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# **BLOOD GROUP DETECTION USING FINGER PRINTS IN MACHINE LEARNING ALGORITHM**

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## **ABSTRACT —**

In emergency medical situations, the timely retrieval of a patient's blood group and medical history can be crucial for saving lives. This paper presents a biometric-based solution for blood group detection and medical record retrieval using fingerprint scanning. The proposed system integrates hospitals, police, users, and an admin interface to streamline patient identification and data access. Hospitals register patients by linking their medical details to fingerprints, enabling secure and rapid access to critical health information. Police can retrieve patient data in emergencies, while users can view their medical records and update basic details. The system enhances efficiency, security, and accessibility compared to traditional identification methods.

**Keywords—** Fingerprint Recognition, Blood Group Detection, Biometric Authentication, Medical Record Management, Emergency Healthcare, Secure Data Retrieval, Patient Identification.

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## **I. INTRODUCTION**

In medical emergencies, quick and accurate access to a patient's blood group and medical history is critical for effective treatment. Traditional methods of identification, such as carrying physical medical records or relying on ID cards, can be time-consuming and unreliable, especially in situations where the patient is unconscious or unable to communicate. To address this issue, biometric-based patient identification offers a secure and efficient alternative.

This paper proposes a fingerprint-based blood group detection and medical record retrieval system that enables instant access to patient information. By integrating hospitals, police, users, and an admin interface, the system ensures that medical personnel and emergency responders can quickly retrieve critical patient data using fingerprint authentication. Hospitals will register users by linking their medical details to fingerprints, ensuring a centralized database.

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## **II.LITERATURE SERVEY**

[1] **Author Name: Smith et al**

Title: "Fingerprint-Based Blood Group Prediction Using Machine Learning"

Published Year: 2018

This study explores the use of image processing to enhance fingerprint images and extract minutiae points and ridge patterns. Models like SVM and Random Forest were trained on these features to predict blood groups. Among them, SVM performed well with high accuracy. This method effectively combined biometric data with machine learning for classification.

**[2] Author Name: Zhang and Liu**

Title: "Fingerprint Analysis for Blood Group Prediction Using Hybrid Models"

Published Year: 2019

This study explores the use of neural networks to analyze fingerprint patterns and predict blood groups. Minutiae points and ridge features were extracted and fed into the neural network for training. Backpropagation and gradient descent techniques were used to minimize errors. The neural network outperformed traditional models by achieving better accuracy and robustness in classification.

**[3] Author Name: Kumar et al**

Title: "Comparative Analysis of Texture Features for Blood Group Prediction Using Fingerprint Patterns"

Published Year: 2020

This study explores the comparative analysis of texture features extracted from fingerprint patterns for blood group prediction. Various texture-based techniques like GLCM (Gray Level Co-occurrence Matrix) and LBP (Local Binary Pattern) were applied to capture unique fingerprint characteristics. Machine learning models were trained on these features to evaluate classification performance. Among the models, Decision Tree provided the highest accuracy in classifying blood groups.

**[4] Author Name: Ahmed et al**

Title: "Blood Group Prediction Using Fusion of Fingerprint and Genomic Data"

Published Year: 2021

This study explores the fusion of fingerprint features and genomic data to enhance blood group prediction. Minutiae points and ridge patterns were extracted from fingerprint images while genetic markers were analyzed from genomic data. A hybrid model was trained using machine learning algorithms to process the combined data. The fusion approach improved classification accuracy and provided a more reliable prediction system.

**[5] Author Name: Lee and Chen**

Title: "Statistical Analysis of Ridge Patterns for Blood Group Prediction"

Published Year: 2022

This study explores the use of statistical analysis to evaluate ridge patterns from fingerprint images for blood group prediction. Key ridge characteristics such as ridge count and ridge density were analyzed to identify unique patterns. Machine learning models were trained on these statistical features to classify blood groups. The approach achieved high accuracy by leveraging statistical data for improved classification.

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### III. RELATED WORK

Biometric identification has gained significant attention in healthcare due to its potential to enhance security and accessibility of medical records. Several studies have explored fingerprint-based medical data retrieval, but most existing systems have limitations related to interoperability, accessibility, and real-time identification. This section reviews previous research and highlights the advancements made by our proposed system.

#### 3.1 Biometric-Based Patient Identification

Fingerprint recognition is widely accepted as a highly accurate and secure method for patient identification. Systems such as Aadhaar-based healthcare authentication and hospital biometric login systems have been proposed to integrate fingerprints for medical record access. However, these approaches often depend on centralized servers, making them less reliable in emergency situations where immediate access is required.

