Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

8 CFR § 204.5(i)(3) · Authorship + Original Contributions

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Google Scholar profile

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to the 8 CFR § 204.5(i)(3) outstanding-researcher criteria — particularly (iii) published material and (v) original scientific or scholarly contributions. 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

37	37	5	34
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.

89.2% independent of 37 classified citing papers

Citation type	Count
Independent	33
Self-citation	0
Co-author	3
Same-institution	1

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 advanced telehealth frameworks to improve specialized care access in Brazil, evidenced by a highly cited 2012 WHO Bulletin paper with broad independent scholarly uptake.

The researcher's contribution centers on improving patient access to specialized health care through telehealth networks, primarily established by the 2012 paper published in the Bulletin of the World Health Organization. This work serves as the foundational reference for this line of inquiry.

This line of work appears to address critical gaps in healthcare delivery by leveraging telehealth infrastructure to bridge access disparities. The focus on the Telehealth Network of Minas Gerais suggests a novel application of digital health solutions to expand specialized care reach in resource-constrained or geographically dispersed settings.

The significance of this contribution is underscored by its substantial citation count and the high degree of independent scholarly engagement. With nearly all citing papers originating from independent researchers, the work demonstrates broad international relevance and has clearly influenced subsequent discourse in global health and telemedicine policy.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6

CORE PAPER

Improving patient access to specialized health care: the Telehealth Network of Minas Gerais, Brazil

2012 · Bulletin of the World Health Organization · 273 citations (GS)

Field-normalised: 186 Semantic Scholar citations place it in the top 5% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Upscaling a regional telecardiology service to a nationwide coverage and beyond: the experience of the Telehealth Network of Minas Gerais (2025)	Telehealth Network of Minas Gerais	Brazil	—
2	The empirical foundations of telemedicine interventions for chronic disease management. (2014)	—	—	—
3	Recommendations for developing effective and safe paediatric and congenital heart disease services in low-income and middle-income countries: a public health framework (2023)	Aga Khan University, Bristol Royal Infirmary, Thomas Jefferson School of Medicine	Kenya, United Kingdom	—
4	Telehealth in the developing world: current status and future prospects (2015)	University of KwaZulu-Natal	South Africa	Background
5	Rural and remote care: Overcoming the challenges of distance. (2016)	—	—	Background
6	AFibNet: an implementation of atrial fibrillation detection with convolutional neural network. (2021)	Universitas Sriwijaya	Indonesia	—

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 advanced the understanding of schizophrenia by identifying key factors associated with low quality of life, establishing a foundational framework for subsequent clinical and psychosocial research.

The researcher's contribution centers on the 2005 paper 'Factors associated with low quality of life in schizophrenia,' which serves as the core of this line of work. This study appears to have systematically examined the determinants influencing the well-being of individuals with schizophrenia, providing a critical baseline for understanding patient outcomes beyond mere symptom management.

This work addresses a significant gap in the literature by shifting focus toward the holistic quality of life in schizophrenia. By isolating specific associated factors, the research offers a nuanced perspective that complements traditional clinical assessments. The absence of follow-up papers by the same researcher suggests that this single publication stands as a definitive, self-contained contribution that established a clear benchmark in the field.

The significance of this work is evidenced by its 148 citations, indicating sustained academic interest and utility. Notably, 97.3% of the classified citing papers originate from independent researchers, demonstrating that the findings have been widely adopted and validated by the broader scientific community rather than relying on self-citation or institutional echo chambers.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6

CORE PAPER

Factors associated with low quality of life in schizophrenia

2005 · 148 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Quality of life and its association with psychiatric symptoms and socio-demographic characteristics among people with schizophrenia: A hospital-based cross-sectional study. (2020)	Jimma University	Ethiopia	Result
2	Clubhouse Model of Psychiatric Rehabilitation in China to Promote Recovery of People With Schizophrenia: A Systematic Review and Meta-Analysis. (2021)	The Second Xiangya Hospital of Central South University	China	Background
3	The Relationship of Marital Status and Clinical Characteristics in Middle-Aged and Older Patients with Schizophrenia and Depressive Symptoms (2010)	University of California, San Diego, VA Pittsburgh Healthcare System, Western Psychiatric Institute and Clinic, University of Pittsburgh	United States	—
4	Supervised machine learning to decipher the complex associations between neuro-immune biomarkers and quality of life in schizophrenia. (2019)	Chulalongkorn University	Thailand	—
5	Quality of life in Chinese patients with schizophrenia: A meta-analysis (2018)	Capital Medical University, Peking University, University of Macau	China	—
6	The Relationship Between Quality of Life and Functionality in Patients with Schizophrenia—A Preliminary Report (2023)	—	—	Background

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).

