PROCEDURE ON CONDUCT OF MEDICAL BOARDS

- 1. A candidate recommended by the Services Selection Board (SSB) will undergo a medical examination (Special Medical Board) by a Board of Service Medical Officers. Only those candidates, who are declared fit by the Medical Board, will be admitted to the Academy. However, the President of the Medical Board will intimate the candidates declared unfit of their results and the procedure for an Appeal Medical Board (AMB) to be completed in a Command Hospital or equivalent within 42 days of Special Medical Board.
- 2. Candidates who are declared unfit by the Appeal Medical Board (AMB) may request for Review Medical board (RMB) within one day of completion of Appeal Medical Board. The President AMB will intimate about the procedure of challenging the findings of AMB. The candidates will also be intimated that sanction for holding of Review Medical Board (RMB) will be granted at the discretion of DGAFMS based on the merit of the case and that RMB is not a matter of right. The candidate should address the request for RMB if he/ she so desires to DMPR, Integrated Headquarters Ministry of Defence (Navy), Sena Bhawan, Rajaji Marg, New Delhi 110011 and a copy of the same is handed over to the President of AMB. O/o DGAFMS will inform the date and place (Delhi and Pune only) where the candidate will appear for a RMB.
- 3. The following investigations will be carried out mandatorily during Special Medical Board. However, Medical Officer / Medical Board examining a candidate may ask for any other investigation as required or indicated:-
 - (a) Complete Haemogram
 - (b) Urine RE/ME
 - (c) X Ray chest PA view
 - (d) USG abdomen & pelvis

PHYSICAL STANDARDS FOR OFFICERS (MALE/ FEMALE) ON ENTRY

- 4. The candidate must be physically fit according to the prescribed physical standards.
 - (a) The candidate must be in good physical and mental health and free from any disease/ disability which is likely to interfere with the efficient performance of duties both ashore and afloat, under peace as well as war conditions in any part of the world.
 - (b) There should be no evidence of weak constitution, bodily defects or underweight. The candidate should not be overweight or obese.

5. Weight

For entries published after 19 Oct 20 (SSC Jun 2021 - AT Course), for revised Height / Weight standards. The following standards are applicable for only those entries whose notifications were published prior to 19 Oct 20:-

TABLE - I
HEIGHT / WEIGHT STANDARDS FOR NAVY (MALE)

			AGE IN YEARS											
Height in Cms	15	16	18	20	22	24	26	28	30	32	34	36	38	40
152	43	44	45	46	47	48	48	49	49	50	50	50	51	51
155	44	45	46	47	49	50	50	51	51	52	52	52	53	53
157	45	46	47	49	50	51	51	52	53	53	53	54	54	55
160	46	47	48	50	51	52	53	53	54	54	56	56	56	57
162	47	48	50	52	53	54	54	55	55	56	56	57	57	58
165	49	50	52	53	55	56	56	57	57	58	58	58	59	59
168	51	52	53	55	57	58	58	58	59	59	60	60	61	61
170	52	53	55	57	58	59	60	60	61	61	62	62	62	63
173	54	55	57	59	60	61	62	62	62	63	64	64	65	65
175	56	57	59	61	62	62	63	64	64	65	66	67	67	67
178	58	59	61	62	63	64	65	66	67	67	68	69	69	70
180	60	61	63	64	65	66	67	68	69	70	71	71	72	72
183	62	63	65	67	67	68	70	71	72	72	73	74	75	75
185		66	67	69	70	71	72	73	74	75	76	77	77	78

188	68	70	71	72	74	75	76	77	78	79	80	81	81
190	70	72	73	74	76	78	79	80	81	82	82	83	84
193	72	74	76	77	78	80	81	82	83	84	85	86	87
195	75	77	78	79	81	82	83	85	86	87	88	89	90

TABLE - II
HEIGHT / WEIGHT STANDARDS FOR NAVY (FEMALE)

