$~1

* **IN THE HIGH COURT OF DELHI AT NEW DELHI**

\+ W.P.(C) 4251/2025, CM APPL. 19691/2025 & CM APPL. 19692/2025

ANAND KAUSHAL SINGH .....Petitioner

Through: Mr. Prateek Kumar, Ms. Aarushi Jain, Mr. Yojit Pareek, Ms. Ankita and Mr. Prassant Kumar Sharma, Advocates

versus

UNION OF INDIA & ORS. .....Respondents

Through: Mr. Anuj Gupta, CGSPC for R-1 & 3 with Mr. Shriram Tiwary, GP with DC JAG Deeptiman and DC Sandeep Chaudhary .

Mr. Ravinder Agarwal, Mr. Manish Kumar Singh and Mr. Vasu Agarwal, Advocates for UPSC.

CORAM:
HON'BLE MR. JUSTICE C.HARI SHANKAR
HON'BLE MR. JUSTICE AJAY DIGPAUL

JUDGMENT (ORAL)

% 03.07.2025

AJAY DIGPAUL, J.

1. The present writ petition has been instituted by the petitioner, Mr. Anand Kaushal Singh, challenging the rejection of his candidature for the post of Assistant Commandant[1] in the Central Armed Police Forces[2] on account of medical unfitness.

2. The petition invokes the writ jurisdiction of this Court under Article 226 of the Constitution, seeking the issuance of appropriate

[1] Hereinafter "subject post"
[2] Hereinafter "CAPFs"

directions to quash the medical report dated 18.12.2024 issued by the Review Medical Examination Board[3], and to allow the petitioner to undergo a fresh medical examination before a duly constituted independent medical board which includes a specialist (Ophthalmology) to re-evaluate the petitioner's medical fitness.

3. The genesis of the dispute lies in an examination notification bearing No. 09/2024-CPF dated 24.04.2024 issued by the respondent no. 2, Union Public Service Commission[4], thereby, inviting applications for the subject post.

4. The petitioner applied for the said examination and was issued an admit card for the written examination scheduled on 04.08.2024. Pursuant thereto, the petitioner appeared in the examination, and *vide* results declared on 24.09.2024, his name featured at serial number 612 in the list of successful candidates.

5. Following the written stage, the petitioner received an admit card on 16.12.2024 for the Physical Standard Test[5], Physical Efficiency Test[6], and Medical Standard Test[7], including the provision for a Review Medical Examination[8], as per the established procedure. The petitioner successfully qualified both PST and PET on the same date. He was subsequently referred for the Detailed Medical Examination[9] before the Detailed Medical Examination Board[10] for

[3] Hereinafter "RME Board"
[4] Hereinafter "UPSC"
[5] Hereinafter "PST"
[6] Hereinafter "PET"
[7] Hereinafter "MST"
[8] Hereinafter "RME"
[9] Hereinafter "DME"

MST.

6. The Medical Board, however, on 17.12.2024, declared the petitioner *"medically unfit"* citing the condition of *"moderate ptosis in the left eye"* as the reason for disqualification in the DME. The petitioner, aggrieved by this, availed the standard remedy of review and appeared before the RME Board. Nonetheless, the RME Board, on 18.12.2024, affirmed the earlier decision and reiterated the unfitness of the petitioner for the aforementioned condition.

7. Subsequently, the petitioner appeared in the Uttar Pradesh Public Service Commission examination on 22.12.2024 at Jaunpur and returned to Delhi after visiting his family. Supposedly, shocked by the adverse medical finding, the petitioner sought an independent evaluation and approached the All India Institute of Medical Sciences[11], New Delhi. On 07.02.2025, after clinical assessment, AIIMS issued a report declaring the petitioner medically fit, with a clear finding of *"no ptosis"*.

