

# HEMOGROUP-M

**ABO&RhD CONFIRMATION**  
At the patient's bedside

## EMERGENCIES

- Haemorrhagia at delivery
- Severe accidents

**PREVENTION OF HEMOLYTIC  
NEWBORN DISEASE**

**WHEN THERE IS  
NO ROOM FOR ERROR**

**Convenient and reliable  
Result in less than 2 minutes**

- No need for cold chain
- For remote area  
as well as hospitals



#### 4. Storage and stability

Store Hemogroup-M in sealed pouch at 2°C-30°C in a dry place away from direct sunlight.  
Shelf life: 24 months.

#### 5. Notes

- Contamination of reagents or blood samples may cause false positive or negative results.
- To avoid contamination use separate micropipette tips or sample collection loops to dispense blood in all the sample wells, taking care to ensure that they do not touch the sample pad.
- Due to the use of monoclonal antibodies, red cells with weaker A subgroup (like A3 and Ax) may also be detected. Red cells showing weaker reaction with Anti-A and/or Anti-B probably indicate subgroups of A and /or B, therefore results should be correlated with laboratory testing.

#### 6. Limitations of the test

- Hemogroup-M is not a substitute for complete (Simonin-Michon) blood grouping.
- Weak D/Partial D type human red blood cells may give a weaker or negative reaction, in which case confirmation by Coombs test is advised.
- Blood samples with hematocrit (PCV) less than 15% may give false negative or weak reactions.
- Known positive and negative control should be tested as per Good Laboratory Practices for each lot of Hemogroup-M.
- The monoclonal Anti-D used in the test does not detect the D<sup>vi</sup> variant.



#### 1. ABO/Rho(D) Rapid Blood Grouping Kit with autocontrol.

Hemogroup-M is used at the patient's bedside to confirm donor-recipient blood compatibility and to ensure the safety of the blood transfusion.

In case of severe haemorrhagia, for example during delivery, it is essential to identify the blood group of the patient very quickly in order to be able to administer blood and save the mother's life.

In order to prevent the newborn hemolytic disease caused by Rhesus factor auto-immunization, it is necessary to screen the Rhesus factor of the mother.

#### 2. Principles:

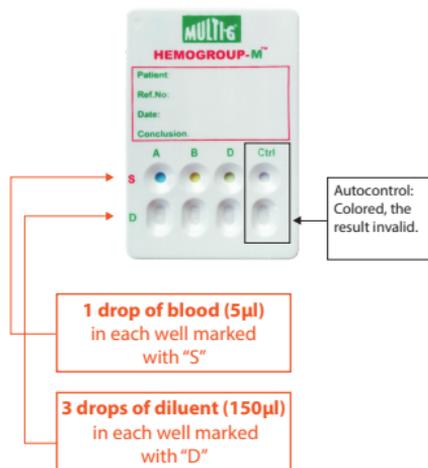
Hemogroup-M Blood Grouping Card for ABO/Rho(D) is based on the principle of lateral flow guided by capillary action. The appropriate reagents are pre-dried at the appropriate sample pad beneath the sample well namely Anti-A (IgM) antibodies in sample well A, Anti-B (IgM) antibodies in sample well B, Anti-D (IgM)(VI-) antibodies in sample well D. The autocontrol is a negative control that does not contain any antibodies in sample well (Ctrl) and serves to validate the test results.

#### 3. Instructions for use:

When 5 µl of the whole blood sample to be tested is placed on to the sample well pad and the test is run using the reagent buffer, the agglutinated red cells adhere onto the sample well pad and are visible as a red patch (positive test result) indicating that the test result is positive for that specific blood group antigen. Unagglutinated red cells are washed away by the reagent buffer revealing a white colour sample pad (negative test result) showing that the red cells are negative for the corresponding antigen. The autocontrol must be negative at all times to validate the test results.

- Using a 5µl sample collection loop, add whole blood sample to each of the sample wells indicated as "S",
- After waiting for one minute allowing the sample to react with the reagent, add two drops of the reagent buffer to each of the wells indicated as "D".
- After addition of reagent buffer wait for 3 minutes to interpret the test results.
- If the autocontrol pad has a colour (invalid result) then the test results should not be interpreted.

#### Reading test results:



#### Result interpretation:

A	B	D	ctrl	Résultats
●	○	●	○	A Rh+
●	○	○	○	A Rh-
○	●	●	○	B Rh+
○	●	○	○	B Rh-

A	B	D	ctrl	Résultats
●	●	●	○	AB Rh+
●	●	○	○	AB Rh-
○	○	●	○	O Rh+
○	○	○	○	O Rh-