# 0. Setup

### Initialization:

- FieldTrip top-level folder for ft defaults.m
- MEGneto top level for megne2setup.m
- SPM T1 template visible
  - project path
- analysis name
- rawdata path
- mri\_path
- overwrite

### MATLAB input

- Run ft defaults.m to add the right subfolders within FieldTrip.
- Create directories for project
- Initialize JSON config file

### megne2setup.m

paths (struct)

out

# fcp 1 TaskEpoching.m

#### 1. Setup

- Read in config settings
- · Load and match PIDs from MEG and MRI
- · Create list of subjects with full sets of data

#### 2. Plot triggers

- Generate and save plot of event triggers
- 3. Epoch continuous data into trials
- Set up trial definitions for epoching
- Epoch events list to define time windows corresponding to each trial and overall number of trials; save to config

#### 4. Head motion

- · Identify trials with excessive head motion
- · Reject those trials, save filtered version

#### 5. Artifacts

- · Check for muscle, jump artifacts
- Reject those trials with artifacts, save filtered version

#### 6. Bad channels

- · Identify and save list of bad channels
- Throw warning if there are many

#### **Outputs**

- Plots:
  - Triggers for each event type
  - Head motion visualization
- Epochs (into fcp 1 output JSON):
  - All trials
  - Filtered for head motion (HM)
  - Filtered for HM, muscle, jump artifacts
- List of bad channels (saved to its own JSON)

### fcp 2 PreprocessinglCA.m

1,2,3. Processing

#### 1. Setup

As in fcp 1

#### 2. Noise reduction

 Load gradiometer info and compute 3<sup>rd</sup> order gradients from CTF to account for

#### 3. ICA

- Remove bad channel signals altogether from analysis (they are dependent on neighbor sensor signals, thus redundant to include in ICA)
- · Run ICA

#### Outputs

· ICA components for each participant

### fcp 2 5 checkpoint.m

- Human to identify ICA components that are artifacts or too noisy.
- Back-project to clean ICA

### **Outputs**

- Bad ICA components to JSON file
- ICA-denoised data

### fcp\_3\_ChannelRepair.m

#### 1. Setup

As in fcp 1

#### 2. Bad channel repair

· Replace bad channel signal with average (or other option) of neighbours

#### **Outputs**

- Final preprocessed data output into \*.mat
- fcp\_2\_output JSON tracking configurations, paths
- · Bad ICA components to JSON file

### fcp 4 beamforming.m

4. Beamforming

#### 1. Setup

- · Read in config settings
- · Load and match PIDs from MEG and MRI folders
- · Create list of subjects with full sets of data; note that participants may be removed after preprocessing due to insufficient number of trials leftover (e.g., too much noise)

#### 2. Head model preparation

- Load and segment T1 template brain
- · Construct head model and do necessary unit conversions
- · Construct dipole grid in template brain

#### 3. Check alignment

- Load and segment participant MRIs, load preprocessed MEG
- Construct subject-specific head, source models
- Check alignment between subject and template head model
- Check alignment source model and head model
- Save images

#### 4. Source reconstruction

- Compute lead field matrix
- Run source analysis, reduce to dominant orientation
- Load desired atlas and create binary masks to define valid voxels within head model
- Interpolate functional data onto anatomical data
- Further interpolation onto AAL-defined regions
- · Return these results

### **Outputs (for each participant)**

 catmatrix = individual source timeseries in \*.mat files: (timepoints in 1 trial) x (num. trials) x (num. AAL nodes)

ft sourceanalysis

ft sourceplot

load config

ft sourcedescriptives

ft sourceinterpolate

ft timelockanalysis

ft volumesegment

load participants

write match if not empty

ft volumelookup

- srate = sampling rate
- coords = coordinate of source points w/in
- Individual and template head model alignment, \*.png
- Source and head model alignment, \*.png

### fcp 5 freganalysis.m

5. Frequency and

Connectivity Analysis

#### 1. Setup

• As in fcp 1 and load in virtual sensor data from fcp 4

#### 2. Power spectrum

- Perform time window analysis
- Baseline correct the data to control for general/random spikes in power

### **Outputs**

- 4-D matrix containing power spectrum data. Matrix dimensions are: [participants] x [regions] x [frequency] x
- Users can plot frequency by time for a specific region of a given participant's data by applying a plotting function on a slice of the matrix

### fcp 5 taskconnectivity.m

### 1. Setup

- As in fcp 1
- · Create filter coefficients

### 2. Analysis

- Load participant source timeseries matrices (catmatrix)
- · Apply Hilbert filter to isolate frequency band
- Return PLI or PLV connectivity between pairs of AAL nodes
- Repeat for each trial and frequency band
- Save individual connectivity matrix
- Then, repeat for all participants
- Take average across trials for each participant and assemble all-participant connectivity matrix

#### **Outputs**

- Individual connectivity matrix (nodes x nodes x trial x freq. band)
- All participant connectivity matrix

(nodes x nodes x participants x band)

#### · ds pid match

- ft connectivityanalysis
- load config
- load participants
- write match if not empty

### ft defaults

- path check

- save to json
- path generation

- check csv has empty
- ds pid match

- detectBadChannels
- ft artifact muscle
- ft read event ft read header

- ft artifact jump
- ft definetrial
- ft preproessing ft rejectartifact

- HeadMotionTool
  - load config
  - load participants plotTriggers
  - save to ison write match if not empty

- · ds pid match
- ft channelrepair ft channelselection
- ft componentanalysis · ft denoise synthetic
- ft\_prepare\_neighbours
- ft rejectcomponent
- · ft selectdata
- ft\_topoplotIC

- - load config
- save to ison
- ft\_preprocessing
- ft resampledata

- inputBADchannels
- load participants
- saveSensorsToFile
- write match if not empty

#### ds pid match

- · ft convert units
- ft freganalysis ft plot mesh
- ft plot sens ft plot vol
- ft prepare headmodel
- ft prepare leadfield
- ft prepare sourcemodel · ft read atlas
- ft resampledata

ft read mri

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