8. Armed with the AIIMS report, the petitioner addressed representations to both respondent no. 2 - UPSC and respondent no. 3 – Indo-Tibetan Border Police[12] on 08.02.2025 and 09.02.2025 respectively, seeking rectification of the allegedly erroneous medical disqualification. While no response was received from UPSC, the ITBP, *vide* email dated 11.02.2025, declined to act on the AIIMS report, citing the absence of any provision to conduct a re-medical

[10] Hereinafter "DME Board"
[11] Hereinafter "AIIMS"

examination after the RME Board has rendered its decision.

9. It is pertinent to mention that the petitioner has stated that in the preceding year, i.e., 2023, the petitioner had qualified the same examination and was declared medically fit despite the same condition of *ptosis* having been. To contend the same, the petitioner has placed the result dated 30.12.2023 of the medical examination in the abovesaid examination on record.

10. Accordingly, the petitioner has approached this Court seeking judicial redress.

11. Mr. Prateek Kumar, learned counsel appearing on behalf of the petitioner asserts that the AIIMS report contradicts the findings of the RME Board, and such disparity necessitates a fair reassessment by an independent medical board, especially since *ptosis*, in its mild or non-vision-impairing form, as per the relevant guidelines, is not a ground for medical rejection. The petitioner claims that the denial of such opportunity is arbitrary, contrary to established norms, and in violation of principles of natural justice.

12. It is the petitioner's argument that the medical findings given in the DME and RME are not supported by any material to substantiate the conclusion that *ptosis* interferes with vision or affects operational efficiency. The review board merely repeated the findings of the earlier report without independent re-evaluation. It is further asserted that no specialist in Ophthalmology was a part of the review board,

[12] Hereinafter "ITBP"

thereby rendering the medical finding questionable in the absence of specialized expertise.

13. To substantiate his claim, the petitioner submits that he voluntarily approached the AIIMS, New Delhi, which issued a medical report on 07.02.2025 stating that there was *"no ptosis"*, meaning thereby that the petitioner is medically fit in all respects. It is submitted that the medical examination at AIIMS was not casual or summary in nature but was a detailed and specialised process undertaken by expert medical professional. Further, the concerned medical officer (who had issued the AIIMS report) was duly aware about the RME findings and thus, had written *'came for examination'* in his report.

14. It is also submitted that even if Ophthalmologists were on the RME Board, the AIIMS report rebuts their conclusion with greater clarity and specificity. Reliance in this regard has been placed upon the judgment passed in ***Staff Selection Commission v. Aman Singh***[13], wherein, the Court has held that judicial interference is warranted where a condition requires specialist opinion but no such specialist is on board or where a specialist's report is disregarded without any reason.

15. The petitioner further submits that in the previous year (2023), he had appeared for the same examination *(under a different notification)* and had undergone medical evaluation. On that occasion, the RME Board declared the petitioner medically fit. The petitioner argues that the same physical condition, which did not warrant

disqualification in the year 2023, has now been cited as the sole ground for rejection in the year 2024, thereby demonstrating a clear inconsistency and lack of uniform standards in medical evaluation. The current rejection, therefore, lacks consistency and objectivity.

16. The petitioner also places reliance on the *'Policy Guidelines on Visual Standards for recruitment/retention in respect of Central Armed Police Force and Assam Rifles Personnel, by Ministry of Home Affairs, Government of India, dated 18.05.2012* read with *Office Memorandum dated 20.05.2015*[14]*'* and contends that 'mild ptosis not interfering with vision' is not a disqualifying factor. The relevant guideline, as quoted in the petition, stipulates that *"Ptosis interfering with vision or visual field is a cause for rejection till surgical correction remains successful for a period of six months,"* and that *"Mild ptosis of less than 2 mm if not associated with any signs of aberrant regeneration or head tilt and not interfering with vision should not be a cause for rejection."* It is submitted that the findings against the petitioner do not meet these thresholds as the RME report merely notes *'ptosis <2 mm in the left eye'* without any finding of visual field restriction, head tilt or aberrant regeneration, i.e., the essential thresholds under the guidelines. The alleged *ptosis* was never shown to interfere with the petitioner's vision, nor were there any clinical observations suggesting aberrant regeneration or head tilt.

