



2026:DHC:4531-DB



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IN THE HIGH COURT OF DELHI AT NEW DELHI

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Date of Decision: 18.05.2026

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W.P.(C) 4288/2025

PAYYAVULA ANJANEYULU

.....Petitioner

Through: Mr. H K Dhariwal, Adv.

versus

UNION OF INDIA AND OTHERS

.....Respondents

Through: Ms. Alpana Pandey, Senior
Panel Counsel with Sh. Ajay
Kumar Pradhan, Asst.
Commander CISF.**CORAM:****HON'BLE MR. JUSTICE ANIL KSHETARPAL****HON'BLE MR. JUSTICE AMIT MAHAJAN****J U D G M E N T (O R A L)****ANIL KSHETARPAL, J.:**

1. Through the present Writ Petition, the Petitioner, who is serving as Constable/GD in the Central Industrial Security Force ('CISF'), assails the Review Medical Examination ('RME') dated 29.11.2024, whereby he has been declared medically unfit for the post of Assistant Sub-Inspector/Executive ('ASI/Exe') through the Limited Departmental Competitive Examination ('LDCE')-2022.

2. The Petitioner was appointed as Constable/GD in CISF on 02.05.2017. In pursuance of the LDCE notification dated 29.12.2022 issued by CISF, for recruitment of Asst. Sub-Inspector (Executive) through LDCE for the year 2022, the Petitioner participated in the selection process. He qualified the written examination and the Physical Standard Test/Physical Efficiency Test.

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3. The relevant portion of the Selection Procedure as provided under the LDCE notification is reproduced as under:

7. SELECTION PROCEDURE

The selection will consist of the following:

V)	Stage - V	Detailed Medical Examination	As per Para-6(f) above. Detailed Medical Examination of the candidates will be conducted as per the existing instructions and guidelines issued vide MHA UO No. A-VI-1/2014-Rectt/(SSB) dated 20.05.2015. Each candidate would be declared either "Fit" or "Unfit", and no candidate would be categorized "Temporary Unfit". Review Medical Examination of unfit candidates in DME would be conducted as per the instructions and guidelines issued vide MHA UO No. E-32012/ADG(Med)/DME & RME/DA-1/2020 (Part File)/1166 dated 31.05.2021.
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4. The Petitioner thereafter underwent the Detailed Medical Examination (DME) at CISF 2nd Reserve Battalion, Ranchi on 28.11.2024. By memorandum dated 28.11.2024, he was declared medically unfit on account of "*Extensive keloid involving chest, back, right arm, right thigh and gluteal region*". The said memorandum also informed the Petitioner that he could apply for the Review Medical Examination (RME).

5. Pursuant to his consent for the same, the Petitioner underwent RME on 29.11.2024. The Review Medical Board (RMB) also declared him unfit on the same ground as in the DME. The RME Report also recorded the following findings:

"2. Brief of Review Medical Examination & Finding thereof:

As per Revised Uniform Guidelines No.v-18011/24/ADG Med./WP-RKV/2014 Dated 05th December 2014 XI-2, XII B -09 -individual is

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having marked, large and multiple keloids on the front of the chest, back, right arm, right thigh and gluteal area, which might interfere in proper wearing of uniform and combatised equipments and there are various other complications of keloid including – pain, itching, continuous irritation, recurrent infections, later on skin carcinoma, hence RME Board declared him UNFIT”.

6. Learned counsel for the Petitioner submits that the Petitioner has been serving in CISF since 2017 and has discharged his duties without any complaint. It is submitted that the Petitioner’s annual medical category is SHAPE-I. On this basis, it is urged that the finding of medical unfitness for the post of ASI/Exe is arbitrary and contrary to the Petitioner’s existing service record and medical categorisation.

7. It is further urged that the RME was conducted on the very next day of the DME, without affording sufficient time to the Petitioner. Reliance is also placed on the medical opinion obtained from Dr. Ram Manohar Lohia Hospital, New Delhi, wherein it has been opined that there is no physical disability due to keloids.

8. *Per contra*, learned counsel for the Respondents submits that the medical examination was conducted strictly in accordance with the Uniform Guidelines applicable to recruitment in the Central Armed Police Forces (CAPFs). It is submitted that both the DME and the RME found the Petitioner unfit on the same ground, and that Force Medical Boards are best placed to assess the impact of a medical condition on the wearing of uniform, combatised equipment and the performance of duties in a disciplined force.

9. The scope of interference in matters relating to medical fitness for recruitment or selection to disciplined forces is limited. The Court does not sit as an appellate medical board over the opinion of duly

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constituted medical boards. The medical standard in such cases is not confined to absence of disease in the ordinary clinical sense, but extends to fitness to discharge duties under service conditions, including the wearing of uniform, protective gear and combatised equipment.

10. In *Staff Selection Commission and Ors. v. Aman Singh*¹, this Court has emphasized that in matters concerning medical fitness for disciplined forces, the opinion of duly constituted Force Medical Boards cannot be lightly interfered with, particularly where the DME and RME are consistent, and no procedural illegality, *mala fides* or perversity are demonstrated.