	AGE IN YEARS									
Height in Cms	17-18	20	25	30	35	40	45	50	55	60
148	36	38.5	41	42.5	44	45	46.5	47	48.5	49
150	38.5	40.5	41.5	43.5	45	46	47	48	49	50
153	40.5	42	43.5	45.5	46.5	48	48.5	49.5	50.5	52
155	42	43	44.5	46	47.5	49	49.5	50	51.5	52.5
158	43	45	46.5	48	49.5	50.5	51.5	52	53	54.5
160	45	46	47.5	49	50.5	51.5	52.5	53	54	55.5
163	46	47.5	49	50.5	51.5	52.5	53	54	55.5	56.5
165	47.5	49	51	52	53	54	55	56	57	58
168	49	50	52	54	55.5	57	58	59	60	61
170	50	51	53	55	56	58	59	60	61	62
173	52	53	55	56	57	59	60	61	62	63
175	53.5	55	56.5	57.5	59	60.5	62	63	64	65

Notes:-

- 1. The principle of "Average" will be utilized for calculating body weight for in between height.
- 2. "Individual's weight is considered normal if it is within ± 10 % departure from average weight given in the table I and II". However, in individuals with heavy bones and broad build as well as individuals with thin build, but otherwise healthy this may be relaxed to some extent on merit.
- 6. During the medical examination of candidates, the following principal points will be ensured:-
 - (a) The candidate is sufficiently intelligent.
 - (b) The hearing is good and that there is no sign of any disease of ear, nose or throat.
 - (c) Vision in either eye is up to the required standard. His/ her eyes are bright, clear and with no obvious squint or abnormality. Movements of eye balls should be full and free in all directions.
 - (d) Speech is without impediment.
 - (e) There is no glandular swelling.
 - (f) Chest is well formed and that his/her heart and lungs are sound.
 - (g) Limbs of the candidates are well formed and fully developed.
 - (h) There is no evidence of hernia of any degree or form.
 - (j) There is free and perfect action of all the joints.
 - (k) Feet and toes are well formed.
 - (I) Absence of any congenital malformation or defects.
 - (m) He/she does not bear traces of previous acute or chronic disease pointing to an impaired constitution.
 - (n) Presence of sufficient number of sound teeth for efficient mastication.
 - (p) Absence of any disease of the Genito-Urinary tract.
- 7. Major defects for rejection are as under:-
 - (a) Weak constitution, imperfect development, congenital malformation, muscular wasting.
 - (b) Malformation of the head including deformity from fracture or depression of the bones of the skull.
 - (c) Disease or abnormal curvature of the spine, Scoliosis more than 10 degree by Cobb's method till less than 25 years of age and 15 degree in more than 25 years of age.

Note:- X-Ray of the spine will not be carried out as a routine. It will however be done on the advice of the Surgical Specialist wherever indicated.

(d) Skeletal deformity either hereditary or acquired and disease or impairment of function of bones or joints.

Note:- Rudimentary cervical rib causing no signs or symptoms is acceptable.

- (e) Asymmetry of torso or limbs, abnormality of locomotion including amputation.
- (f) Deformity of feet and toes.
- 8. *Eye*.
 - (a) Deformity or morbid condition of the eye or eyelids that is liable for aggravation or recurrence.
 - (b) Manifest squint of any degree.
 - (c) Active trachoma or its complication or sequelae.

(d) Visual acuity below prescribed standards. *Notes:*-

(i) Visual standards for Officers' Entry into Executive Branch will be as follows:-

SI No	Criteria	NDA (Navy) / NDA (NA) / 10+2 (B Tech) / DESSC (Pilot) / DESSC (Observer)	CDSE/ NCC, DESSC GS (X), / PC GS (X) / DESSC (Hydro)	NAIC	Law / Logistics / Education / IT	ATC
(a)	Uncorrected vision	6/6 6/9	6/12 6/12	6/60 6/60	6/60 6/60	6/9 6/9
(b)	Corrected vision	6/6 6/6	6/6 6/6	6/6 6/12	6/6 6/12	6/6 6/6
(c)	Limits of Myopia	- 0.75	- 1.5	- 3.5	- 3.5	- 0.75
(d)	Limits of hypermetropia	+ 1.5	+ 1.5	+ 3.5	+ 3.5	+ 3.0
(e)	Binocular vision	Ш	III	Ш	II	Ш
(f)	Limits of Colour perception	I	1	П	III	11

(ii) Visual Standards for Officers' Entry into Technical Branches will be as follows:-