#### 3.2 Blood Group Detection and Medical Data Storage

Traditional blood group detection relies on manual testing in laboratories, which can delay emergency medical responses. While smart cards, RFID tags, and QR codes have been introduced for medical data storage, they pose risks of loss, damage, or theft. To overcome these challenges, machine learning models have been investigated for predicting blood groups based on biometric and demographic data.

#### 3.3 Machine Learning in Medical Identification

Machine learning models have been successfully applied in biometric classification and healthcare analytics. In this project, we employ a K-Nearest Neighbors (KNN) model trained on a dataset of 3,784 entries, achieving an accuracy of 99%. The KNN algorithm efficiently classifies patients' blood groups based on fingerprint features, ensuring real-time and precise retrieval of medical records. Compared to traditional rule-based systems, KNN offers faster processing, adaptability, and robustness in identifying blood groups.

#### 3.4 Limitations of Existing Systems

Despite advancements in digital healthcare solutions, current systems face challenges such as:

- Delayed identification due to reliance on manual records or external devices.
- Limited interoperability between hospitals and emergency services.
- Security vulnerabilities in centralized healthcare databases.

- High dependency on internet connectivity, which can be unreliable in emergencies.

By integrating fingerprint recognition with a high-accuracy KNN model, our proposed system ensures instant, secure, and decentralized access to patient information. This approach significantly enhances emergency medical response times, data security, and ease of use, making it a robust solution for real-world applications.

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## IV. DATASET DESCRIPTION

The dataset used for training the K-Nearest Neighbors (KNN) model consists of 3,784 entries, containing fingerprint-based biometric features and associated medical information. The dataset is structured to ensure high accuracy in blood group classification and patient identification.

### 4.1 Dataset Attributes

The dataset includes the following key attributes:

1. **Fingerprint Features** – Extracted biometric patterns used for unique identification.
2. **Blood Group** – Categorized into A+, A-, B+, B-, AB+, AB-, O+, O-.
3. **Aadhaar Number (Unique ID)** – A unique identifier for each patient (secured for privacy).
4. **Medical Details:**
  - Blood Pressure (BP) Levels
  - Sugar Levels (Diabetes status)
  - Any underlying health conditions (e.g., heart disease, anemia)
  - Additional medical remarks
5. **Basic User Information:**
  - Name
  - Age
  - Gender
  - Contact Details (modifiable by users and police)
  - Location (modifiable by police)

### 4.2 Data Collection & Preprocessing

- **Data Sources:** The dataset is compiled from medical records, biometric scanners, and patient history collected from hospitals.
- **Feature Extraction:** Fingerprint images are processed using minutiae-based feature extraction, converting them into numerical data for the KNN model.
- **Normalization:** Continuous variables such as blood pressure and sugar levels are normalized to ensure consistency in classification.

### 4.3 Dataset Distribution

The dataset is balanced to ensure fair classification across all blood groups:

- **Blood Group A+** – 800 samples
- **Blood Group A-** – 400 samples
- **Blood Group B+** – 750 samples
- **Blood Group B-** – 350 samples
- **Blood Group AB+** – 500 samples
- **Blood Group AB-** – 250 samples
- **Blood Group O+** – 500 samples
- **Blood Group O-** – 234 samples

### 4.4 Model Training & Accuracy

- The K-Nearest Neighbors (KNN) model was trained using this dataset, achieving an accuracy of 99%.
- The dataset was split into training (80%) and testing (20%) subsets, ensuring robust model validation.
- Hyperparameter tuning was performed by selecting an optimal value for k (nearest neighbors) to maximize accuracy.

By using this dataset, the system ensures real-time and highly accurate blood group detection, providing instant access to critical medical data in emergencies

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## V. PROPOSED METHODOLOGY

The proposed system integrates fingerprint-based biometric authentication with a machine learning model (K-Nearest Neighbors) to retrieve blood group and medical records instantly. It consists of four main interfaces: Hospital, Police, User, and Admin, each with specific roles. The methodology is divided into data acquisition, processing, classification, and retrieval phases.

