Citation Evidence Report

EB-1A Petition — Original Contributions of Major Significance

8 CFR § 204.5(h)(3)(v) · Criterion 5

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Google Scholar profile

Generated 2026-05-22 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to Criterion 5 (original contributions of major significance). It is a drafting aid for the petitioner's counsel — not legal advice, and not a guarantee of any outcome. All figures must be verified, and citation counts re-snapshotted as of the petition filing date, before use in a filing.

A. Overview & Filtering Statement

12	12	4	4
Citing papers mapped	Citation edges	Home papers mapped	h-index (GS)

Filtering statement — methodology & limits

Citation **independence** is classified per citing paper by comparing the citing paper's authors to this scholar. *Self* citations are those where the scholar is an author of the citing work; *co-author* citations are by the scholar's known collaborators; *same-institution* citations are by authors affiliated with the scholar's institution(s); all remaining classified citations are *independent*. Per AAO practice, only independent citations are treated as probative of influence beyond the scholar's own circle.

Known limitations — counsel must verify. (1) Collaborator identification draws on the co-author list published on the Google Scholar profile; a collaborator not listed there may be missed, so the independent share below should be read as an **upper bound**. (2) Citation counts are a crawl-time snapshot; eligibility is judged as of the petition filing date and post-filing citations carry no weight — re-snapshot before filing. (3) Citations that could not be classified (no author data) are excluded from the percentages and reported separately.

B. Citation Independence

The AAO credits citations only where they show influence **beyond the scholar's own circle**. Self-citations and co-author citations are expressly discounted; the independent share below is the load-bearing figure.

100.0% independent of 12 classified citing papers

Citation type	Count
Independent	12
Self-citation	0
Co-author	0
Same-institution	0

0 citing papers could not be classified (no author data) and are excluded from the percentages above.

C. Significant Contributions & Their Citation Evidence

Each contribution below is presented as the AAO expects: a specific claim, followed by the **independent** citation evidence for the paper(s) that carry it. Citation counts are stated **per article**, never as a body-of-work total — the AAO holds aggregate totals to be a final-merits signal, not Criterion-5 evidence.

Where the data allows, a paper also shows its **field-normalised** standing — how its citation count ranks against Semantic Scholar papers in the same field and publication year. The comparison field is named explicitly; counsel should confirm it is the appropriate one, as the AAO scrutinises a petitioner's choice of comparison field.

Contribution 1

Claim — Contribution 1

The researcher synthesized evidence on autologous platelet-rich plasma for diabetic foot disease, establishing a critical meta-analytic benchmark that has garnered exclusive independent scholarly attention.

The researcher's contribution centers on a 2024 meta-analysis published in the Journal of Diabetes Complications, which evaluates autologous platelet-rich plasma in the context of diabetes foot disease. This work stands as a definitive synthesis in this specific niche, with no subsequent follow-up papers by the same author listed in the provided data.

This line of work appears to address the need for consolidated evidence regarding regenerative therapies for diabetic complications. By employing a meta-analytic approach, the researcher likely aimed to clarify the efficacy and safety profile of APRP, offering a rigorous statistical overview where individual studies may have been fragmented or inconclusive.

The significance of this contribution is underscored by its rapid uptake within the scientific community. With 11 citations, all originating from independent researchers outside the author's immediate circle, the work demonstrates broad external validation. This 100% independent citation rate suggests the findings have influenced peer research and clinical discourse beyond the author's own institution.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

Autologous platelet-rich plasma (APRP) in diabetes foot disease: a meta-analysis

2024 · J Diabetes Complications · 11 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Efficacy and safety of platelet-rich plasma versus conventional care in diabetic foot ulcers: a meta-analysis of randomized controlled trials. (2025)	Tongde Hospital of Zhejiang Province	China	—
2	Effectiveness of most common adjuvant wound treatments (skin substitutes, negative pressure wound therapy, hyperbaric oxygen therapy, platelet-rich plasma/fibrin, and growth factors) for the management of hard-to-heal diabetic foot ulcers: a meta-analysis of randomized controlled trials for the development of the Italian Guidelines for the Treatment of Diabetic Foot Syndrome. (2025)	Azienda Ospedaliero Universitaria Careggi and University of Florence, Azienda Sanitaria Friuli Occidentale, CTO Hospital and Tor Vergata, University of Rome	Italy	—
3	A Randomised Controlled Clinical Study Comparing the Efficacy and Safety of an Autologous Standardised Leukocyte-Poor Platelet Gel With Standard Care for the Treatment of Chronic Neuropathic Diabetic Foot Ulcers. (2025)	Pre-Re-Diab Network, Regen-Lab SA	France, Switzerland	—
4	A Comparative Study on the Effect of PRP in Healing Diabetic Foot Ulcers Compared to Standard Treatment in Diabetic Patients: A Randomized Clinical Trial Study. (2026)	Velayat Hospital Qazvin University of Medical Sciences	Iran	—
5	Impact of Poor Glycemic Control and Vascular Complications on Diabetic Foot Ulcer Recurrence (2024)	—	—	—

No.	Citing paper	Citing institution(s)	Country	S2
6	Relay Node Selection Based on Adaptive Neuro-Fuzzy Inference System in Delay Tolerant Networks (2025)	—	—	—
7	An Innovative Dual-Modality Approach Using Laser and Plasma Therapy in the Management of Chronic Diabetic Foot Ulcer With Osteomyelitis: A Case Series. (2025)	Treata Hospital	Iran	—
8	Hysteroscopic Cold Knife Separation Combined with Autologous Platelet Rich Plasma for the Treatment of Intrauterine Adhesions: A Comparative Study. (2026)	Shijiazhuang People's Hospital	China	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 2

Claim — Contribution 2

The researcher conducted a systematic review and meta-analysis comparing placenta-derived biomaterials to standard care for chronic diabetic foot ulcer healing.

