IN THE HIGH COURT OF ORISSA AT CUTTACK

WP(C) No.28286 of 2026
CNR No. ODHC010670942026

Harapriya Das ..... ***Petitioner***
Mr. Pabitra Kumar Dutta,
Advocate

-versus-

State of Odisha and others ..... ***Opposite Parties***
Mr. R. C. Mohanty,
Advocate for O.P. No.2,
Mr. Amitav Mishra,
Advocate,
Mr. S. B. Panda, AGA,
Mr. P. K. Parhi, DSGI along
with Mr. S. M. Pattnaik,
CGC for O.Ps.4 5 and 7

CORAM:
HON'BLE THE CHIEF JUSTICE
AND
HON'BLE MR. JUSTICE CHITTARANJAN DASH

ORDER
10.09.2026

Order No.

02. 1. Pursuant to the order dated 8th September 2026, Mr. R. C. Mohanty, learned counsel appearing for the Director, Directorate of Medical Education & Training (DMET)-opposite party No.2 produced the Eligibility Certificate issued by the Medical Assessment Board dated 22nd August 2026, wherein the Medical Board opined as such:

> *"xxx xxx xxx*
> *Patient is having β Thalassemia Trait, which is an asymptomatic carrier state, without any significant functional disability. Thus does not meet the prescribed criteria for Certificate of disability.*
> *xxx xxx xxx"*

2. From a bare reading of the contents of the said opinion expressed by the Medical Assessment Board, it is manifest that the petitioner is suffering from 'β Thalassemia Trait', which is an asymptomatic carrier state without impeding any significant functional disability. The Board proceeded to arrive at the final opinion that it does not meet the prescribed criteria of Certificate of Disability. In order words, the Medical Assessment Board arrived at the conclusion that the said "β Thalassemia Trait" does not come under the disability, and therefore, the certificate relied upon by the petitioner, issued by the competent authority, was impliedly given no credence thereto.

3. Since the said report of the Medical Assessment Board is produced before us, this Court takes it as a part of the record, and considering the fact that the petitioner has ranked in the NEET examination and the counselling is going on, this Court proceeded to decide the veracity, genuinity and legality of the said report of the

Medical Assessment Board in order to dispense justice in a timely manner. We do not go into the rigour of procedural law as the substantial justice overshadows the technical justice.

4. There is no hesitation in our mind that the opinion of the Medical Assessment Board was restrictive on the functional disability meaning thereby a locomotor disability without considering whether the 'Thalassemia' is a disability or not. In order to bring clarity for the future action to be taken by the Medical Assessment Board and the Appellate Board, we adumbrated the salient provisions of the Rights of Persons with Disabilities Act, 2016 and the allied Circulars, and/or Rules and/or Guidelines issued by the competent authorities in this regard. The primary object of the said Act is to give effect to the Proclamation on the Full Participation and Equality of the People with Disabilities in all spheres of the system including an admission in the educational institution as well as a public employment. Section 2(r) of the said Act defines the "person with benchmark disability" in the following:

> ***2. Definitions.—***
>
> ***"****(r) "person with benchmark disability" means a person with not less than forty per cent. of a specified disability where specified disability has not been defined in measurable terms and includes a person with disability where specified disability has been defined in measurable terms, as certified by the certifying authority."*

5. Section 2 clause-(zc) defines a “specified disability” as the disabilities specified in the Schedule.

6. The conjoint reading of both the definitions engrafted into the said Act leaves no ambiguity in our mind that a person, who is suffering from a specified disability of not less than 40%, comes within the bracket of the person with the benchmark disability. It is a cardinal principle of law that once the ‘words’ and ‘expressions’ are defined in the Act, wherever such ‘words’ or ‘expressions’ are used in the said Act, it should be assigned with the same meaning and no external aid should be taken in ascertaining the meaning thereof. The said Act has defined both the “person with benchmark disability” and the “specified disability”, and therefore, the word “specified disability” appearing under the definition of a benchmark disability, it should be given the same meaning as defined in the said Act.