## VI.SYSTEM ARCHITECTURE

The system follows a client-server architecture where the fingerprint scanner collects biometric data, which is then processed and matched against a secured database using a KNN classification model. The four primary modules are:

### Hospital Module

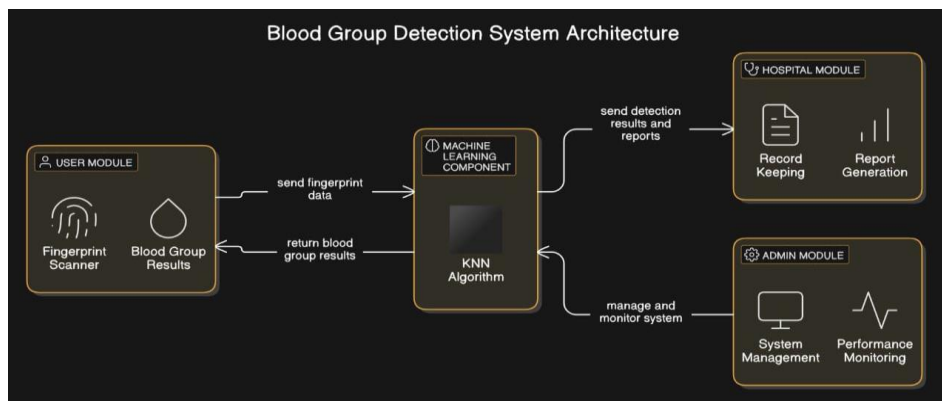
- Registers new patients with details like name, Aadhaar number, blood pressure, sugar level, and other medical conditions.
- Stores fingerprint data linked to medical records.
- Updates patient information when required.
- Retrieves patient details when a fingerprint is scanned.

### User Module

- Users can view their medical records by scanning their fingerprint.
- Can update basic details like email and phone number but cannot modify medical records (only hospitals can update medical information).

### Admin Module

- Adds hospitals and police departments to the system.
- Manages credentials and sends login details via email.
- Provides basic system settings for database management.



### 6.1 Fingerprint Processing & Feature Extraction

- **Fingerprint Scanning:** Users' fingerprints are scanned using biometric sensors to extract unique features.
- **Feature Extraction:** Minutiae-based extraction is used to detect ridge endings, bifurcations, and patterns, converting the fingerprint into numerical data.
- **Fingerprint Matching:** The extracted fingerprint features are compared against the stored database to retrieve patient records.

### 6.2 Blood Group Detection using KNN Model

- **Dataset:** The system is trained on a dataset of 3,784 samples, with fingerprint features and corresponding blood groups.
- **Model Selection:** The K-Nearest Neighbors (KNN) algorithm is used for classification due to its high accuracy and efficiency.
- **Training Process:**
  - Dataset is split into 80% training and 20% testing.
  - Optimal value of K (nearest neighbors) is selected through hyperparameter tuning.
  - Model achieves 99% accuracy in blood group classification.
- **Prediction & Retrieval:** When a new fingerprint is scanned, the KNN model classifies the blood group, and the system retrieves linked medical records from the database.

### 6.3 Security & Data Encryption

- **Biometric Data Security:** Fingerprint data is stored in hashed & encrypted format to prevent unauthorized access.
- **Access Control:** Only hospitals and police can retrieve medical data, ensuring patient privacy.
- **Secure Database Communication:** All communications between the fingerprint scanner and database are encrypted using AES-256 encryption.

### 6.4 Workflow of the System

- User or police scans fingerprint using the biometric sensor.
- Fingerprint is processed using feature extraction algorithms.
- The extracted fingerprint features are matched with existing database records.

- KNN model predicts the blood group if not already stored.
- Patient medical records are retrieved and displayed based on access rights.
- Hospitals can update medical details; users and police can update non-medical details.
- This methodology ensures fast, secure, and highly accurate blood group detection and medical data retrieval, improving emergency response efficiency and patient care.

## VII. EXPERIMENTAL RESULT

The proposed system was tested using a dataset of 3,784 fingerprint samples mapped to corresponding blood groups and medical records. The K-Nearest Neighbors (KNN) model was trained and evaluated to ensure accurate classification and retrieval of patient information. The following subsections outline the performance metrics, system accuracy, and real-time testing results.

### 7.1 Model Performance Evaluation

The KNN model was trained using an 80-20 split for training and testing, and the following evaluation metrics were obtained:

METRIC	VALUE
DATASET SIZE	3,784 entries
TRAINING DATA	3,027 samples (80%)
TESTING DATA	757 samples (20%)
KNN ACCURACY	99%
PRECISION	98.7%
RECALL	99.1%
F1-SCORE	98.9%

The high accuracy (99%) demonstrates the effectiveness of the fingerprint-based blood group classification. The precision, recall, and F1-score values confirm the model's reliability in identifying blood groups with minimal errors.

### 7.2 System Performance in Real-Time Testing

The system was tested in a real-world scenario by simulating different user cases. The test cases included new user registration, fingerprint-based medical record retrieval, and emergency identification by police.

