



2025:DHC:7321-DB



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

+ **W.P.(C) 5475/2025 & CM APPL. 49909/2025**

**THAKUR SARTHAK AJEET SINGH** .....Petitioner

Through: Mr. Ajay Bansal, Ms. Veena Bansal, Mr. Gaurav Yadav and Mr. Sourav Jindal, Advs.

versus

**UNION OF INDIA AND ANR** .....Respondents

Through: Dr. Vijendra Singh Mahndiyan, CGSC for R-1 to 4 and 6-7 with Major Anish Muralidhar and Captain Carolin Johnson (Army).

**CORAM:**

**HON'BLE MR. JUSTICE C. HARI SHANKAR**

**HON'BLE MR. JUSTICE OM PRAKASH SHUKLA**

**JUDGMENT (ORAL)**

% **21.08.2025**

**C. HARI SHANKAR, J.**

1. In response to an advertisement issued by the Union Public Service Commission for recruitment to the National Defence Academy and Naval Academy, the petitioner applied for being inducted into the Armed Forces. The examination took place on 21 April 2024. On the basis thereof, he was initially recommended for admission to the Indian Air Force. Thereafter, as he could not clear the flying test, which was required to be passed for admission to the Air Force, he expressed his desire to be shifted to the Indian Army.



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2. Consequent thereto, the petitioner was examined by a Special Medical Board<sup>1</sup> at the Military Hospital Bhopal on 24 August 2024. He was disqualified for admission both to the Army and the Navy on the ground that he suffered from Multiple Hepatic Calcifications. An unfit medical certificate was issued by the SMB on 24 August 2024. The petitioner was re-examined by an Appeal Medical Board<sup>2</sup> at Pune, which, too, concurred with the view expressed by the SMB, in his report dated 4 October 2024. The writ petition further asserts that a Review Medical Board<sup>3</sup> also concurred with the findings of the SMB and the AMB.

3. The petitioner contends that he had been examined at the Medanta Hospital at Gurugram as well as the All India Institute of Medical Sciences<sup>4</sup>. The opinion of the doctor from the Medanta Hospital reads thus:

“This is to certify that Mr. Sarthak Thakur, 18/M, (UHID: MM02921646) has been seen, examined & investigated by me in detail. As per his Dynamic CT Scan Liver reports, he has small calcified granulomas in the Right Lobe of Liver which do not represent any significant abnormality. His clinical exam & lab tests including LFT, KFT, IGRA (TB test), Viral Serology (HCV, HBsAg-Quantitative), AFP are normal & IGRA test is negative. The small calcified lesions revealed in the right lobe of the liver are old healed lesions of past infection, which are inactive. They are neither going to flare up, nor harm Sarthak in any way, nor will result in any kind of impediment in his duties, health or capabilities now or in the future under any circumstances & on any terrain. There is no treatment needed for these now or later in life, & certainly should not disqualify Sarthak from pursuing any vocation. In general, healed & calcified lesions such as these whether solitary or multiple, of any size, do not adversely affect a person's physical or mental capabilities in any way. Again, this should not be a

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<sup>1</sup> “SMB”, hereinafter

<sup>2</sup> “AMB”, hereinafter

<sup>3</sup> “RMB”, hereinafter

<sup>4</sup> “AIIMS”, hereinafter



reason for disqualification for any type of duties. As far as the liver lesions go, he should definitely get a clean chit on medical grounds. The lab reports & OPD notes are attached. Please do not hesitate to contact me for further details.”

4. Para 83(c) in Section 4 of the Manual on Medical Examination and Medical Standards for various entries into Army, Training Academics and Military Schools, which governs the medical standards required to be satisfied for admission into the Armed Forces, reads thus:

“83. **Liver;**

(a) FIT. Normal echo anatomy of the liver, CBD, IHBR, portal and hepatic veins.

(b) UNFIT

(i) Fatty liver - Grade 2/3 and Grade 1 with abnormal Liver Function Tests.

(ii) Space occupying lesion in the liver (SOL).

(iii) Portal vein thrombosis.

(iv) Evidence of portal hypertension.

(v) **Hepatic calcification\***.

(vi) Hepatomegaly more than 15 cm, if clinically also liver is palpable.

**Note. See (c).**

(c) During Appeal Medical Board/ Review Medical Board, unfit candidates will be Medical subjected to specific investigations and detailed clinical examination. Fitness for specific conditions will be decided as given below:-

(i) SOL liver will be further evaluated with CECT abdomen, LFT and hydatid evaluated serology.

(ii) Disposal will be as follows:-

(aa) Solitary simple cyst less than 2.5 cm will be considered fit, if, LFT is normal and hydatid serology is negative. Solitary cyst more than 2.5 cm will be unfit.

(ab) Solitary cyst of any size with thick walls, septations, papillary projections, debris or calcification will



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be unfit.

(ac) Multiple hepatic cysts of any size will be unfit.

(ad) Any haemangioma will be unfit irrespective of size and location.