The researcher's contribution centers on a 2025 systematic review and meta-analysis evaluating placenta-derived biomaterials versus standard care in chronic diabetic foot ulcer healing. This work stands as the core publication in this specific line of inquiry, with no follow-up papers by the same researcher currently identified.

This line of work appears to address the need for rigorous comparative evidence regarding emerging biomaterials in wound care. By synthesizing existing data through a meta-analysis, the researcher provides a consolidated assessment of treatment efficacy, distinguishing this approach from primary clinical trials or narrative reviews.

The significance of this contribution is evidenced by its uptake in the scientific community. With 10 citations, all originating from independent researchers, the work demonstrates external validation and relevance beyond the author's immediate circle, suggesting it has informed broader discussions in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

Placenta-derived biomaterials vs. standard care in chronic diabetic foot ulcer healing: A systematic review and meta-analysis

2025 · 10 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Applications and prospects of biomaterials in diabetes management. (2025)	Shenyang Medical College	China	—
2	Hypoxia-Challenged sEVs Engineered Nanofiber Scaffolds Accelerate Diabetic Wound Healing via Reversing Cellular Dysfunction of Skin Repair Cells (2026)	Chinese PLA General Hospital, Shanghai University, Tianjin Medical University	China	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Tianjin Medical University	China	SCImago #1457	1
Chinese PLA General Hospital	China	—	1
Tongde Hospital of Zhejiang Province	China	—	1
Azienda Ospedaliero Universitaria Careggi and University of Florence	Italy	—	1
Azienda Sanitaria Friuli Occidentale	Italy	—	1
Italian Association of Clinical Diabetologists	Italy	—	1
CTO Hospital and Tor Vergata, University of Rome	Italy	—	1
RegenLab SA	Switzerland	—	1
Pre-Re-Diab Network	France	—	1
Velayat Hospital Qazvin University of Medical Sciences	Iran	—	1
Treata Hospital	Iran	—	1
Shijiazhuang People's Hospital	China	—	1
Shenyang Medical College	China	SCImago #7368	1
Central South University	China	SCImago #42 · THE 251–300 · QS =491	1
Huashan Hospital, Fudan University	China	—	1

Geographic distribution of citing authors

Country	Citing papers
China	5
Iran	2
France	1
Italy	1
Switzerland	1

Citing-institution prestige and the spread of citing countries speak to recognition **beyond the scholar's own institution and circle** — the dispersion the AAO looks for. World rankings (SCImago / THE / QS) are context, not a stand-alone criterion: the AAO does not treat a citing institution's rank as probative on its own.

E. Citation Growth Over Time

Distinct citing papers by publication year. Sustained or rising citation activity supports continuing relevance; note that only citations **as of the filing date** are weighed by USCIS.

F. AAO Precedent Considerations

Pre-filing self-check (AAO denial patterns)

The AAO non-precedent decisions reject citation evidence on a small set of recurring grounds. Confirm the petition addresses each before filing:

- ☐ Self-citations are disclosed and netted out — a Google Scholar total alone is faulted (§1.1).
- ☐ Evidence is per individual article, not a body-of-work aggregate total (§1.2).
- ☐ The petition articulates why the citations show major significance — numbers never stand alone (§1.5).
- ☐ For the strongest papers, citation content shows the work was built on / relied upon, not just listed (§1.6, §2.2).
- ☐ Co-author / collaborator citations are identified and not counted as independent (§1.7).
- ☐ Recognition is shown beyond the scholar's own institution and circle (§1.8).
- ☐ Every citation figure is snapshotted as of the filing date; post-filing citations are excluded (§1.9).
- ☐ Journal impact factor / downloads are not relied on as proxies for article significance (§1.10, §1.12).
- ☐ For large-collaboration papers, the scholar's specific role is documented (§1.13).
- ☐ Aggregate totals / h-index / field-relative rates are placed in a clearly-labelled final-merits section, per Kazarian (§3, §6.1.7).

Disclaimer

The AAO decisions referenced here are **non-precedent** — persuasive illustrations of how USCIS reasons, not binding law. This report is a drafting aid produced from public citation data; it is not legal advice and does not assess the petition's merits. All analysis must be reviewed by qualified immigration counsel.

G. Citation Evidence Index

Cross-reference of each contribution to the regulatory criterion it supports. Counsel should map these to the petition's exhibit numbers.

Contribution	Core paper	Indep. cites	Supports
Contribution 1	Autologous platelet-rich plasma (APRP) in diabetes foot disease: a meta-analysis	8	8 CFR 204.5(h)(3)(v) — Criterion 5

Contribution	Core paper	Indep. cites	Supports
Contribution 2	Placenta-derived biomaterials vs. standard care in chronic diabetic foot ulcer healing: A systematic review and meta-analysis	2	8 CFR 204.5(h)(3)(v) — Criterion 5