

ROUTINE ELECTROENCEPHALOGRAPHY (EEG) ANALYSIS AND REPORT

Patient Name: [REDACTED]
Date of Birth (YR.MO.DA): 1990.12.17
Handedness: RIGHT
Date of Study: 2023.01.20
Date Received: 2023.01.23
Date of Interpretation: 2023.01.23

Reason for Study: EVALUATE FOR EEG ABNORMALITIES OR SEIZURES DUE TO SYMPTOMS OF ANXIETY AND DEPRESSION
Medication(s): WELLBUTRIN; LEXAPRO; PROPRANOLOL
Referring Clinician: DR MITCH & ANGELIKA SADAR
SADAR PSYCHOLOGICAL AND SPORTS CENTER

RECORDING CONDITIONS: A routine, non-sleep deprived, digitally acquired EEG was performed >20 minutes, in both EO and EC conditions, with the international 10-20 system of electrode placement and standardized international nomenclature at locations Fp1, Fp2; F7, F3, Fz, F4, F8; T7 (T3), C3, Cz, C4, T8 (T4); P7 (T5), P3, Pz, P4, P8 (T6); O1, O2; frequency range 0.3-70 Hz, based on patient age and cooperation. EEG data was acquired with FDA-approved amplifier, and EEG data processed, securely stored, transmitted and interpreted with licensed software in accordance with **ACNS & IFCN Guidelines** (Published online 3 Feb 2015 <http://www.tandfonline.com/doi/abs/10.1080/1086508X.2006.11079583>;

J of Clin Neurophysiology 2015; 33(4):1; *J of Clin Neurophysiology* 2006; 23(2):85-183; American EEG Society. Guidelines for recording clinical EEG on digital media. *J Clin Neurophysiology* 1994;11:114-115; *Recommendations for the Practice of Clinical Neurophysiology: Guidelines of the International Federation of Clinical Physiology*, IFCN standards for digital recording of clinical EEG; EEG Suppl. 52;1999). Digital EEG (DEEG) is the paperless acquisition and recording of EEG via computer-based instrumentation, with waveform storage in digital format on electronic media, and waveform display on an electronic monitor or other computer output device. Recording parameters and conduct of exam are governed by applicable standards of ACNS guidelines and identical/analogous to those for paper EEG recordings, utilizing linked ears and referential montages with reformatting to longitudinal bipolar, transverse bipolar, referential, Laplacian, and/or other montages as necessary for analysis and interpretation.

DESCRIPTION OF RECORDING:

WAKING BACKGROUND: During the waking state, a posterior dominant rhythm (PDR) was an intermittent rhythmic and symmetric, bioccipital rhythm, with mild-moderate attenuation in the EO condition, with wide frequency range and amplitude range of 8.5-10.5 Hz, and 30-80 uV, respectively. In more anterior derivations, the remaining background activities consisted of mixed-frequency, relatively lower amplitude rhythms, essentially symmetrically distributed, with physiologic anterior-to-posterior amplitude gradient.

DROWSINESS/SLEEP: Brief drowsiness was demonstrated by intermittent phasic spindling of the PDR with anterior/central spread and diminution of the waking posterior dominant rhythm, slow horizontal rolling eye movements (SREMs). Deeper sleep was not demonstrated. (See EEG image below)

PAROXYSMAL ABNORMALITIES: No abnormal paroxysmal, focal, or lateralizing findings, nor epileptiform discharges, were noted.

STUDY QUALITY: Minor muscle artifacts, as well as minor motion and eye movement artifacts, were noted but did not hinder adequate visualization of study. Amount of artifact-free recording for quantitative analysis was sufficient.

EEG INTERPRETATION: This EEG is without diagnostic abnormality for age in the awake and drowsy states.

EEG CLINICAL CORRELATION: This EEG in the awake and drowsy states does not suggest epileptiform abnormalities or overt risk of seizures

Clinical correlation is warranted.