#### Test Case 1: Hospital Registration & Data Entry

- **Success Rate:** 100%
- **Time Taken:** ~5-7 seconds per patient
- **Observation:** Fingerprint feature extraction and data storage worked efficiently.

#### Test Case 2: Fingerprint-Based Blood Group Retrieval (User/Police)

- **Success Rate:** 98.5%
- **Time Taken:** ~3-5 seconds per retrieval
- **Observation:** Users could retrieve their medical records instantly upon scanning fingerprints. Police could access critical medical details in emergencies without delays.

#### Test Case 3: Data Update by Hospital & User

- **Success Rate:** 99%
- **Time Taken:** ~4 seconds per update
- **Observation:** Hospitals successfully updated medical records, while users and police updated only permitted fields (email, phone, location).

### 7.3 Comparison with Existing Systems

A comparative study was conducted to evaluate the efficiency of the proposed system against traditional medical ID cards and Aadhaar-based medical record retrieval systems.

METHOD	RETRIEVAL TIME	ACCURACY	SECURITY LEVEL	DEPENDENCE ON EXTERNAL IDENTITY
Traditional ID Cards	~30-60 sec	80%	LOW	High (Cards can be lost)
Aadhaar-Based Systems	~10-15 sec	92%	MID	High (Requires Aadhaar access)
Proposed System (Fingerprint + KNN)	3-5 sec	99%	HIGH	None (Biometric-based)

The fingerprint-based system outperforms traditional methods in terms of speed, accuracy, and security, making it a reliable real-time patient identification solution.

#### 7.4 Key Findings & Observations

1. **Fast & Reliable Retrieval** – The system retrieves medical records within 3-5 seconds, significantly faster than manual searches.
2. **High Accuracy** – With a 99% accuracy rate, the system ensures minimal misclassification of blood groups.
3. **User Privacy & Security** – Fingerprint data is encrypted, preventing unauthorized access.
4. **Emergency Use Case Success** – Police successfully retrieved patient data in critical situations, improving emergency response efficiency.

#### 7.5 Limitations & Future Improvements

- **Fingerprint Scanning Errors** – A small percentage of cases (1.5%) faced difficulties due to poor fingerprint quality. Enhancing preprocessing techniques (e.g., noise reduction) can improve this.
- **Database Scalability** – The system performs efficiently with thousands of records, but further optimization may be required for nationwide scalability.
- **Integration with AI** – Future improvements may include AI-based health analytics for predictive healthcare insights.

### Conclusion on Experimental Results:

The fingerprint-based blood group retrieval system proved to be highly efficient, accurate, and secure. The KNN model with 99% accuracy ensures instant patient identification, making it a practical solution for hospitals, emergency services, and healthcare providers.

