



2025:DHC:9176-DB



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

+ **W.P.(C) 15804/2025 & CM APPL. 64751/2025**

NAOMI NEIJOUJAM HAOKIP

.....Petitioner

Through: Mr. Kaoliangpou Kamei, Mr.
Jepi Y Chisho and Mr. Seilenmang Haokip,
Advocates.

versus

**STAFF SELECTION COMMISSION
AND ORS.**

.....Respondents

Through: Ms. Manisha Agarwal Narain,
CGSC with Ms. Aditi Singh, GP.

CORAM:

HON'BLE MR. JUSTICE C. HARI SHANKAR

HON'BLE MR. JUSTICE OM PRAKASH SHUKLA

JUDGMENT (ORAL)

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14.10.2025

OM PRAKASH SHUKLA, J

1. The present writ petition has been filed under Article 226 of the Constitution of India seeking the following reliefs:

"a. Pass an order setting aside the Result of the Review Medical Examination dated 24.09.2025.

b. Pass an order directing that the Petitioner's vision as determined by NDMC Charak Palika Hospital be considered as the Petitioner's correct eye/vision test for the purpose of Detailed Medical Examination/ Review Medical Examination of SI CPO Exam 2024.

c. Or in the alternative, direct that the Petitioner's vision be tested at any other public hospital specified by the Hon'ble Court and the result thereof, be considered as the correct vision/eye test of the Petitioner for the purpose of Detailed Medical Examination/Review Medical Examination of SI CPO Exam 2024.

d. Pass any other order deemed fit and proper in the interest of

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Page 1 of 8



2025:DHC:9176-DB



justice.”

2. Succinctly, the facts of the present petition are that a notification dated 04.03.2024 was released by the Respondent 1 for recruitment for the post of Sub-inspector (GD) in Central Armed Police Forces¹ and Sub-Inspector (Executive) in Delhi Police. The petitioner applied and was allotted roll no. 2201014163 in the above recruitment process.

3. The recruitment process was conducted in four stages i.e., Paper I (Preliminary), Physical Standard Test/Physical Eligibility Test², Paper II (Mains) and lastly, a Detailed Medical Examination (DME)³. The petitioner herein had successfully qualified in the first three rounds and had henceforth appeared for the DME whereby the petitioner was declared unfit on the ground of defective vision of 6/9 in both eyes. Pursuant to this, a Review Medical Examination⁴ was conducted on 24.09.2025, which also declared the petitioner as unfit on grounds of defective vision of 6/9 in both eyes.

4. Aggrieved by the aforesaid findings, the petitioner underwent another eye test on 03.10.2025 at the Department of Ophthalmology, NDMC Charak Palika Hospital, Moti Bagh-I⁵, where her vision was recorded as 6/6 in both eyes. Based on this, the petitioner submitted a representation dated 11.10.2025 to Respondent 1 enclosing the record from Charak Palika Hospital seeking reconsideration, however, no response was received from the respondent.

¹ “CAPF” hereinafter

² “PST/PET” hereinafter

³ “DME” hereinafter

⁴ “RME” hereinafter

⁵ “Charak Palika hospital” hereinafter



2025:DHC:9176-DB



5. It is the case of the petitioner that she has successfully cleared Paper I, PST/PET and Paper II and was thus called for the DME where the petitioner was declared unfit in an unreasonable & illegal manner and as such appeared for the RME. The petitioner assails the result of the RME alleging that the petitioner was wrongly declared unfit on account of defective vision in both eyes. It is the petitioner's contention that the eye tests conducted during DME as well as RME were done in haste and therefore the results are erroneous and cannot be relied upon. In support of this contention, the petitioner relies on the report of eye test conducted at Charak Palika hospital where her vision was recorded as 6/6 in both eyes, which is considered perfectly normal.

6. We have considered the submissions of the petitioner and examined the material on record.

7. It is relevant to note that as per para 12.11.2 of the examination notification dated 04.03.2024, the medical standard for eyesight is prescribed as N6 (better eye) and N9 (worse eye) as the minimum near vision. Further, the minimum distant vision should be 6/6 (better eye) and 6/9 (worse eye) of both eyes without any correction (such as glasses or surgery). For reference, it was mentioned that for a right-handed person, the right eye would be the better eye and vice-versa.