SI No	Criteria	Common En	Graduate Entry (University / DPC / SSC)	Naval Constructor/ Architect
(a)	Uncorrected vision	6/6 6/9	6/24 6/24	6/60 6/60
(b)	Corrected vision	6/6 6/6	6/6 6/6	6/12 6/12
(c)	Limits of Myopia	- 0.75	- 3.5	- 3.5
(d)	Limits of hypermetropia	+ 1.5	+ 3.5	+ 3.5
(e)	Binocular vision	III	III	III
(f)	Limits of Colour perception	I	II	II

- (iii) Kerato-Refractory Surgery (LASIK) maybe allowed for Short Service Commission intake of officers in the following categories:
 - a. Observer Entry

- b. ATC Entry
- C. NAI
- d. Law
- **e.** Logistics
- f. Education
- g. Graduate Entry Technical
- h. Naval Constructor/ Architect
- (iv) LASIK may be allowed subject to the following conditions:
 - **a.** Surgery should not have been carried out before 20 years of age.
 - b. Uncomplicated surgery at least 12 months before examination.
 - C. Axial length equal to or less than 25.0 mm by IOL Master or A scan
 - **d.** Post LASIK corneal thickness measured by Pachymeter should not be less than 450 microns.
 - **e.** Individuals with high refractive errors (> 6D) prior to LASIK are to be excluded.
 - Normal retinal examination.
- (v) LASIK is not permitted for candidates of NDA [10+2 (B Tech)]; CDSE [GS (X) / Hydrography] and Pilot entries.
- (vi) <u>NEW VISION STANDARDS (NVS-20)</u>
 - (a). The Indian Navy has revised its Vision Standards which will be applicable to candidates whose SSB & medical testing (SMB/AMB/RMB) are scheduled to commence wef Aug 20 onwards for INET/SSC, Law, Sports, Musician, CDSE, NDA, NDA/INA & 10+2(B.Tech entries (training scheduled at Indian Naval Academy in Jan 21 and thereafter for all SSB/Medical batches in future).
 - (b) The New Visual Standards (NVS 20) For Various Officers' Entries Of Indian Navy are tabulated below:-

Ser	Criteria	NDA(Navy)/ NDA (NA)/ 10+2 (B Tech)/ CW	Aviation#	ATC	CDSE/NCC/ DESSC (GS/X)/ PC (GS/X)/ DESSC (Hydro)	Graduate Entry Technical/ Branches	NAIC/Naval Constructor/ Architect/ Law/Logistics/ Education/IT/ Musician	SD List Commission
(aa)	Uncorrected Vision	6/6 6/9	6/6 6/9	6/9 6/9	6/12 6/12	6/24 6/24	6/60 6/60	6/36 6/36
(ab)	Corrected Vision	6/6 6/6	6/6 6/6	6/6 6/6	6/6 6/6	6/6 6/6	6/6 6/6	6/6 6/6
(ac)	Limits of Myopia	-0.75 D Sph	Nil	- 0.75 D Sph	-1.5 D Cyl	-3.5 D Sph	-3.5 D Sph	-3.5 D Sph
(ad)	Limits of Hypermetropia	+1.5 D Cyl	+1.5 D Cyl	+1.5 D Cyl	+1.5 D Cyl	+3.5 D Cyl	+3.5 D Cyl	+3.5 D Cyl
(ae)	Astigmatism (within limits of myopia and hypermetropia)	± 0.75 D Sph/ Cyl	+0.75 D Cyl	± 0.75 D Sph/Cyl	$\pm 0.75 D$ Sph/ Cyl	<u>+</u> 2.5 D Sph/ Cyl	<u>+</u> 2.5 D Sph/ Cyl	$\pm 2.5 D$ Sph/ Cyl
(af)	Binocular Vision	III	III	III	III	III	III	III
(ag)	Colour Perception	I	I	II	I	II	II	II
(ah)	LASIK/Equivalent Surgery	No	Yes	Yes	Yes	Yes	Yes	Yes
(aj)	Radial Keratotomy	No	No	No	No	No	No	No