11. The effect of SHAPE-I medical category in an LDCE selection is also no longer *res integra*. The Supreme Court in *Pavnesk Kumar v. Union of India & Ors.*² dealt with an in-service Constable/GD who had applied for the post of Sub-Inspector/GD through LDCE and was declared medically unfit in the medical examination forming part of the LDCE process.

12. The Supreme Court held that SHAPE-I medical category in the routine annual medical examination is only an eligibility condition for applying through LDCE. It is not sufficient to treat the candidate as medically fit for the higher post. The detailed medical examination forming part of the LDCE process is independent of, and in addition to, the eligibility condition of being in SHAPE-I category while working on the lower post.

¹ W.P.(C) 13821/2024

² 2023 SCC OnLine SC 1583



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13. The Court further held that appointment through LDCE, though in the nature of accelerated promotion, cannot be equated with normal promotion. LDCE is a selection to a higher post from amongst eligible candidates working on the lower post, and the selection has to be conducted in terms of the advertisement and the scheme prescribed therein. Thus, the Petitioner's SHAPE-I status may have made him eligible to participate in the LDCE process, but it did not dispense with the requirement of being declared medically fit in Stage-V of the LDCE selection process.

14. At this stage, it would be apposite to notice the relevant medical standard under which the Petitioner has been declared unfit. Para XII(B) - 09 of the Uniform Guidelines deals with "*Examination for Skin Diseases and Leprosy*" and reads as under:

XII. EXAMINATION FOR SKIN DISEASES AND LEPROSY

B. Other conditions which are to be considered for rejection-

"9. Keloid formation, if the tendency is marked or interferes with the proper wearing of combatised equipment, is disqualifying."

15. The aforesaid clause does not render every keloid or skin mark a ground of unfitness. The expression "tendency is marked" has to be understood as referring to a condition which is pronounced enough, by reason of its size, multiplicity, location or extent, to be of concern in the medical assessment of a candidate for a combatised force.

16. The RMB has recorded that the Petitioner has marked, large, multiple keloid on the front of the chest, back, right arm, right thigh and gluteal area. It has further recorded that the same might interfere with proper wearing of uniform and combatised equipment, and may involve complications such as pain, itching, continuous irritation and recurrent infections. Thus, the conclusion of unfitness is not based on

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the bare presence of keloids, but on their nature, extent, location and likely impact in the context of the prescribed medical standard.

17. The submission that the RME was conducted on the very next day of the DME also does not commend acceptance. The Revised Uniform Guidelines for Review Medical Examination dated 31.05.2021 contemplate that the RME may be conducted in continuation of the DME, preferably on the next day. The Petitioner was found to have extensive keloids over multiple parts of the body, and the RMB examined him for the same condition for which he had been declared unfit in the DME. No specific prejudice has been shown.

18. The reliance placed on the opinion obtained from Dr. Ram Manohar Lohia Hospital also does not displace the opinion of the Review Medical Board. The said opinion records that there is no physical disability due to keloids. However, it does not certify that the Petitioner satisfies the medical standards prescribed for CAPFs for selection to the post of ASI/Exe through LDCE.

19. More importantly, the said opinion does not address the specific findings recorded by the RMB, namely that the marked and multiple keloids may interfere with the proper wearing of uniform and combatised equipment. It also does not appear to deal with the full extent of the condition recorded by the Force Medical Boards, namely keloids over the chest, back, right arm, right thigh and gluteal area.

20. The question before the Force Medical Board was, therefore, not whether the Petitioner suffered from a physical disability in the ordinary sense. The question was whether, having regard to the nature,

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extent and location of the keloids, he satisfied the medical standard applicable to selection for ASI/Exe through LDCE. The later opinion from RML Hospital does not answer the standard under Para XII(B)(9) of the Guidelines, and cannot override the concurrent opinions of the DME and RME.

21. In view of **Pavnesh Kumar** (*Supra*), an in-service candidate participating in LDCE cannot insist that the standards applicable to continuation in the existing post must govern selection to the higher post. LDCE is not a normal promotion. It is a selection through competitive examination within a limited class of departmental candidates. The Petitioner was, therefore, required not only to satisfy the eligibility condition of SHAPE-I in his existing post, but also to clear the Detailed Medical Examination forming part of the LDCE selection process.

22. The Petitioner may not have had such keloids at the time of his initial appointment; in any case, medical fitness of the candidate has to be assessed at the time of the relevant medical examination. What is relevant is that, on the date of the DME and RME, the competent medical boards found the Petitioner to have marked, large and multiple keloids attracting unfitness in accordance with the applicable medical standards.

23. The Petitioner has, therefore, not been rejected on the basis of a vague or unsupported medical opinion. Both the DME and the RME are consistent. The RMB has applied the relevant medical standard and has given reasons germane to the nature of service in a disciplined force. No procedural irregularity, perversity or violation of the applicable guidelines is made out.

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24. It is, however, clarified that the present judgment is confined to the Petitioner's medical fitness for the post of ASI(Exe.) through LDCE-2022. Nothing stated herein shall be read as an expression on the Petitioner's continuation in his existing post, which shall remain governed by the applicable service rules.

25. In view of the aforesaid, no ground is made out for interference with the Review Medical Examination dated 29.11.2024.

26. The present Writ Petition is accordingly dismissed.

ANIL KSHETARPAL, J.

AMIT MAHAJAN, J.

MAY 18, 2026

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