8. In this context, reference may be made to the observations made by a Division Bench of this Court in *Staff Selection Commission v Aman Singh*⁶, authored by one of us (C Hari Shankar, J), wherein a



2025:DHC:9176-DB



similar issue was examined and the Court observed that medical officers are the most competent to assess whether a prospective candidate meets the prescribed medical standards for the post and the scope of judicial interference in such cases being limited. The relevant extract of the observations made are reproduced hereinbelow:

“10.38 In our considered opinion, the following principles would apply:

(i) The principles that apply in the case of recruitment to disciplined Forces, involved with safety and security, internal and external, such as the Armed and Paramilitary Forces, or the Police, are distinct and different from those which apply to normal civilian recruitment. The standards of fitness, and the rigour of the examination to be conducted, are undoubtedly higher and stricter.

(ii) There is no absolute proscription against judicial review of, or of judicial interference with, decisions of Medical Boards or Review Medical Boards. In appropriate cases, the Court can interfere.

(iii) The general principle is, however, undoubtedly one of circumspection. The Court is to remain mindful of the fact that it is not peopled either with persons having intricate medical knowledge, or were aware of the needs of the Force to which the concerned candidate seeks entry. There is an irrebuttable presumption that judges are not medical men or persons conversant with the intricacies of medicine, therapeutics or medical conditions. They must, therefore, defer to the decisions of the authorities in that regard, specifically of the Medical Boards which may have assessed the candidate. The function of the Court can only, therefore, be to examine whether the manner in which the candidate was assessed by the Medical Boards, and the conclusion which the Medical Boards have arrived, inspires confidence, or transgresses any established norm of law, procedure or fair play. If it does not, the Court cannot itself examine the material on record to come to a conclusion as to whether the candidate does, or does not, suffer from the concerned ailment, as that would amount to sitting in appeal over the decision of the Medical Boards, which is not permissible in law.

(iv) The situations in which a Court can legitimately interfere with the final outcome of the examination of the candidate by the Medical Board or the Review Medical Board are limited, but well-defined. Some of these may be enumerated as under:



(a) *A breach of the prescribed procedure that is required to be followed during examination constitutes a legitimate ground for interference. If the examination of the candidate has not taken place in the manner in which the applicable Guidelines or prescribed procedure requires it to be undertaken, the examination, and its results, would ipso facto stand vitiated.*

(b) *If there is a notable discrepancy between the findings of the DME and the RME, or the Appellate Medical Board, interference may be justified. In this, the Court has to be conscious of what constitutes a “discrepancy”. A situation in which, for example, the DME finds the candidate to be suffering from three medical conditions, whereas the RME, or the Appellate Medical Board, finds the candidate to be suffering only from one of the said three conditions, would not constitute a discrepancy, so long as the candidate is disqualified because of the presence of the condition concurrently found by the DME and the RME or the Appellate Medical Board. This is because, insofar as the existence of the said condition is concerned, there is concurrence and uniformity of opinion between the DME and the RME, or the Appellate Medical Board. In such a circumstance, the Court would ordinarily accept that the candidate suffered from the said condition. Thereafter, as the issue of whether the said condition is sufficient to justify exclusion of the candidate from the Force is not an aspect which would concern the Court, the candidate's petition would have to be rejected.*

(c) *If the condition is one which requires a specialist opinion, and there is no specialist on the Boards which have examined the candidate, a case for interference is made out. In this, however, the Court must be satisfied that the condition is one which requires examination by a specialist. One may differentiate, for example, the existence of a haemorrhoid or a skin lesion which is apparent to any doctor who sees the candidate, with an internal orthopaedic deformity, which may require radiographic examination and analysis, or an ophthalmological impairment. Where the existence of a medical condition which ordinarily would require a specialist for assessment is certified only by Medical Boards which do not include any such specialist, the Court would be justified in directing a fresh examination of the candidate by a specialist, or a Board which includes a specialist. This would be all the more so if the candidate has himself contacted a specialist who has opined in his favour.*

(d) *Where the Medical Board, be it the DME or the RME or the Appellate Medical Board, itself refers the candidate to a specialist or to another hospital or doctor for opinion, even if the said opinion*



2025:DHC:9176-DB



is not binding, the Medical Board is to provide reasons for disregarding the opinion and holding contrary to it. If, therefore, on the aspect of whether the candidate does, or does not, suffer from a particular ailment, the respondents themselves refer the candidate to another doctor or hospital, and the opinion of the said doctor or hospital is in the candidate's favour, then, if the Medical Board, without providing any reasons for not accepting the verdict of the said doctor or hospital, nonetheless disqualifies the candidate, a case for interference is made out.

(e) Similarly, if the Medical Board requisitions specialist investigations such as radiographic or ultrasonological tests, the results of the said tests cannot be ignored by the Medical Board. If it does so, a case for interference is made out.

