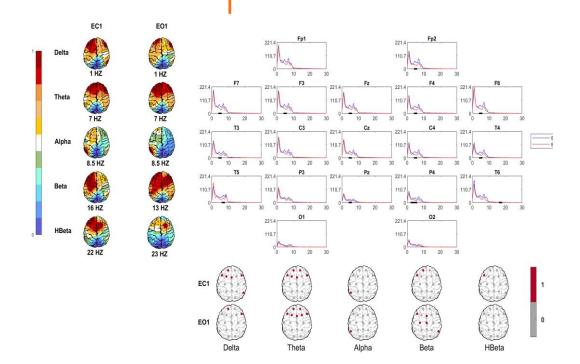
APF(EC)



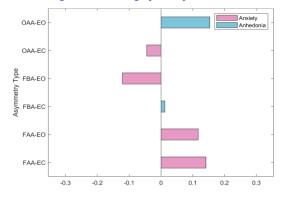
Frontal APF= 08.58

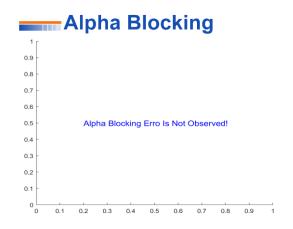
Posterior APF= 08.75

EEG Spectra



Alpha Asymmetry(AA)

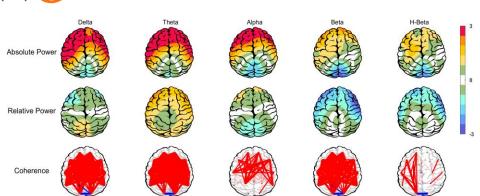




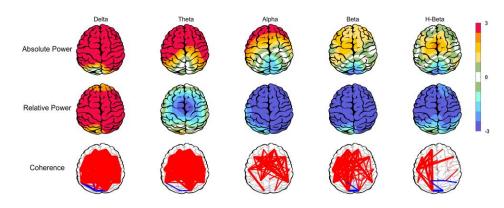




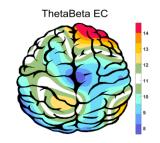
Z Score Summary Information (EC)

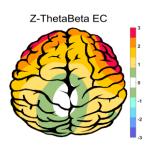


Z Score Summary Information (EO)

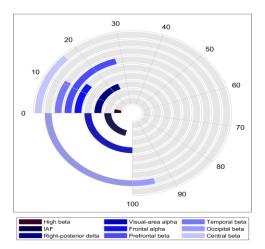


E.C.T/B Ratio (Raw- Z Score)

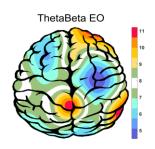


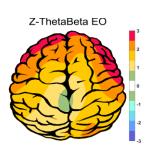


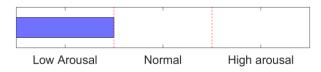
Arousal Level



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



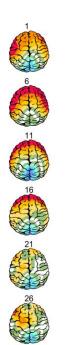


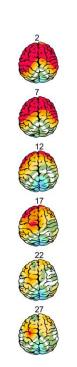


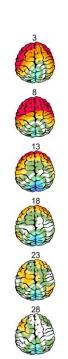


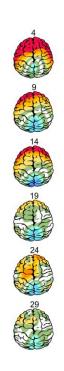


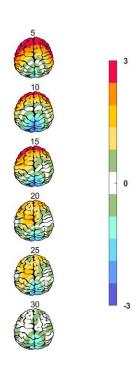
Absolute Power-Eye Closed (EC) 🤣





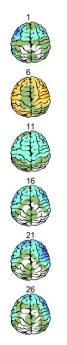


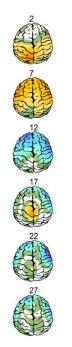


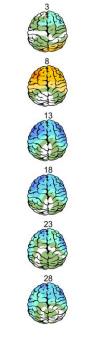


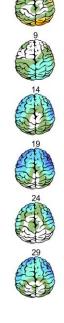
Relative Power-Eye Closed (EC) 🤣

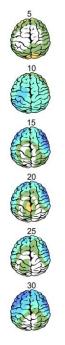










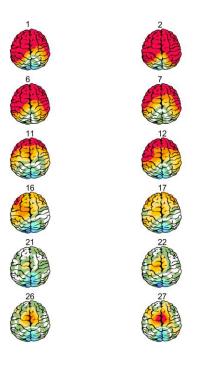


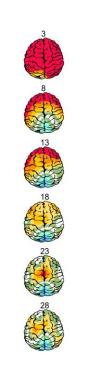


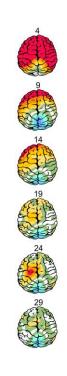


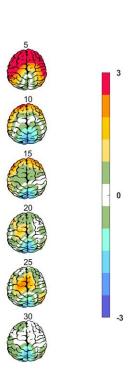
Absolute Power-Eye Open (EO) 📀











Relative Power-Eye Open (EO)

