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

% *Date of Decision : 23.03.2026*

+ **W.P.(C) 3715/2026 CM APPLs. 18194-96/2026**

SURENDER NAGAR

.....Petitioner

Through: Mr. Jaishree Tandon, Ms. Nilanjani
Tandon and Mr. Arimardhan Sharma,
Advocates

versus

UNION OF INDIA AND ORS

.....Respondents

Through: Mr. Vikrant Nilesh Goyal, Mr. Yash
Basoya, Mr. Inderjeet Singh and Mr.
Kunal Dixit, Advocates

CORAM:

HON'BLE MR. JUSTICE V. KAMESWAR RAO

HON'BLE MS. JUSTICE MANMEET PRITAM SINGH ARORA

MANMEET PRITAM SINGH ARORA, J. (ORAL)

1. The present writ has been filed under Article 226 and Article 227 of Constitution of India 1950, with the following prayers:

“a) Issue a writ of mandamus or any other appropriate writ quashing the invalidation medical board out order. office memorandum dated 07.03.26 and notice issued dated 04.02.26 against the petitioner,

b) Direct the respondents to continue the service petitioner in ITBP with all consequential benefits.

c) Direct the respondents to provide at least 6 month time and medical treatment if any required to the petitioner for reduction of weight with proper dietary control under proper medical supervision.



d) In the alternative, direct the respondents to constitute a fresh medical board in a government hospital/medical college for reassessment of the petitioner.

e) Kindly stay the notice issued dated 04.02.26, and office memorandum issued dated 07.03.26 and maintain status quo till the matter is under consideration before the hon'ble court regarding continuation of service.

f) Pass any other order or direction which this Hon'ble Court may deem fit and proper in the interest of justice

g) Stay the operation of the impugned invalidation medical board out order/ termination of the service of the petitioner and maintain status quo regarding the continuation of the service of the petitioner till the matter is under consideration in the hon'ble court.

h) Allow the petitioner to continue in service.”

2. The case set up by the learned counsel for the Petitioner is as under:

2.1. The Petitioner was enrolled in the ITBP on 26.12.1995 as a Constable (GD) and, was promoted to the rank of Head Constable in 2013.

2.2. Since 2016, the Petitioner has been placed in Low Medical Category (LMC) on account of overweight/obesity, assessed primarily on the basis of Body Mass Index ['BMI'], which was recorded as 31.26 at the relevant time with a weight of 105 kg. It is stated that presently his BMI is 33.5 with a weight of approximately 111 kg.

2.3. It is stated that despite being overweight the Petitioner has continued to perform all assigned duties since 2016 and remained in active service in the said rank and performed all tasks required from him. It is stated that while Petitioner has completed more than 20 years of service, however, he



has approximately 8 years of service remaining before reaching the age of superannuation.

2.4. It is stated that pursuant to recommendations made by the Special Review Medical Board ['SRMB'], Unit MO and the Unit Commandant on 18.03.2024, the Petitioner was produced before the Departmental Rehabilitation Board ['DRB'] between 03.03.2025 to 06.03.2025, which recommended to place the Petitioner before Invalidation Medical Board ['IMB'].

2.5. The IMB was constituted on 08.04.2025 and, upon examination held on 03.05.2025, IMB concluded that Petitioner is a case of obesity since 2016. It held that the Petitioner is permanently unfit for further service in ITBP and recommended that he should be invalidated out on medical grounds as he is incapacitated due to his ailment.

2.6. The Petitioner was served with a notice dated 04.02.2026 putting him to notice as per Rule 26(3) and Rule 17 of the ITBP Force Rules, 1994 with respect to the opinion of the IMB to invalidate him from service on medical grounds. The Petitioner was granted an opportunity of 30 days to place on record a representation against the said opinion of the IMB, along with the opinion of the Government physician not below the rank of Civil Surgeon.

2.7. The Petitioner in reply made a representation dated 28.02.2026 disputing the recommendation of the IMB and sought continuation of service. However, the reply was not supported with the opinion of a Civil Surgeon.

2.8. The Respondent in response issued another notice dated 07.03.2026 and pointed out that Petitioner's representation against the IMB is not



supported by any medical opinion of a Civil Surgeon. In the interest of justice, the Respondents granted further 15 days to the Petitioner and opinion of a Civil Surgeon.

2.9. It is stated that the Petitioner has approached atleast three Government hospitals; however, the doctors there have declined to conduct examination.

2.10. It is stated that the Petitioner underwent diagnostic blood test, wherein all health parameters, including blood pressure, blood sugar, liver and kidney function tests, thyroid profile and other diagnostic indicators, have been reported to be within normal limits, showing that the Petitioner is medically fit.

