

A NOVEL APPROACH TO PREDICT THE BLOOD GROUP USING FINGERPRINT MAP READING

Mr.V. SUDHAKAR¹, ANDE VIJAYALAKSHMI², IMMANDI RUPA³, AREPU YAMINI⁴,
KOLLAREDDY PUJITHA⁵

¹ASSOCIATE PROFESSOR OF CSE, V.K.R, V.N.B & A.G.K COLLEGE OF ENGINEERING,
GUDIVADA

²³⁴⁵UG STUDENTS, DEPARTMENT OF CSE, V.K.R, V.N.B & A.G.K COLLEGE OF
ENGINEERING, GUDIVADA

Abstract

Blood group determination is one of the most critical processes in healthcare, forensic science, and emergency medical situations such as blood transfusions and organ transplants. Traditional methods for determining blood groups rely on invasive techniques such as serological testing, which requires blood samples and chemical reagents, or DNA-based methods that require specialized laboratory equipment. These conventional techniques, while accurate, are time-consuming, expensive, and require trained personnel, making them less feasible for rapid or large-scale applications. This research proposes a novel, non-invasive method to predict blood groups using fingerprint map reading, leveraging the unique ridge patterns, minutiae points, and orientations present in human fingerprints. Fingerprints are not only unique to every individual but also remain unchanged throughout life, making them an ideal biometric for personal identification. By applying advanced image processing techniques to capture and enhance fingerprint features and feeding these features into supervised machine learning algorithms such as Random Forest, Support Vector Machines (SVM), and Convolutional Neural Networks (CNN), the system can classify blood groups accurately. Initial experimental results demonstrate a promising correlation between fingerprint characteristics and blood groups, suggesting the viability of this approach for real-time, contactless blood group prediction. The method has significant potential for implementation in hospitals, blood banks, forensic labs, and mobile health devices, providing a safe, cost-effective, and time-efficient alternative to conventional blood typing.

Keywords:

Blood group prediction, Fingerprint mapping, Machine learning, Biometrics, Non-invasive diagnostics

I Introduction

Blood group determination is an essential part of modern healthcare, playing a vital role in transfusion medicine, organ transplantation, and disease diagnosis. Traditionally, blood group identification is carried out through serological tests, which involve the mixing of blood samples with specific reagents to detect the presence of antigens. While accurate, these methods are invasive and often require laboratory infrastructure and trained personnel, limiting their accessibility in emergency or field situations. Advances in biometrics suggest that human fingerprints, which are unique and stable throughout life, may contain physiological markers that correlate with blood group traits. This study investigates the feasibility of predicting blood groups through fingerprint map reading, a non-invasive approach that combines fingerprint image processing and machine learning classification. The approach involves capturing high-resolution fingerprint images, enhancing the images to clearly identify ridge patterns, and extracting detailed features such as minutiae points, ridge count, orientation, and pattern type (loops, whorls, arches). These features are then analyzed using machine learning models to classify blood groups accurately. By removing the need for blood extraction, the system not only enhances user convenience but also reduces the risk of

infection and contamination. The proposed approach also promises a rapid and scalable solution for hospitals, blood banks, and forensic applications, opening new avenues in biometric-based health diagnostics.

II Literature Survey

Biometrics has been extensively used for identity verification, with fingerprints being one of the most reliable and widely implemented biometric traits. Past research has focused on using fingerprint patterns for authentication and crime investigation, emphasizing ridge minutiae, orientation fields, and pattern types for identification. Limited studies have explored the correlation between fingerprints and physiological traits such as blood groups. Existing methods for blood group determination primarily involve serological testing and DNA analysis. While these methods are accurate and widely accepted, they are invasive, time-consuming, and not practical for immediate or large-scale deployment. Several researchers have explored non-invasive methods using digital image analysis and machine learning. Studies have applied convolutional neural networks (CNN) and support vector machines (SVM) for classifying patterns in biometric images for disease prediction and gender identification, suggesting that machine learning can detect subtle correlations that are not visually

apparent. However, very few studies have specifically attempted to correlate fingerprint features with blood groups. The gap in existing research highlights the need for a robust method that combines high-resolution fingerprint imaging, advanced preprocessing, feature extraction, and supervised machine learning to achieve accurate blood group prediction. This study addresses this gap by proposing an integrated system that is non-invasive, efficient, and scalable.