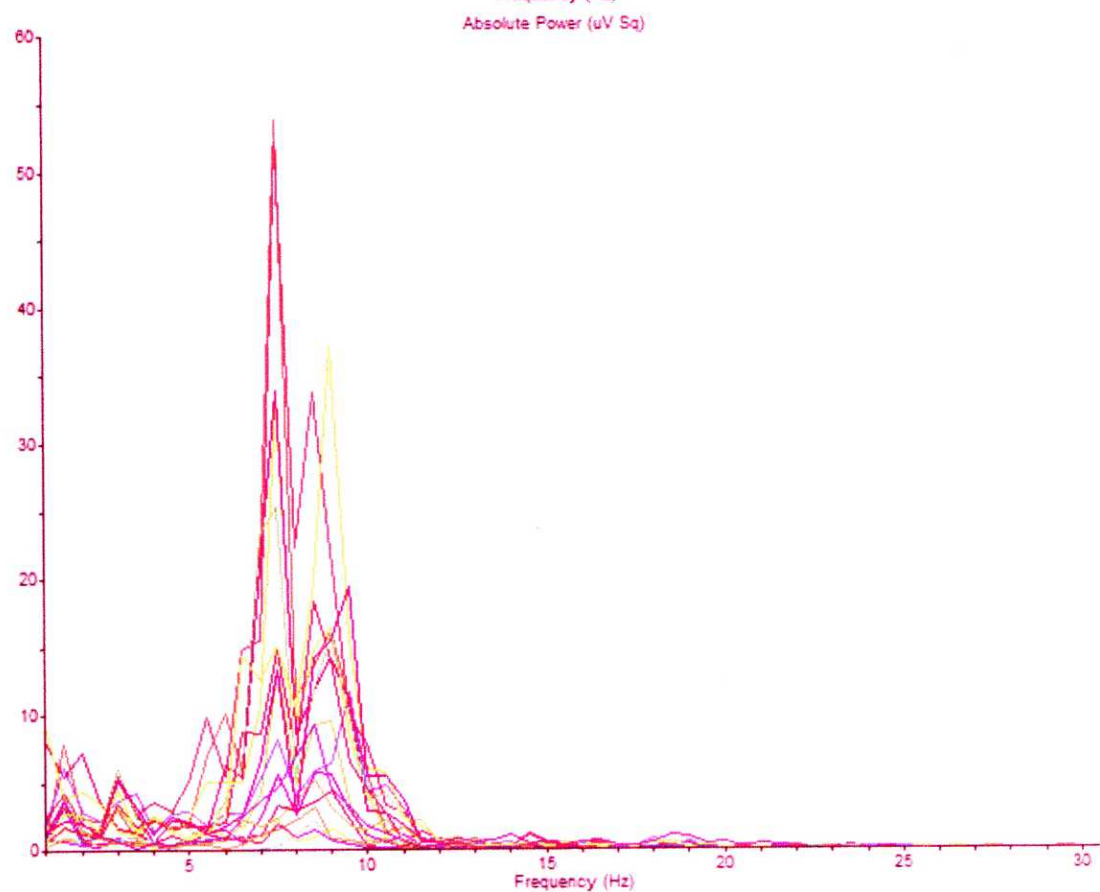
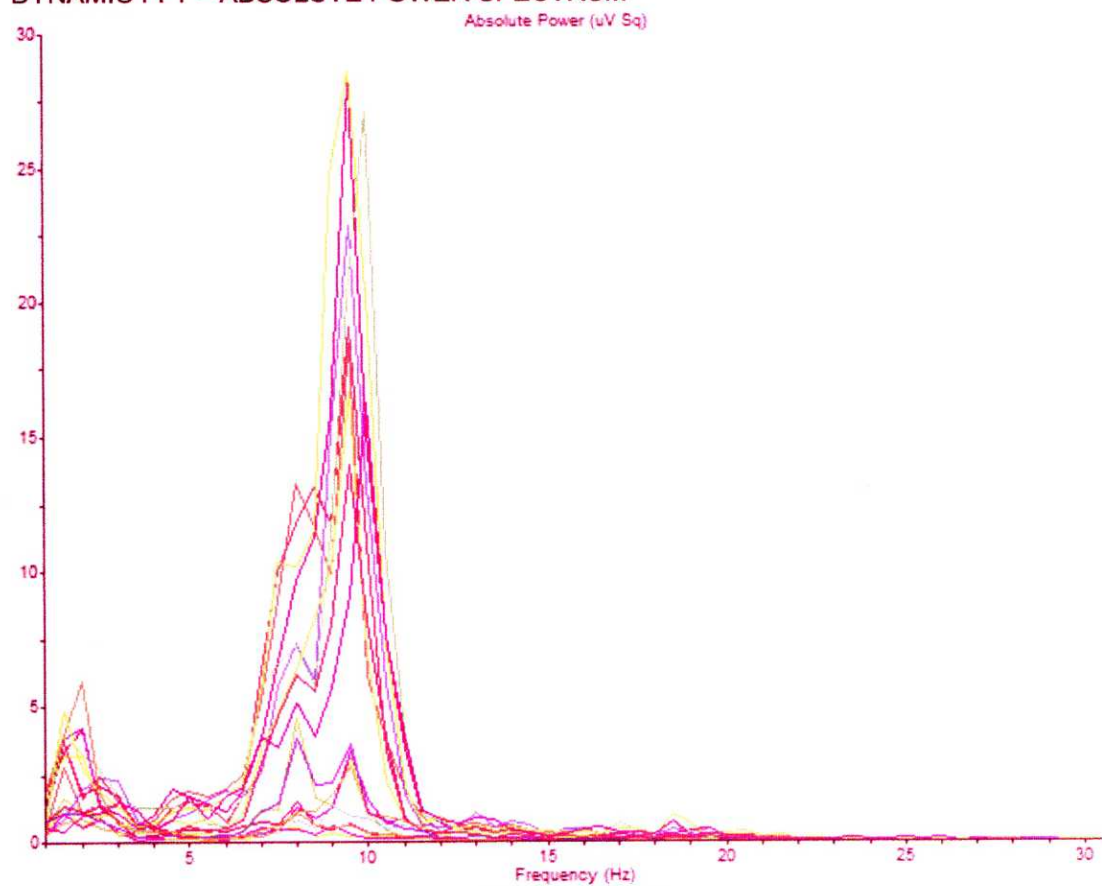
Robert P. Turner MD