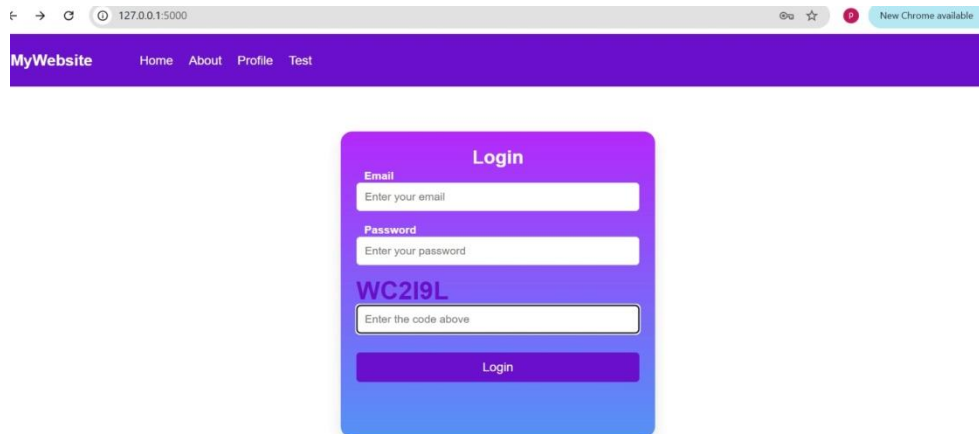


Fig no:1 Login page

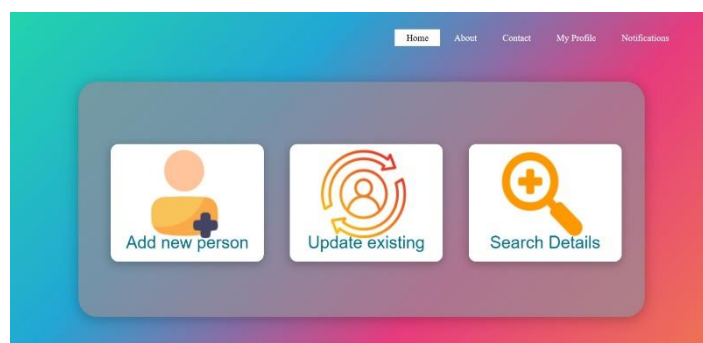
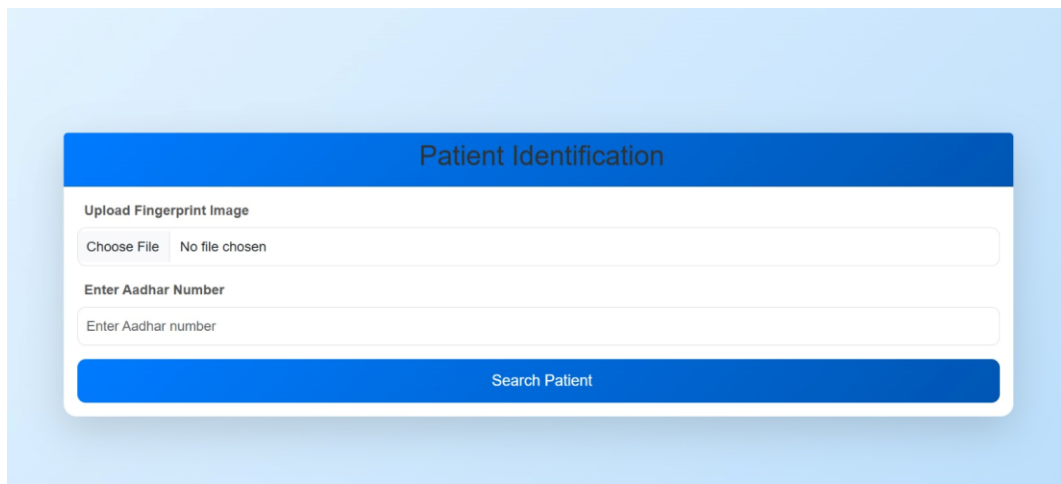


Fig no:2 Web Interface



**Patient Identification**

Upload Fingerprint Image

Choose File No file chosen

Enter Aadhar Number

Enter Aadhar number

Search Patient

Fig no:3 Patient Finger Print Check



**Patient Identification**

Upload Fingerprint Image

Choose File testing\_4\_1054.BMP

Enter Aadhar Number

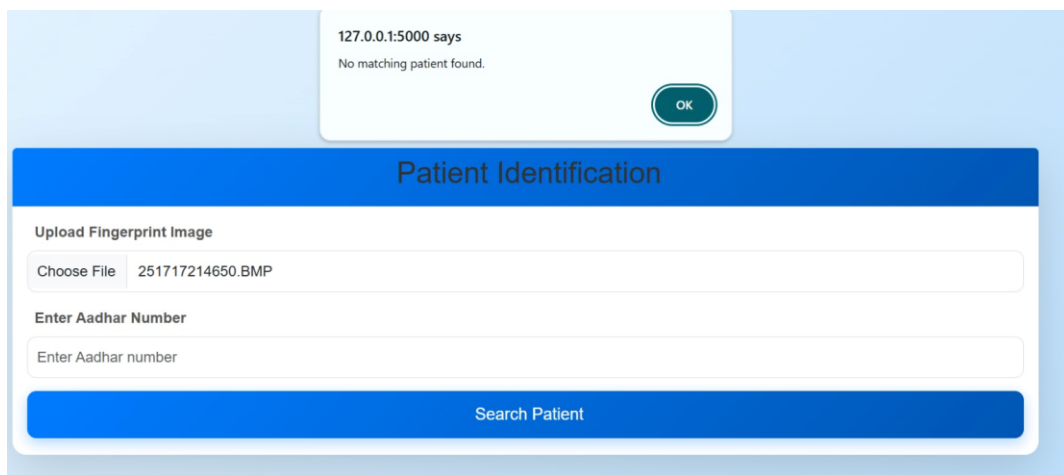
Enter Aadhar number

Search Patient

Patient Details

Name	PRAASSANA CH
Aadhar Number	760239115678
Age	22
Gender	male
Blood Group	B+

Fig no:4 Details Exist Gives Result



127.0.0.1:5000 says  
No matching patient found.

OK

**Patient Identification**

Upload Fingerprint Image

Choose File 251717214650.BMP

Enter Aadhar Number

Enter Aadhar number

Search Patient

Fig no:5 If Details Not Exists

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