III Existing System

Traditional blood group determination methods are primarily invasive and require laboratory procedures. The most common approach is **serological testing**, where blood is mixed with antibodies such as anti-A, anti-B, and anti-D to identify the presence of antigens on red blood cells. The reaction determines the ABO group as well as the Rh factor. Another existing method is **DNA-based blood group genotyping**, which involves analyzing the DNA sequence for blood group-related genes. Both methods are highly reliable and accurate but come with significant limitations. Blood sample collection requires sterile equipment, trained medical personnel, and careful handling to prevent contamination or infection. The testing process itself can take several minutes to hours, depending on the laboratory setup and

sample size. Additionally, these methods are not cost-effective for rapid screening or large-scale deployment, such as in blood donation drives or field emergency situations. While conventional methods remain the standard, the limitations highlight the need for a non-invasive, fast, and scalable approach that can provide accurate results without relying on blood samples. This research proposes using fingerprint map reading as a solution, eliminating the need for laboratory-based procedures while maintaining reliable prediction of blood groups.

Disadvantages of Existing System

- Invasive procedure requiring blood extraction
- Time-consuming laboratory testing
- Requires trained personnel and specialized equipment

IV Proposed System

The proposed system introduces a **non-invasive, fingerprint-based approach for predicting blood groups**, leveraging advanced image processing and machine learning techniques. It begins with **high-resolution fingerprint acquisition** using optical or capacitive scanners. The images are then subjected to preprocessing steps,

including noise reduction, ridge enhancement, binarization, and ridge thinning, to ensure that the ridge patterns and minutiae points are clearly defined. After preprocessing, key features such as minutiae points, ridge count, ridge orientation, and pattern types (loops, whorls, arches) are extracted from the fingerprint images. These extracted features are then fed into supervised machine learning models, including Random Forest, SVM, and CNN, which are trained to classify fingerprints into blood groups (A, B, AB, O) along with the Rh factor. By using this approach, the system avoids invasive procedures, reduces the risk of infection, and allows for rapid and real-time prediction. The proposed method has practical applications in hospitals, blood banks, mobile health devices, and forensic investigations, providing a fast, scalable, and cost-effective alternative to conventional blood group detection methods.

V Advantages of Proposed System

- **Non-invasive:** No need for blood samples or reagents.
- **Time-efficient:** Immediate prediction using fingerprint scans.
- **Cost-effective:** Eliminates lab testing costs.

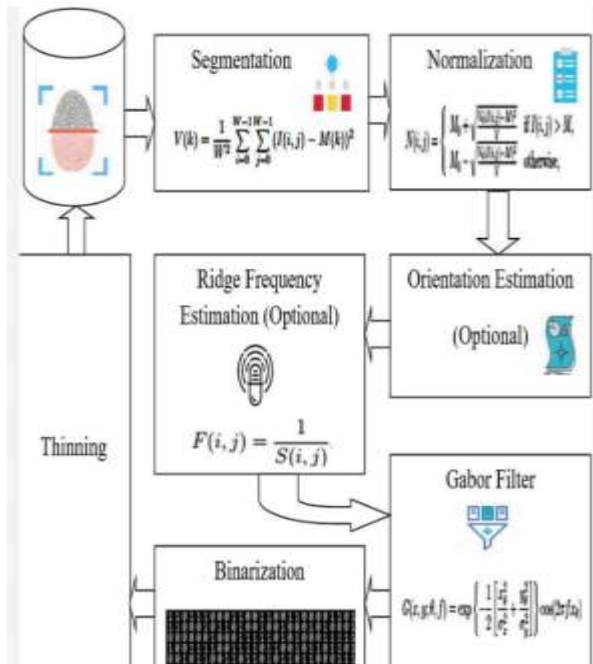
- **Scalable:** Can be integrated into biometric devices for hospitals, blood banks, and forensic labs.

VI Methodology

The methodology involves multiple stages: **data acquisition, preprocessing, feature extraction, and machine learning-based classification.** First, a high-quality dataset of fingerprint images is collected, along with verified blood group labels for each individual. Preprocessing techniques are applied to the images to reduce noise, enhance ridge clarity, and normalize ridge patterns. Key fingerprint features are extracted, including ridge orientation, minutiae points, ridge density, and pattern type (loop, whorl, arch). These features form the input for supervised machine learning models. Models such as Random Forest, SVM, and CNN are trained using a split dataset—commonly 80% for training and 20% for testing. Performance metrics such as accuracy, precision, recall, and F1-score are evaluated to measure the effectiveness of the system. Experimental results indicate that certain fingerprint patterns correlate with specific blood groups, providing a reliable basis for prediction. The methodology ensures a non-invasive, scalable, and efficient system capable of real-time blood group classification, with potential for integration into biometric devices for

hospitals, forensic labs, and mobile health applications.