Robert P Turner, MD, MSCR, QEEG, BCN

- Network Neurology Health, 2245-C Ashley Crossing Drive, PMB 163, Charleston SC
- Associate Professor of Clinical Pediatrics, Medical University of South Carolina, Charleston SC
- Associate Professor of Clinical Pediatrics & Neurology, University of South Carolina School of Medicine & Prisma Health Children's Hospital, Columbia SC
- Dept of Pediatrics, Bon Secours Roper-St Francis Hospital System, Charleston SC
- Associate Researcher, MIND Research Institute, Irvine CA

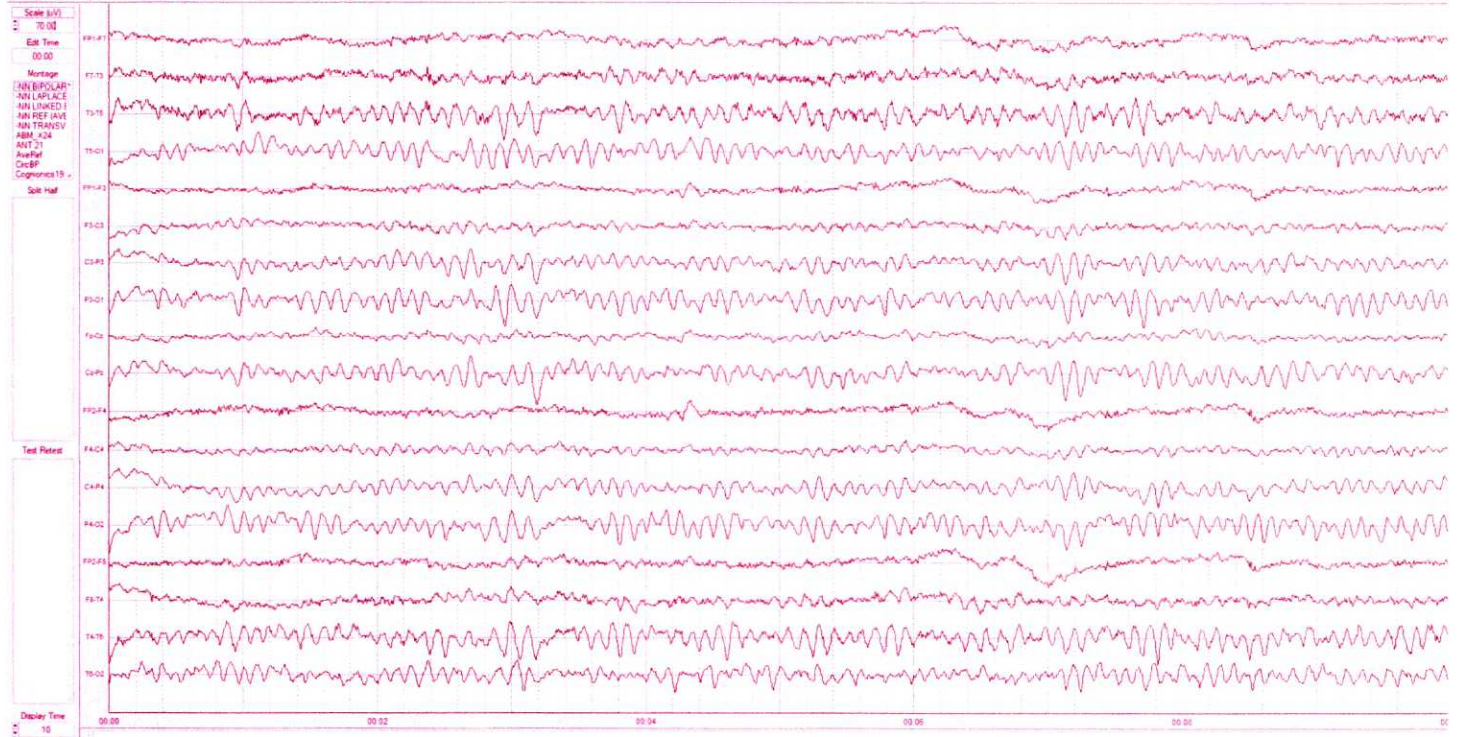
- Amer Board of Psychiatry & Neurology w Added Qualification in Clinical Neurophysiology
- American Board of Psychiatry & Neurology w Added Qualification in Epilepsy
- American Board of Clinical Neurophysiology
- Amer Board of Psychiatry & Neurology w Special Qualification in Child Neurology
- American Board of Electrodiagnostic Medicine
- Amer Board of Psychiatry & Neurology w Added Qual in Neurodevelopmental Disabilities
- Biofeedback Certification International Alliance (BCIA) in Neurofeedback
- International Quantitative EEG Certification Board (IQCB) in Quantitative EEG

DYNAMIC FFT – ABSOLUTE POWER SPECTRUM



AWAKE – EYES CLOSED

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AWAKE – EYES OPEN

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