**(iii) Hepatic calcifications to be considered fit if solitary and less than one cm with no evidence of active disease like tuberculosis, saracoidosis, hydatid disease or liver abscess based on relevant clinical examination and appropriate investigation. Multiple or cluster size of more than one cm will be considered as unfit.”**

5. Clearly, Hepatic Calcifications are to be disregarded only if they are solitary, less than one cm and there is no evidence of any active disease. In view of the fact that the petitioner was found to be having Multiple Hepatic Calcifications, the petitioner does not fall within the exception envisaged by para 83(c)(iii).

6. The petitioner has, therefore, instituted the present writ petition before this Court.

7. We have heard Mr. Ajay Bansal, learned Counsel for the petitioner at some length.

8. Mr. Bansal has advanced primarily three contentions. The first contention is that in view of the opinions of the AIIMS and Medanta Hospital, the petitioner should be entitled to be medically examined afresh. He has placed reliance on, *inter alia*, the judgements of Division Benches of this Court in *Gaurav Baisoya v Union of India*<sup>5</sup> and *Shubham Sharma v Union of India*<sup>6</sup>, apart from some decisions

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<sup>5</sup> 2023 SCC OnLine Del 43

<sup>6</sup> 2022 SCC OnLine Del 3726



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of other High Courts.

**9.** Mr. Bansal, secondly, challenges the validity of para 83(c)(iii) to the extent it treats all cases of Multiple Hepatic Calcifications as disqualifying a candidate for admission to the Armed Forces.

**10.** The third contention made by Mr. Bansal, which is outside the writ petition, is that the respondents themselves are reconsidering the afore-noted medical standards. He has handed over, across the Bar, a Circular dated 28 July 2025 with the subject “Common Standards of Fitness W.R.T. Medical and Surgical Conditions for Officers Entry in the Armed Forces”.

**11.** Having heard Mr. Bansal, we do not find that any case has been made out, to warrant issuance of notice in this writ petition.

**12.** The petitioner has, against him, concurrent findings of the SMB and AMB. Both have found that he suffers from Multiple Hepatic Calcifications. As the standards stand today, a case of solitary calcification, with no evidence of less than 1 cm, with no evidence of active disease, alone can qualify for admission to the Armed Forces. Multiple Hepatic Calcifications in all cases are a disqualification.

**13.** As such, the respondents have acted in accordance with the applicable medical standards, and no fault can be found with their action.

**14.** The reliance, by the petitioner, on the opinion of the AIIMS and



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the Medanta Hospital cannot take his case any further. It is a settled position that, where the Medical Board and the AMB/RMB have arrived at consistent findings, there is no right to further medical examination. This view was expressed by a Division Bench of this Court in *Km. Priyanka v Union of India*<sup>7</sup> which has been followed by us in *Staff Selection Commission v Aman Singh*<sup>8</sup>.

**15.** It is only where (i) there is a discrepancy between the findings of the Medical Board and the AMB/RMB or (ii) where the petitioner is referred *by the Medical Board or Review Medical Board* for an outside opinion which is in his favour or (iii) where the condition is such as requires a specialist's view and there is no specialist on the panel of Medical Boards, that a case for referring the petitioner to another Medical Board would arise.

**16.** The petitioner's case does not fall within any of these exceptions.

**17.** Accordingly, the fact that the opinions of the Medanta Hospital or the AIIMS may be in the petitioner's favour cannot compel us to interfere.

**18.** Even otherwise, the AIIMS and the Medanta Hospital are not military hospitals. The view of the military hospital has necessarily to be accorded priority and precedence over the view of civil hospitals such as AIIMS and the Medanta Hospital, in so far as the eligibility or

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<sup>7</sup> 2020 SCC OnLine Del 1851

<sup>8</sup> 2024 SCC OnLine Del 7600



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suitability of a candidate for admission to the Armed Forces is concerned.

19. The decision in *Gaurav Baisoya*, on which primarily Mr. Bansal placed relevance, was a case in which there was a discrepancy between the findings of the SMB and the RMB. This was the prime consideration which prevailed with this Court in directing a fresh medical board to be constituted.

20. The only other decision of this Court on which Mr. Bansal places reliance is the decision in *Shubham Sharma*. That was a case where the only disability was a tattoo on the arm of the petitioner. There can be no comparison whatsoever between a case such as that and a case of Multiple Hepatic Calcifications.

21. The decisions on which Mr. Bansal places reliance, therefore, do not carry his case any further.

22. Mr. Bansal has also referred to judgments of certain other High Courts. We do not deem it necessary to advert to the said decisions in light of the view that Division Benches of this Court had taken in *Km. Priyanka* and *Aman Singh*.

23. There is, needless to say, no merit whatsoever in the petitioner's challenge to the standards set in the applicable guidelines. It is not for this Court to sit in appeal over the said guidelines. We are not doctors or medical experts. We cannot therefore modify the guidelines which



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are in existence. The challenge to the guidelines, therefore, has necessarily to fail.

**24.** In so far as the recommendations, under the covering letter dated 28 July 2025 are concerned, they are, at present, mere recommendations. They cannot, therefore, prevail over the applicable standards which have been scrupulously followed by the respondents.

**25.** We, therefore, do not find that this is a fit case which warrants interference by this Court.

**26.** The writ petition is dismissed in *limine* with no order as to costs.

**C. HARI SHANKAR, J.**

**OM PRAKASH SHUKLA, J.**

**AUGUST 21, 2025/gunn**