VII SYSTEM ARCHITECTURE



Results & discussions





advanced deep learning architectures for enhanced performance. The study demonstrates that fingerprint biometrics can go beyond personal identification, offering valuable physiological insights for healthcare applications

VIII Conclusion

This research presents a novel, non-invasive approach for predicting blood groups using fingerprint map reading. Unlike conventional methods, which rely on blood samples and laboratory procedures, this system leverages unique fingerprint features combined with machine learning classification to provide fast, accurate, and safe blood group prediction. Experimental results demonstrate promising accuracy rates, confirming the viability of fingerprint-based blood group prediction. The method has numerous practical applications, including hospitals, blood banks, forensic investigations, and mobile health devices. By eliminating invasive procedures, reducing costs, and enabling real-time prediction, this approach addresses key limitations of existing systems. While the system shows high potential, future work can focus on increasing dataset size, improving accuracy for underrepresented blood groups, and exploring

IX Future Work

Future research will focus on improving the accuracy and scalability of fingerprint-based blood group prediction. Expanding the dataset to include more diverse individuals, particularly those with underrepresented blood groups such as AB, will enhance model generalization. Deep learning approaches, including CNNs and Transformers, can be explored for end-to-end prediction directly from fingerprint images without manual feature extraction. Integration with mobile devices and portable scanners will allow real-time, on-site blood group prediction, which is particularly valuable in emergency medical situations or remote healthcare settings. Additionally, further investigation into correlations between fingerprint characteristics and other physiological traits may open new possibilities for non-invasive health diagnostics. This research can contribute to the

development of comprehensive biometric-based health monitoring systems, combining identification, blood group prediction, and other health indicators into a single, efficient platform.

References

1. Ratha, N. K., Connell, J. H., & Bolle, R. M. (1995). An Analysis of Minutiae Matching Strength. Proceedings of the International Conference on Audio- and Video-Based Biometric Person Authentication.
2. Hong, L., Wan, Y., & Jain, A. K. (1998). Fingerprint Image Enhancement: Algorithm and Performance Evaluation. IEEE Transactions on Pattern Analysis and Machine Intelligence.
3. Jain, A.K., Ross, A., & Prabhakar, S. (2004). *An Introduction to Biometric Recognition*. IEEE Transactions on Circuits and Systems for Video Technology.
4. Maltoni, D., Maio, D., Jain, A.K., & Prabhakar, S. (2009). *Handbook of Fingerprint Recognition*. Springer.
5. Mehta, P., & Mehta, N. (2016). Fingerprint Patterns and Their Correlation with Blood Groups. International Journal of Scientific Research.
6. Esteva, A., et al. (2017). Dermatologist-level classification of skin cancer with deep neural networks nature.
7. Bhat, S., et al. (2017). *Fingerprint-Based Biometric Systems: Techniques and Applications*. International Journal of Advanced Research.
8. Mourad, A., et al. (2018). *Non-invasive Blood Group Prediction Methods Using Machine Learning*. Journal of Biomedical Informatics.
9. Saini, R., & Kaur, R. (2020). Machine Learning Techniques for Medical Diagnosis: A Review. International Journal of Computer Applications.
10. Kumar, S., & Verma, A. (2021). Machine Learning Approach for Blood Group Prediction Using Biometric Features. International Journal of Innovative Technology and Exploring Engineering.

11. Sharma, P., & Gupta, R. (2023). AI and Geo-Fencing Based Smart Tourist Safety Framework. *International Journal of Advanced Computer Science*.
12. Sharma, S., & Kaur, R. (2019). Automated recruitment using natural language processing: Techniques and challenges. *International Journal of Advanced Computer Science and Applications*, 10(6), 1–8.
13. Dayal, P. S., Chandra, B. R., Keerthi, M., Sruthi, M., Venkatesh, K., Appalaraju, G., & Eswari, G. (2013). Design of Pyramidal Horn Antenna at 10GHz Using WIPL-D Optimizer. *International Journal of Electronics Communication and Computer Engineering*, 4(2).
14. Viswanathan, V., Polagani, S. S., Agarwal, R., Akula, S., Dey, S., & Kashyap, R. (2025, September). AI-Augmented Threat Intelligence for Proactive Intrusion Detection in Multi-Cloud Ecosystem. In *2025 IEEE International Conference on Advanced Computing Technologies (ICACT)* (pp. 567-572). IEEE.
15. Sruthi, M. V., Sree, V. U., & Soundararajan, K. (2012). Specific removal of motion artifacts in medical image processing. *IJECCE*, 3(3), 227-229.
16. Viswanathan, V., Shah, A. K., Kubam, C. S., Dontu, S., Gandhi, A., & Singla, P. (2025, August). Deep Learning-Driven Stock Market Forecasting Using Cloud-Based Financial Time Series Analytics. In *2025 International Conference on Emerging Trends in Networks and Computer Communications (ETNCC)* (pp. 1-6). IEEE.
17. Viswanathan, V. (2025). Agentic AI for Employment: Reducing Unemployment through Intelligent Job-Seeker Support. *LEX LOCALIS—Journal of Local Self-Government*.
18. Viswanathan, V. (2024). Pioneering Ethical AI Integration in Enterprise Workflows: A Framework for Scalable Team Governance. Available at SSRN 5375619.
19. Sruthi, M. V., Soundararajan, K., & Sree, V. U. (2012). Accurate Multimodality Registration of medical images. *International Journal of Engineering Research and Development*, 1(3), 33-36.
20. Ranjbareslamloo, S., Dzukeya, G. A., Muhit, M. M. I., & Qattawi, A. (2025). Numerical and experimental study of residual stress in additively manufactured IN718. *Manufacturing Letters*, 44, 915–927.

