Directions for Determining Your Blood Types
ELDONCARD 2521 for two blood typing inside the ABO- and Rhesus-D Systems.

Instructions for Use No. 512 (rev. 2005-03-17)

ELDONCARD 2521 may be broken into two pieces. Each piece is used for one blood grouping. If you don’t break the card, the blood applied onto the first piece must be tilted and read before any additional blood grouping. Perform test at room temperature. Avoid any infection. Wash your hands before and after blood testing. Do not use any of the accessories coming into contact with the blood for more than one person. Always check that coloured stains of same size are present in any one circular field. Read the instruction, collect all materials listed and cut open the bag / envelope. For more information, watch an online demonstration of the procedure at www.eldoncard.com or follow this simple nine-step procedure.

1. Fill in the data of the person being tested.

2. Fill a glass with water. Suck a small amount of water into the micro-dropper and release one drop onto each of the coloured reagents spots on the EldonCard.

3. Twist off the little green protective lancet cap. Place the lancet upon a table.

4. To soften the skin put the hand in warm water for 2 minutes. Dry the hand, disinfect a finger with the cleansing swab and let the finger dry.

5. Hold the lancet against the side of the fingertip. Press the green body against your finger to release the needle.

6. Press the blood towards fingertip. Repeat pressing until a drop with a 3 to 4 mm (1/8 inch) diameter is seen. Transfer the blood to an EldonStick, approached from beneath the finger: Don’t smear the blood over the skin. Place the stick onto the first circular field (see fig. 6). The blood shall touch the water already present. Alternatively ask your friend to massage your finger. You can now use your free hand to hold the EldonStick.

7. Repeat the procedure shown in fig. 5 and 6 three times using the remaining EldonSticks. Keep each stick inside its own field.

8. Stir the blood in the first field with the EldonStick. To dissolve the reagents stir approx. 10 sec. Then spread the blood to cover the entire field. Repeat the procedure in the remaining fields using their own sticks.

9. The blood must not clot. Begin the stirring within two minutes after the blood was applied onto the first EldonStick.

How to read the results
The presence or absence of agglutinates will show the Blood type. The possible combinations of agglutinates and the corresponding blood types are shown to the right.

Any test producing a weak agglutinate must be repeated. If an agglutinate is seen in the control field, the examination has to be repeated using washed blood cells. This requires lab equipment and the help of a technician.

EldonCards are delivered in moisture proof bags or envelopes. EldonCards exposed to the air must be used within the same day.

BLOOD TYPE
O-POSITIVE
BLOOD TYPE
O-NEGATIVE
BLOOD TYPE
A-POSITIVE
BLOOD TYPE
A-NEGATIVE
BLOOD TYPE
B-POSITIVE
BLOOD TYPE
B-NEGATIVE
BLOOD TYPE
AB-POSITIVE
BLOOD TYPE
AB-NEGATIVE
BLOOD TYPE
INVALID

Typical agglutinate
Weak agglutinate but still readable
No agglutinate
Corresponding antibodies and antigens are never found in the blood of the same individual. As an example, group A blood will never contain Anti-A. (Fig. 1)

The combination of the antigens and the antibodies is genetically determined. The antigens are present at birth, whereas the antibodies develop during the first year of your life. Landsteiner's discovery caused extensive investigations, and a large number of other blood type systems were disclosed, among which the Rhesus System described in 1940 is the most important.

The Rhesus System

The Rhesus blood group system is far more complicated than the AB0 System. The most important part is the Antigen-D and the corresponding antibody, Anti-D. Antigen-D is also attached to the surface of the erythrocytes, and a person with this antigen present is called D-positive or Rhesus-positive. You will never find Anti-D in the plasma of a Rhesus-positive person.

Blood without Anti-D upon the red cells is called D-negative or Rhesus-negative.

Normally you will not find any Anti-D in the blood plasma, but in case D-positive erythrocytes are introduced into the blood of a D-negative person, Anti-D will develop. This may happen in two situations:

1. During pregnancy of a D-negative mother with a D-positive foetus. Normally there is no direct connection between the blood circulation of the mother and the foetus, but they are only separated from each other by a very thin membrane. During the birth or an abortion small ruptures often appear in the delicate membrane and erythrocytes from the foetus will enter the maternal circulation. The D-antigen of the child will cause the D-negative mother to produce Anti-D (the mother is immunised), and the Anti-D will remain in the mother's plasma during the rest of her life.

In case of a later pregnancy with a D-positive foetus, the antibodies will cross the membrane enter into the foetal circulation, and attack the D-positive erythrocytes of the child. The erythrocytes will disappear, and the hemoglobin released from the erythrocytes is degraded into highly toxic bilirubin, causing a condition of anaemia and jaundice in the child.

This situation can be prevented by giving an injection of Anti-D to every D-negative mother, before the birth or abortion. The Anti-D will remain in the mother's plasma during the first year of your life. Landsteiner's discovery caused extensive investigations, and a large number of other blood type systems were disclosed, among which the Rhesus System described in 1940 is the most important.

Blood transfusions

The blood type of a donor must match the blood type of the patient. Otherwise the antigens from the donor and the corresponding antibodies from the patient will agglutinate. First each molecule of antibody will attach to two molecules of the antigen, binding two red cells together. The antibodies will glue the red cells together, and agglutination has occurred. The agglutinated erythrocytes will burst, a condition fatal to the patient.

For the same reason a D-positive donor must never give blood to a D-negative patient. Certainly Anti-D is in most cases not present in the plasma of the patient and agglutination will not occur, but the immunisation with the D-antigen will trigger a production of Anti-D, which from now on will remain in the plasma of the patient. In case the patient receives another transfusion with D-positive red blood cells, the erythrocytes will be attacked by the Anti-D, and now agglutination will occur, just as it might happen in the AB0 System. Type-O, D-negative blood does not contain any of the above described antigens and can be transfused to all kinds of patients. Therefore – in emergency situations with no time for blood grouping – type O, D-negative blood can be transfused without any risk.

Blood Groups and Nutrition

Peter D'Adamo ND, has in his books (Eat Right for your Type and others) advocated that the type of your food must be in accordance with your AB0 blood group. Further information on the blood group diets recommended by Dr. D’Adamo can be found on www.4yourtype.com.

How does the Eldoncard function?

In the first three circular fields of the card you will find the antigens A, B and O. These antibodies will agglutinate with the corresponding antigens, if the antigens are present in your blood. Thus Group-A blood - containing antigen-A - will agglutinate in the Anti-A field, whereas Group-B blood will agglutinate in the Anti-B field. Group-AB blood in the Anti-A and the Anti-B field, Rhesus- positive blood in the Anti-D field. Group-O blood does not agglutinate in any of the fields. In this way the presence or absence of agglutinations indicates the type of blood applied onto the card.

The antibodies placed upon the Eldoncard are so-called monoclonal antibodies derived from cell cultures free of infections and approved by the health authorities. The cell cultures produce antibodies of an equal and high quality.