17. In support of his plea for a re-medical examination, the petitioner cites several judicial precedents. These include the decision

[13] **2024 SCC OnLine Del 7600**
[14] Hereinafter "Recruitment Guidelines (medical)"

in ***Dharamvir Singh v. State of Uttar Pradesh & Anr.***[15], where the Hon'ble Supreme Court directed a re-medical examination by a fresh board upon finding that the medical condition, i.e., the medical defect, was not of a permanent nature. Further reliance is placed on the judgment of the Calcutta High Court in ***Koushik Paul v. Union of India & Ors.***[16], wherein the Division Bench set aside the findings of both the Medical and Review Boards and directed consideration based on an independent certificate obtained from a recognized institution.

18. The petitioner also points to the revised UPSC notification No. 09/2025-CPF dated 05.03.2025, which now stipulates that medical examinations are to be conducted after the interview stage. He contends that such a change in procedure was required to be followed by the respondents, however, they failed to do so. The petitioner, who is stated to be attempting the examination for the last time, submits that denial of an opportunity for re-evaluation would render the entire process unjust and would defeat the object of equal opportunity in public employment.

19. *Lastly*, it is submitted that the decision of the RME Board is perverse, unreasoned, and fails to address the individual facts and circumstances of the petitioner's case. The petitioner asserts that there has been a violation of the fundamental right to be considered fairly for public employment, and the impugned action deserves to be set aside in exercise of the extraordinary jurisdiction of this Court.

[15] **W.P.(C) 444/2019, Order dated 19.07.2019**
[16] **MAT 81/2021, Order dated 10.03.2021**

20. *Per Contra*, Mr. Anuj Gupta, learned SPCG, appearing for the respondent nos. 1 (Union of India) and 3 (ITBP) as well as Mr. Ravinder Agarwal, appearing for respondent no. 2 vehemently opposed the instant petition submitting to the effect that the same is liable to be dismissed being devoid of any merits.

21. At the outset, it's been asserted that the recruitment to the subject post is governed by the notification dated 24.04.2024 bearing No. 09/2024-CPF issued by the UPSC, along with the Recruitment Guidelines (medical) framed under the Ministry of Home Affairs. It is submitted that the process is objective, transparent, and includes several stages including the written examination, PST, PET, MST/DME, and RME for candidates found unfit in the first instance.

22. The respondents submit that the petitioner was found medically unfit during the DME on 17.12.2024 due to *"moderate ptosis in the left eye."* Thereafter, he was examined by the duly constituted RME Board on 18.12.2024, which re-evaluated the petitioner and confirmed the same diagnosis and unfitness. The Board, comprising three qualified medical officers including eye specialist, reaffirmed the DME Board's finding. It is contended that the standards applicable for recruitment to armed forces is more stringent in nature. As such, visual defects including *ptosis*, which is moderate, is medically disqualifying under the relevant Recruitment Guidelines (medical).

23. The respondents further submit that the Recruitment Guidelines (medical), which are an integral part of the recruitment process, do not stipulate a third or subsequent medical opinion once the RME Board

has confirmed the unfitness of a candidate. It is the respondents' categorical stand that there is no legal or procedural basis under the existing CAPF recruitment framework or UPSC guidelines which permits a "re-medical" examination based on an external opinion or private diagnosis, even if the institution in question is a government hospital such as the AIIMS.

24. With respect to the AIIMS report dated 07.02.2025, relied upon by the petitioner, it is submitted that the same is of no evidentiary value in the present context as it is not issued by a Medical Board constituted under the CAPF Recruitment Rules.

25. Further, the respondents submit that the petitioner's reliance on his previous selection in the CAPF exam in the year 2023, wherein, he was declared medically fit despite the presence of the alleged *ptosis*, is misplaced. Each recruitment cycle is an independent process, and medical evaluations are conducted afresh in each case. Even minor changes in the clinical condition between the two examinations may lead to different findings. Hence, no vested right arises from the previous declaration of fitness.