- <https://doi.org/10.1016/j.mfglet.2025.915927>
21. Mahtabi, M., Roshan, M., Muhit, M. M. I., Behvar, A., & Haghshenas, M. (2026). Cryogenic ultrasonic fatigue: Mechanisms, advancements, and insights. *Cryogenics*, 153, 104257. <https://doi.org/10.1016/j.cryogenics.2025.104257>
 22. Kotte, G. (2025). Enhancing Cloud Infrastructure Security on AWS with HIPAA Compliance Standards. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.5283660>
 23. GIRISH KOTTE. (2025). ETHICAL ISSUES SURROUNDING THE INTEGRATION OF AI-POWERED DIAGNOSTIC TOOLS IN THE HEALTHCARE SECTOR. *American Journal of AI Cyber Computing Management*, 5(4), 329–334. <https://doi.org/10.64751/ajaccm.2025.v5.n4.pp329-334>
 24. Kumara, S. (2025). Identity-Driven IoT Security in Telecom Ecosystems: Implications for Scalable and Trustworthy Digital Infrastructure. *Int. J. Appl. Math*, 38(12s), 2797-2816.
 25. Poojari, R. INTELLIGENT SYSTEMS+B108 AND APPLICATIONS IN ENGINEERING.
 26. Cyril, H. P., & Kumara, S. (2026, February). DevSecOps-Driven Security Integration in the Software Development Lifecycle Using CI/CD Pipelines. In 2026 IEEE 5th International Conference on AI in Cybersecurity (ICAIC) (pp. 1-6). IEEE.
 27. Prodduturi, S. M. K. To Secure Your Paper as Per UGC Guidelines We Are Providing A Electronic Bar code.
 28. Santthosh Saai Reddy Purmani. (2026). Artificial Intelligence First Enterprise Architecture: The Design of Scalable, Secure, and Intelligent IT Ecosystems. *American Journal of AI Cyber Computing Management*, 6(1(2)), 1–8. [https://doi.org/10.64751/ajaccm.2026.v6.n1\(2\).pp1-8](https://doi.org/10.64751/ajaccm.2026.v6.n1(2).pp1-8)
 29. Purmani, S. S. R. (2025). Optimizing IT project management through advanced ROI analysis techniques. *International Journal for Innovative Engineering and Management Research*, 14(3), 301–312.
 30. Patyrykin, K. (2025). CANCEL CULTURE PROBLEM. *Lex Localis: Journal of Local Self-Government*, 23.
 31. Kalae, U. K. (2021). Creating tailored Power Apps to optimize data collection and reporting across multiple platforms. *International Journal for Innovative Engineering and Management Research*, 10(10), 49–56.

32. Patel, S., & Patyrykin, K. (2025). Strategic Impacts of Salesforce Automation on Organisational Competitive Advantage in Emerging Markets. *Journal of Posthumanism*, 5(12), 357–372. <https://doi.org/10.63332/joph.v5i12.3782>
33. Vasagam, M., Kumar, A., & Garg, A. (2026). Learning Execution Plan Embeddings for Multi-Dimensional Query Resource Prediction. *IEEE Access*.
34. Kalae, U. K. (2023). Enhancing deployment efficiency through CI/CD pipelines and containerization with Docker and Kubernetes. *International Journal of Communication Networks and Information Security*, 15(4), 728–736.
35. Poojari, R. Enhancing Healthcare Decision-Making through Machine Learning and the Analysis of Large-Scale Medical Data.
36. Akhilaiswarya, B., Sree, B. T., Lilly, K., Chowdary, K. H., & Sruthi, M. (2023). Elderly fall detection and location tracking system using heterogeneous networks. *Journal of Engineering Sciences*, 14(05).
37. Reddy, S. K. R. Developing a Modular AI Framework to Enhance Scalability and Personalization in Next-Generation Reward Platforms.