2.11. The Petitioner contends that BMI, being merely a mathematical index derived from height and weight, cannot be treated as the sole determinative criterion for assessing medical fitness, particularly when all other clinical parameters are within prescribed limits, as it fails to account for variations in muscle mass, bone density and body fat composition, thereby potentially resulting in the misclassification of a physically fit individual as obese.

2.12. It is further contended that obesity, determined solely on BMI, cannot be treated as a disease in the absence of any other medical abnormality and is in any event a curable condition.

3. Learned counsel for the Petitioner relies upon the MHA instructions for medical examination dated 30.07.2007¹ to contend that the parameters for determination of personnel as overweight and obese are set out in this instruction. She refers to paragraph 23.5 (e) and more specifically 23.5 (e) (iii) to stated that even after the medical board determines that the individual

¹ MHA U.O. NO.I.45024/3/2004-pers-II dated 31/07/2007



is obese, the said individual should be granted 48 weeks to reduce his weight to the ideal level and it is only if he fails to comply within 72 weeks that it should place in category P3. She therefore submits that the Petitioner herein should be granted 72 weeks to reduce his weight.

4. The Court has considered the submissions advanced on behalf of the Petitioner and perused the material on record.

5. The Petitioner has placed on record the notice dated 04.02.2026, which sets out the relevant findings of the SRMB held on 18.03.2024 and DRB held in March, 2025 and IMB held on 03.05.2025. The relevant portion of the translated copy of the notice filed on record is extracted below:

You were appointed to the post of Constable (GD) in the Indo-Tibetan Border Police (ITBP) Force on 26.12.1995. Subsequently, following your permanent transfer from the 81st Battalion, you were relieved from duty on 24.05.2025 (A/N) and reported for duty at the 22nd Battalion on 08.06.2025. As you are suffering from Obesity, the Special Review Medical Board, convened at the 38th Battalion, ITBP Force, on 18.03.2024, rendered the following opinion:

"Individual is a case of Obesity since 2016 and is under LMC since then. In 2016 his weight was 105 kg and he has continuously increased his weight to 118kg at present despite being repeatedly advised by Unit AMA and multiple medical boards to reduce weight.....

This shows his negligent attitude towards his health and his unwillingness to reduce weight. Board recommends him to be continued in SIHIAIP3E1 w.e.f. 07.06.2023 for obesity. He is recommended for DRB."

2. Subsequently, a DEPARTMENTAL REHABILITATION BOARD was constituted vide Order No. 43, dated 03.03.2025,



issued by the Headquarters, Central Frontier, ITBP. In the meeting of the aforementioned Board held at the Central Frontier Headquarters, Bhopal, from 03.03.2025 to 06.03.2025, the Board made the following recommendations:

“Individual appear before DRB. He is in LMC since 19.11.2016. His current weight is 115kg (after 03 kg relaxations of clothes) with a height of 182cm and BMI 34.7. As per recommendation of SRMB dated 18.03.2024, Unit MO recommendation and Unit Commandant recommendation, Board recommends further action in accordance with MHA UO No. 45024/03/2004 Pers-11 dated 31.07.2007 and as MHA policy guidelines/office memorandum No. A-12011/126/2014-PERS-III dated 07.09.2017. Hence recommends him to be place P-5 by DRB and recommended to be produced before Invalidation Medical Board (IMB).”

3. Thereafter, on the basis of email no. 11106 dated 08.04.2025 of Director (Medical), Dy Gen ITBPF, Validation Medical Board (IMB) was constituted and in the meeting of the constituted IMC held on 03.05.2025 at 44th Battalion, Indian Military Police Force, the following opinion was given by the Board:-

“Regt. no. 958020161 HC(GD) Surender Nagar. 41 Bn. ITBP a case of obesity.

After scrutiny of his medical documents, investigation reports. findings of various RCMBs and DRB and examination of personnel by the board, board opinion that:

i) Individual is a case of obesity since 2016 at present his HT-182 cm, WT-111Kg & BMI -33.5 KG/M² He was given enough time for reduction of his weight but individual was unable to do so. Individual is irregular in taking treatment this shows his negligent attitude towards his health and his unwillingness to reduce weight.



ii) A person serving in CAPF like ITBP has to be both physically fit as well as mentally healthy to be a first line soldier for combat duty involving arms and ammunition as well as interaction with different people to fulfill required duties against all odds, terrains, environmental vagaries, inhospitable climatic conditions, enemies/terrorists/LWE/Anti-social elements, different law and order situations and overall social conditions created by men and nature in terms of crisis and disaster

iii) On scrutinization of all available documents, history, examination of the individual, opinion given by general medicine of DH Kondagaon (CG) on dated 23.05.2023 and advised for reduce weight and physical exercise and recommendation of DRB and guidelines laid down by MHA (UO no 1.45024/3/2004-Pers-11 dated 31.07.2007), this invalidation medical board submits the opinion that individual is permanently unfit for further service in ITBP Force and to be invalidated out on medical grounds as he is incapacitated due to his ailment with NIL disability.”

