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

\+ W.P.(C) 16249/2025

SHIVAM PAL .....Petitioner

Through: Mr. Tushar Swami, Mr. Prakhar Singh Sengar and Mr. Shantanu Shukla, Advs.

versus

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

Through: Mr. Dhananjai Rana, CGSC.

CORAM:
HON'BLE MR. JUSTICE C. HARI SHANKAR
HON'BLE MR. JUSTICE OM PRAKASH SHUKLA

JUDGMENT(ORAL)

% 31.10.2025

C.HARI SHANKAR, J.

1. The petitioner has been disqualified from applying for the Agniveervayu Intake 01/2026 on the ground of deranged liver function. The applicable medical standards indicate that mere abnormal liver function tests are not a ground to disqualify a candidate unless the abnormal liver function test indicates that a candidate has fatty liver grade-II/III and grade-I. Mr. Tushar Swami, learned Counsel for the petitioner, relies on a judgment dated 21 August 2025 passed by this Court in ***Thakur Sarthk Ajeet Singh v Union of India***[1] in which the relevant guidelines contained in the Manual of Medical Examinations and Medical Boards[2] issued by the Chief of the Air

[1] **WP (C) 5475/2025**
[2] "the Manual", hereinafter

Staff have been extracted in para 4. They read 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 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."

2. We have heard Mr. Dhananjai Rana, learned CGSC for the respondents. He has placed reliance on para 3.5.3 of the Manual, which reads thus:

> "3.5.3. Diseases of the Liver. If past history of jaundice is noted or any abnormality of the liver function is suspected, full investigation is required for assessment. Candidates suffering from viral hepatitis or any other form of jaundice will be rejected. Such candidates can be declared fit after a minimum period of six months has elapsed provided there is full clinical recovery; HBV and HCV status are both negative and liver functions are within normal limits. History of recurrent jaundice and hyperbilirubinemia of any nature is unfit."

3. Para 3.5.3 merely sets out procedures to be followed and do not set out the standards on the basis of which the liver function of the candidate is to be assessed to determine his eligibility for being recruited to the Air Force as Agniveervayu.

4. Clearly, mere abnormal liver function tests do not constitute a basis to disqualify a candidate, unless the case falls within one of the six categories below clause 83(b). Mr. Rana, learned CGSC appearing for the respondents, is not able to controvert this position.

5. In that view of the matter, we dispose of this writ petition with a direction for the petitioner to be re-examined by a Medical Board to be constituted by the Army Research and Referral Hospital[3], which would arrive at a finding as to whether the petitioner falls within any of the disqualifications envisaged in para 83 of Section 4 of the

[3] "R&R Hospital", hereinafter

Manual of Medical Examinations and Medical Boards, reproduced by us *supra*, so as to disqualify him from being recruited as an Agniveervayu.

6. Let the petitioner present himself before the Medical Superintendent of the R&R Hospital on 5 November 2025 at 10.30 am. The Medical Superintendent, R&R Hospital would ensure that the petitioner is examined by a competent hepatologist/gastroenterologist, who would arrive at a finding in the above regard.

7. Mr. Tushar Swami, learned Counsel appearing for the petitioner undertakes on behalf of his client to abide by the outcome of the result of the test by the R&R Hospital. Needless to say, if the R&R Hospital finds the petitioner not to suffer from any disabling disqualification, further proceedings towards the petitioner's selection and appointment would follow.

8. The writ petition is disposed of in the aforesaid terms.

9. *Dasti.*

C.HARI SHANKAR, J

OM PRAKASH SHUKLA, J

OCTOBER 31, 2025/*gunn*