(f) If there are applicable Guidelines, Rules or Regulations governing the manner in which Medical Examination of the candidate is required to be conducted, then, if the DME or the RME breaches the stipulated protocol, a clear case for interference is made out.

(v) Opinions of private, or even government, hospitals, obtained by the concerned candidate, cannot constitute a legitimate basis for referring the case for re-examination. At the same time, if the condition is such as require a specialist's view, and the Medical Board and Review Medical Board do not include such specialists, then the Court may be justified in directing the candidate to be re-examined by a specialist or by a Medical Board which includes a specialist. In passing such a direction, the Court may legitimately place reliance on the opinion of such a specialist, even if privately obtained by the candidate. It is reiterated, however, that, if the Medical Board or the Review Medical Board consists of doctors who are sufficiently equipped and qualified to pronounce on the candidate's condition, then an outside medical opinion obtained by the candidate of his own volition, even if favourable to him and contrary to the findings of the DME or the RME, would not justify referring the candidate for a fresh medical examination.

(vi) The aspect of "curability" assumes significance in many cases. Certain medical conditions may be curable. The Court has to be cautious in dealing with such cases. If the condition is itself specified, in the applicable Rules or Guidelines, as one which, by its very existence, renders the candidate unfit, the Court may discredit the aspect of curability. If there is no such stipulation, and the condition is curable with treatment, then, depending on the facts of the case, the Court may opine that the Review Medical Board ought to have given the candidate a chance to have his condition treated and cured. That cannot, however, be undertaken by the Court of its



2025:DHC:9176-DB



own volition, as a Court cannot hazard a medical opinion regarding curability, or the advisability of allowing the candidate a chance to cure the ailment. Such a decision can be taken only if there is authoritative medical opinion, from a source to which the respondents themselves have sought opinion or referred the candidate, that the condition is curable with treatment. In such a case, if there is no binding time frame within which the Review Medical Board is to pronounce its decision on the candidate's fitness, the Court may, in a given case, direct a fresh examination of the candidate after she, or he, has been afforded an opportunity to remedy her, or his, condition. It has to be remembered that the provision for a Review Medical Board is not envisaged as a chance for unfit candidates to make themselves fit, but only to verify the correctness of the decision of the initial Medical Board which assessed the candidate.

(vii) The extent of judicial review has, at all times, to be restricted to the medical examination of the candidate concerned. The Court is completely proscribed even from observing, much less opining, that the medical disability from which the candidate may be suffering is not such as would interfere with the discharge, by her, or him, of her, or his, duties as a member of the concerned Force. The suitability of the candidates to function as a member of the Force, given the medical condition from which the candidate suffers, has to be entirely left to the members of the Force to assess the candidate, as they alone are aware of the nature of the work that the candidate, if appointed, would have to undertake, and the capacity of the candidates to undertake the said work. In other words, once the Court finds that the decision that the candidate concerned suffers from a particular ailment does not merit judicial interference, the matter must rest there. The Court cannot proceed one step further and examine whether the ailment is such as would render the candidate unfit for appointment as a member of the concerned Force.”

(emphasis supplied)

9. It is clear from a perusal of the aforesaid decision that the interference by courts in such matters is generally unwarranted because the standards of medical fitness for recruitment to disciplined forces are stringent and require expert assessment. The Courts, not being medically and technically equipped to reassess such findings, must defer to the opinion of the duly constituted medical boards and intervene only where there is a clear violation of procedure, established



2025:DHC:9176-DB



law, or principles of fair play. The judgment also highlights that the opinions obtained by a candidate from a private or a governmental hospital on their own accord, cannot serve as valid grounds for seeking dismissal and/or review of the observations of the DME and RME.

10. Adverting to the facts of the present case, the petitioner's candidature was rejected on medical grounds for being unfit due to defective vision of 6/9 in both eyes, which has been concurrently upheld by both the DME and RME. The eye test record produced from Charak Palika Hospital also does not justify any reconsideration. Thus, we find that none of the conditions laid down in *Aman Singh* (supra) for judicial interference stand satisfied in the present case.

11. Inasmuch as both DME and RME have concurrently held that the petitioner has 6/9 vision in both eyes, at least 6/6 vision in one eye is a pre-condition for recruitment. Thus, we do not find the petitioner to be entitled to any relief, as prayed for in this Petition.

12. The petition is accordingly dismissed.

OM PRAKASH SHUKLA, J

C.HARI SHANKAR, J

OCTOBER 14, 2025/pa/rjd