6. It is evident from the record that the Petitioner was diagnosed as a case of obesity in 2016 and had been placed in LMC since 19.11.2016. Then, Petitioner’s weight was 105 kgs and he was advised to loose weight. However, the Petitioner failed to pay heed and on 18.03.2024, when the SRMB was held, the Petitioner weighed 118 kgs. In these facts, the SRMB recommended that Petitioner be continued in SIHIAIP3E1 with effect from 07.06.2023 for obesity. The SRMB recommended the Petitioner for DRB.

7. The DRB was held in March, 2025 and his current weight was measured at 115 kgs (after 03kgs relaxation of clothes) and with a height of 182 cm, the BMI was assessed at 34.7. The DRB after taking into consideration the MHA instruction dated 31.07.2007 and MHA policy dated



07.09.2017 recommended that Petitioner be placed in P5 category i.e., permanently unfit and recommended him to be produced before IMB.

8. The IMB was held on 03.05.2025 and on the said date, the Petitioner weighed 111 kgs and his BMI is to that 33.5. The IMB after taking note of his medical history of being obese since 2016 opined that the Petitioner is permanently unfit and would be unable to render services in the areas where ITBP personnel have to serve.

9. Learned counsel for the Petitioner states that presently the Petitioner weighs 111 kgs and her submission before the Court is that Petitioner ought to be granted 72 more weeks to reduce his weight.

10. The facts noted above show that the Petitioner was diagnosed with obesity in 2016 while weighing 105 kgs; his medical category downgraded to LMC in 2016 and has been regularly counselled to reduce his weight. However, the Petitioner instead of losing weight, gained weight and in 2024 weighed 118 kgs leading to holding of his SRMB. The proceedings of the SRMB, led to Petitioner's fitness being downgraded to P3 shows that the Petitioner has been aware that his obesity has led to initiation of proceedings for his invalidation, with the IMB held in May, 2025. However, notwithstanding the above, the Petitioner between 18.03.2024 and March, 2026 has failed to take steps to reduce his weight so as to bring his BMI in the permissible range. In these facts the submission of the Petitioner that he ought to be provided further 72 more weeks is without any justification. The Petitioner had notice of this ailment since 2016 and therefore had sufficient time to take remedial steps and possibly his inability to lose weight despite



notice is due to the fact that he is indeed suffering from the disease of obesity.

11. The Petitioner has contended that BMI cannot be the sole determinative factor for determining him as obese and has relied upon the diagnostic reports of his blood tests. In this regard we note that the Respondents have vide notice(s) dated 04.02.2026 and 07.03.2026 granted sufficient opportunity to the Petitioner to represent against the opinion of the IMB by providing the medical opinion of a government officer not below the rank of a Civil Surgeon. Admittedly, no Civil Surgeon has given an opinion contradicting the conclusion of the IMB that the Petitioner is obese. We may also note that the MHA instructions dated 31.07.2007, relied upon by the Petitioner at Appendix E provides the ideal height weight chart for male and as per the said chart, the ideal weight of the Petitioner ought to have been 77.2 kgs. However, the IMB has not referred to Appendix E and has instead relied upon the BMI measure, which is an enlisted parameter in paragraph 23.5 (e) of the said instruction.

12. As is evident the Petitioner was subjected to a multi-tier medical evaluation process, including consideration by the DRB, recommendations of the SRMB, and thereafter examination by the IMB. The opinions rendered are not shown to be based on a singular or mechanical assessment, but on a cumulative evaluation of the Petitioner's medical condition, conduct and response to treatment over a prolonged period from 2016.

There is no material to indicate mala fides, bias or procedural irregularity vitiating the process. The plea that the decision is based on BMI alone is not borne out from the record, which indicates a holistic



consideration of the Petitioner's medical history, response to treatment and service requirements.

13. The Court would not ordinarily interfere with or sit in appeal over the opinions rendered by expert medical authorities unless such opinion is demonstrated to be manifestly arbitrary, perverse or unsupported by the record, which is not the case in the present petition.

14. In these facts, the decision of the Respondents declaring the Petitioner unfit for further service and recommending his invalidation cannot be said to be vitiated by arbitrariness, so as to warrant interference.

The record reflects that the decision-making process was undertaken in due compliance with the prescribed procedure, inasmuch as the Petitioner was examined by duly constituted medical boards at multiple stages and the final opinion was rendered upon consideration of all relevant factors.

15. In view of the aforesaid, we find no merit in this petition; the petition is dismissed. Pending application(s), if any, are disposed of. No costs.

MANMEET PRITAM SINGH ARORA, J

V. KAMESWAR RAO, J

MARCH 23, 2026/AJ