7. The Schedule appended to the said Act clearly, explicitly and lucidly includes ‘Thalassemia’ as a “Blood disorder” coming within the “specified disability” to mean a group of inherited disorders characterised by reduced or absent amounts of haemoglobin. The moment the Act has categorised several categories of the disability, the authorities cannot bank upon one disability over the other as each disability stands on its own independent footing, and cannot be

subsumed into the other. The "Physical disability" is given as a separate category in the said schedule together with other categories of disability, namely, the "Intellectual disability", "Mental behaviour", "Neurological disability" and the "Blood disorder".

8. The opinion expressed by the Medical Assessment Board was focused on the locomotor disability as the Thalassemia does not impact the functional ability of a person, which, in our opinion, cannot be a ground to discard the claim of the petitioner that he comes under the category of the "specified disability". The moment the statute has included a particular disease as a disability, the assessment by the Medical Assessment Board should be restricted on the same, and it cannot transgress such boundaries and include the other category of the disability as a benchmark disability.

9. The aforesaid concept is further fortified in the Amendment Notification dated 13th May, 2019 issued by the Board of Governors in Super-Session of Medical Council of India, where it has been expressly indicated that the term "Persons with Disabilities" is to be used instead of the "Physically Handicapped" and the table appended thereto also includes 'Thalassemia' as a specified disability. However, the percentages of disability have been clearly and explicitly incorporated therein for the simple reason that if a

specified disability comes within the benchmark disability, it should be not less than 40%. Probably taking into account the aforesaid aspect, the column relating to a "not eligible under the PwD quota", it is indicated that if Thalassemia disease is less than 40%, it would not come within the purview of the eligibility. They have also restricted the percentage of disability as an eligibility for the medical course, if such disease ranges between 40-80%. Any person suffering from a specified disease where the percentage exceeds 80% is also kept outside the purview of the eligibility criteria. The rational and the reasonability is manifest from the aforesaid Notification that the medical course being a specialised course dealing with human life and human wellbeing, a person suffering from a high percentage of specified disability may not be competent to discharge the duties and the functions after obtaining the degree from a recognised college. Apart from the same, there is no challenge to such Notification, and therefore, we may safely proceed that in the event the specified disability exceeds the percentage as indicated therein, the candidate would be outside the purview of the said quota.

10. The cumulative effect of the various provisions of the said Act and the said Notification having relied upon hereinabove, the report of the Medical Assessment Board that the "β Thalassemia Trait"

does not come under the category of the disability and not fit for issuance of any certificate in this regard runs counter to the spirit of the Act and the provisions as enumerated hereinbefore. We, at the cost of repetition, made it clear that once the 'Thalassemia' is included within the category of "specified disability" and the expression specified disability having used in the definition of a person with benchmark disability and the specified disability having separately and independently defined in the said Act, it should mean and include the disease specified in the schedule.

11. We, therefore, set aside the report of the Medical Assessment Board having given contrary to the provisions of the law. The Opposite party No.2 is directed to constitute a fresh Medical Assessment Board, and the petitioner shall appear before the said Board, and the Board shall assess the percentage of the disability in order to ascertain if the petitioner can be brought within the ambit of the eligibility criterion as indicated hereinabove.

12. Since the counselling is ongoing, any delay in this regard may be counterproductive and impinge upon the right of the petitioner. We, therefore, direct the opposite party No.2 to complete the exercise within four days from date. It goes without saying that the petitioner shall offer herself before the Medical Assessment Board

for examination, and shall not adopt any dilatory practice in this regard.

13. Consequent upon the same, the notice dated 25th august, 2026 issued by the Chairman, Odisha Joint Entrance Examination-2026 (Annexure-4) is quashed and set aside in respect of the petitioner.

14. With these observations, the instant writ petition is disposed of.

(Harish Tandon)
Chief Justice

(Chittaranjan Dash)
Judge

M. Panda