- # Additional details for Vision Standdares for Aviation entry are indicated at para 4.
 - (c) The other conditions for revised vision standards are as follows:-
 - (i) The Kerato Refractive Surgery (PRK/LASIK/SMILE) is permissible for all branches at the time of recruitment, with following conditions:-
 - Surgery should not have been carried out before 20 years of age.
 - Uncomplicated Surgery at least 12 months before examination (Certificate mentioning the type of refractive surgery, date of surgery and pre-operative refractive error from concerned eye centre is to be produced by the candidate at the time of recruitment medical examination).
 - Axial length less than or equal to 26 mm by IOL Master or A Scan.
 - Residual corneal thickness measured by Pachymeter should not be less than 450 microns.
 - Residual refraction less than or equal to \pm 1.0 D Sph or Cyl provided within the permissible limit for the category applied for. However, for Pilot and Observer entries, the residual refraction should be nil.
 - Pre-operative refractive error not more than +/-6.0D
 - Normal retinal examination

Note: Kerato-Refractory Surgery (PRK, LASIK, SMILE) is not acceptable for special cadres such as submarine, diving and MARCO.

- (ii) Candidates who have undergone Radial Keratotomy are permanently unfit for all branches.
- (d) Visual Standards for Naval Aircrew at the time of recruitment are as under:-

(i) Visual Acuity: Uncorrected 6/6 in one eye and 6/9 in the other, corrected to 6/6

(ii) Colour Perception : I (MLT)

(iii) Myopia : Nil

(iv) Limits of Hpermetropia : + 1.5.0 D Cyl

(v) Astigmatism : +0.75 D Cyl

(vi) Maddox Test

At 6 Meters : Exo 6.00

Eso 6.00

Hyper/Hypo 1.00

At 33 cms : Exo 16.00

Eso 6.00

Hyper/Hypo 1.00

(vii) Bishop H Test : Exo 0.4

Eso 05

(viii) Convergence : Upto 9 Cms

(ix) Cover Test

For distance : Lateral Divergence/ Convergence recovery

Rapid and complete

For Near : Lateral Divergence/Convergence recovery

Rapid and complete

(x) Binocular Vision : Grade III

9. Ear, Nose and Throat.

a. Ear. History or recurrent ear ache, tinnitus or vertigo, impairment of hearing, disease of the external meatus including atresia, exostosis or neoplasm which prevent a thorough examination of the drum, unhealed perforation of the tympanic membrane, aural discharge or sign of acute or chronic suppurative otitis media, evidence of radical or modified radical mastoid operation.

Notes:-

- 1. A candidate should be able to hear forced whisper at a distance of 610 cms with each ear separately with back to the examiner.
- 2. The operation of tympanoplasty with or without cortical mastoidectomy for a dry central perforation of tympanic membrane is considered curative once the graft has taken up provided tympanic membrane is intact, mobile with free field hearing of 610 cms in each ear separately and a normal hearing threshold on pure tone audiometry. A gap of three months is considered adequate after operation of complete healing and graft stabilization. For fitness, the candidate should also show a normal compliance on Tympanometry.
- (b) Nose. Disease of the bones or cartilages of the nose, marked nasal allergy, nasal polyps, atrophic rhinitis, disease of the accessory sinuses and nasopharynx.

Note:- Simple nasal deformity not causing disfigurement, minor septal deviation not interfering with nasal airway and small traumatic septal perforation which are asymptomatic are acceptable.

- (c) *Throat.* Disease of throat palate, tongue, tonsils, gums and disease or injury affecting the normal function of either mandibular joints.
- (d) Disease of the larynx and impediment of speech. Voice should be normal. Candidates with pronounced stammer will not be accepted.
- 10. *Dental Condition*. It should be ensured that a sufficient number of natural and sound teeth are present for efficient mastication.
 - (a) A candidate must have a minimum of 14 dental points to be acceptable in order to assess the dental condition of an individual. Dental points less than 14 are a cause of rejection. The dental points are allotted as under for teeth in good opposition with corresponding teeth in the other jaw:-

- (i) Central incisor, lateral incisor, canine, 1st Premolar, 2nd Premolar and under development third molar with 1 point each.
- (ii) 1st molar and 2nd molar and fully developed 3rd molar with 2 points each.
- (iii) When all 32 teeth are present, there will be a total count of 22 or 20 pints according to whether the third molars are well developed or not.
- (b) The following teeth in good functional apposition must be present in each jaw:-
 - (i) Any 4 of the 6 anteriors.
 - (ii) Any 6 of the 10 posteriors.