26. The respondents also dispute the claim that the *ptosis* was *"mild"* or non-interfering with vision. They submit that the diagnosis of "moderate ptosis" was made by trained and qualified medical, after physical inspection, and in accordance with applicable guidelines. It is further stated that the candidate was properly informed of his unfitness and the option of RME, which he availed. Hence, there is no violation of natural justice or procedural irregularity. The respondents,

therefore, pray that the writ petition be dismissed as being devoid of merit.

27. Having heard Mr. Prateek Kumar, learned counsel for the petitioner, at length, we find ourselves unable to come to the aid of the petitioner. The MHA Guidelines for Recruitment Medical Examination in Central Armed Police Forces and Assam Rifles as revised in May 2015 to the extent of Annexure 2 thereof, which deals with Ophthalmologist system examination and Clause VIII states with respect to *Ptosis* that mild ptosis of less than 2 mm would not be a cause for rejection if it is not associated with any signs of aberrant regeneration or head tilt and not interfering with vision. Though Mr. Prateek Kumar sought to submit that there is nothing forthcoming from the RME report as to whether the *ptosis* from which the petitioner was found to be suffering, which was admittedly less than 2 mm was or was not associated with aberrant regeneration or head tilt or whether it interfered with vision, we are unable to accept the submission as the instruction deals with mild ptosis of less than 2 mm, whereas the specific finding of the RME is that the petitioner suffers from moderate *ptosis* of less than 2 mm. The finding that the petitioner is suffering from moderate ptosis is a finding returned by a Board which consist of an Ophthalmologist. The finding that there is a moderate ptosis in the left eye of the petitioner is concurrently figuring in the DME and the RME reports. As such, the Guidelines which deal with the mild ptosis would not be applicable. We have, in our judgment in ***Aman Singh (Supra)***, which follows the earlier decisions

of this Court, notably in ***Priyanka v UOI***[17], observed that there are only three circumstances in which a request for a RME, merely on the basis of a report obtained from an outside institution, irrespective of the imminence of the institution, can be granted. These are, either if there is a discrepancy between the findings of the DME and RME or if the respondents themselves had referred the candidate to the outside hospital for opinion or if the condition was such as required a specialist opinion and there was no specialist in the DME and the RME Board. In the present case, these conditions are not satisfied. There was an Ophthalmologist on the RME Board. The petitioner was not referred to AIIMS but went *suo motu* to AIIMS. There is no inconsistency between the DME and RME, both of which concurrently find that the petitioner is suffering from moderate ptosis in his left eye. Mr. Prateek Kumar also drew our attention to the guidelines applicable to conducting of the RME, which we have reproduced supra. A bare reading of the said guideline indicates that a medical certificate produced by a candidate as a piece of evidence about the possibility of an error of judgment in the decision of the Medical Board which had first examined the officer, would be taken into consideration if it contained a note by the concerned Medical Practitioner, who should be a Medical Officer of the concerned Speciality from a District Hospital along with his registration number to the effect that it was given in full knowledge of the fact that the candidate had been rejected as unfit for service by the DMB or the recruiting Medical Officer. There is no such recording in the report of the AIIMS. The petitioner has sought to contend that the fact that the

[17] **2020 SCC OnLine Del 1851**

very noting of the AIIMS that the petitioner 'came for examination' would indicate that the AIIMS was aware that it was required to consider the correctness of the decision of the DME or the RME Board. We cannot read any such inference into the words 'came for examination' which merely indicate that the candidate had approached AIIMS to have himself examined. Clearly, the requisites of the instructions relating to the RME guidelines on which Mr. Prateek Kumar places reliance are not satisfied.

28. This Court possesses limited jurisdiction in such matters. It cannot convert itself into an Expert Medical Body and direct recruitment of a person who has been found concurrently to be medically unsuitable for recruitment by the DME and RME.

29. We, therefore, regret that we are in no position to come to the aid of the petitioner.

30. The petition is, accordingly, dismissed with no orders as to costs.

AJAY DIGPAUL, J.

C. HARI SHANKAR, J.

JULY 3, 2025/*AS*

Click here to check corrigendum, if any