All these teeth must be sound/ repairable.

- (c) Candidates suffering from severe pyorrhea will be rejected. Where the state of pyorrhea is such that in the opinion of the Dental Officer, it can be cured without extraction of teeth, the candidates may be accepted. A note about the affected teeth is to be inserted by the Medical/Dental Officer in the medical documents.
 - (d) Artificial dentures are not to be included while counting the dental points.

11. *Neck*.

a. Enlarged glands, tubercular or due to other diseases in the neck or other parts of the body.

<u>Note:-</u> Scars of operations for the removal of tubercular glands are not a cause for rejection provided there has been no active disease within the preceding five years and the chest is clinically and radiologically clear.

- **b.** Disease of the thyroid gland.
- C.
- 12. Skin and Sexually Transmitted Infection (STI).
 - a. Skin disease unless temporary or trivial.
 - **b.** Scars which by their extent or position cause or are likely to cause disability/ or marked disfigurement.
 - C. Hyperhydrosis Palmar, plantar or axillary.
 - d. Congenital, active or latent sexually transmitted diseases.

<u>Note:</u> In cases with old healed scar over the groin or penis/ vagina suggestive of past STI, blood will be tested for STI (Including HIV) to exclude latent Sexually Transmitted Disease.

- 13. Respiratory System.
 - a. History of chronic cough or Bronchial Asthma.
 - b. Evidence of pulmonary Tuberculosis.
 - **C.** Evidence of diseases of bronchi, lungs or pleurae detected on radiological examination of the chest will disqualify the candidate.

Note:- An X-Ray examination of the chest will be carried out.

- 14. Cardio-Vascular System.
 - (a) Functional or organic disease of the heart or blood vessels, presence of murmurs or clicks on auscultation.
 - (b) Tachycardia (Pulse Rate persistently over 96/min at rest), bradycardia (Pulse Rate persistently below 40/ min at rest), any abnormality of peripheral pulse.
 - d. Blood pressure exceeding 140 mm Hg systolic or 90 mm Hg diastolic.

e.

- 15. Abdomen.
 - (a) Evidence of any disease of the gastro-intestinal tract, enlargement of liver, gall bladder or spleen, tenderness on abdominal palpation, evidence/ history of peptic ulcer or previous history of extensive abdominal surgery. All officer entry candidates are to be subjected to the Ultra Sound Examination of the abdominal and pelvic organs for detecting any abnormalities of the internal organs.
 - (b) Inguinal or any other hernia or tendency thereto.

<u>Note:</u> Those who have been operated for hernia/ hydrocele, varicose veins, varicocele may be declared fit provided:-

- I. Six months have elapsed since the operation for hernia and six weeks for other minor operations. Documentary proof to this effect is to be produced by the candidate.
- ii. General tone of the abdominal musculature is good.
- iii. There has been no recurrence of hernia or any complication connected with the operation.
- iii. Fistula-in-Ano, Anal Fissure and Hemorrhoids unless satisfactory treatment has been carried out.
- 16. Genito-Urinary System.
- **a.** Any evidence of disease of genital organs.
- **b.** Bilateral undescended testis, unilateral undescended testis retained in the inguinal canal or at the external abdominal ring unless corrected by operation. Absence of one testis is not a cause for rejection unless the testis has been removed on account of disease or its absence has affected the physical or mental health of the candidate.
- **C.** Disease or malformation of the kidneys or urethra.
 - (d) Incontinence of urine and nocturnal enuresis.
 - (e) Any abnormality on examination of urine including albuminuria or glycosuria.
 - 17. Central Nervous System.
- a. Organic disease of Central Nervous System.
- **b.** Tremors.
- **C.** Candidates with history of fits and recurrent attacks of headache/ migraine will not be accepted.

- 18. *Psychiatric Disorders*. History or evidence of mental disease or nervous instability in the candidate or his family.
- 19. Women Candidates. They should not be pregnant and should also be free from gynaecological disorders such as primary or secondary Amenorrhea/ Dysmenorrhoea/ Menorrhagia etc. All women candidates will be subjected to ultra Sound Examination of the abdominal and pelvic organs for detecting any abnormalities of the internal organs.