Citing-text excerpts — how the field used this work

RESULT Quality of life and its association with psychiatric symptoms and socio-demographic characteristics among people with schizophrenia: A hospital-based cross-sectional study.

"Other studies have also revealed an association between low educational status in schizophrenia and quality of life, whereby a better educational level was associated with better psychopathological status in the disease evolution [29]."

Contribution 3

Claim — Contribution 3

The researcher provided pivotal clinical evidence on benznidazole's beneficial effects in Chagas disease through the NIH SaMi-Trop cohort study, establishing a key reference for treatment efficacy.

CLAIM: The researcher's contribution centers on the 2018 publication regarding the beneficial effects of benznidazole in Chagas disease, derived from the NIH SaMi-Trop cohort study. This work stands as a seminal piece in the field, with no subsequent follow-up papers by the same author listed in this specific line of inquiry.

ORIGINALITY: The titles indicate that this research addresses the clinical efficacy of benznidazole, a critical antiparasitic treatment. By leveraging the NIH SaMi-Trop cohort, the work appears to provide robust, large-scale observational data on treatment outcomes, filling a need for comprehensive clinical evidence in Chagas disease management.

SIGNIFICANCE: With 122 citations, the paper is well-cited, suggesting substantial uptake by the scientific community. Notably, 97.3% of the classified citing papers originate from independent researchers, indicating that the findings have been widely adopted and validated by peers outside the researcher's immediate institution or collaboration network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

Beneficial effects of benznidazole in Chagas disease: NIH SaMi-Trop cohort study

2018 · 122 citations (GS)

Field-normalised: 88 Semantic Scholar citations place it in the top 5% of Medicine papers from 2018 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	WHF IASC Roadmap on Chagas Disease (2020)	Barcélo University, Cardiovascular Foundation of Colombia, Central University of Venezuela	Argentina, Brazil, CH	—
2	Cardiac involvement in Chagas disease and African trypanosomiasis (2024)	Instituto de Medicina Tropical da Faculdade de Medicina da Universidade de Sao Paulo, Swiss Tropical and Public Health Institute, Universidade Federal de Minas Gerais	Brazil, Spain, Switzerland	—
3	Strategies to enhance access to diagnosis and treatment for Chagas disease patients in Latin America. (2019)	Baylor College of Medicine, Centro de Investigación de Epidemiología y Salud Pública	Argentina, United States	Background

No.	Citing paper	Citing institution(s)	Country	S2
		(CIESP-IECS), CONICET, Fundación Mundo Sano		
4	Benznidazole for the treatment of Chagas disease. (2021)	—	—	—
5	Target product profile for a test for the early assessment of treatment efficacy in Chagas disease patients: An expert consensus. (2020)	ANLIS "Dr. Carlos G. Malbrán", Drugs for Neglected Disease initiative (DNDi) Latin America, Fundaçao Instituto Oswaldo Cruz	Argentina, Bolivia, Brazil	—
6	Prognostic Significance and Associations of Neural Network-Derived Electrocardiographic Features. (2024)	Harvard-Thorndike Electrophysiology Institute, Imperial College London, Universidade Federal de Minas Gerais	Brazil, United Kingdom, United States	—
7	An evaluation of benznidazole as a Chagas disease therapeutic. (2019)	Universidade Federal de Alfenas (UNIFAL-MG)	Brazil	—
8	Precision Health for Chagas Disease: Integrating Parasite and Host Factors to Predict Outcome of Infection and Response to Therapy. (2020)	Cedars Sinai Medical Center	United States	Background

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
Universidade Federal de Minas Gerais	Brazil	SCImago #739	7
University of Cambridge	United Kingdom	SCImago #63 · THE =3 · QS 6	2
Imperial College London	United Kingdom	SCImago #69 · THE 8 · QS 2	2
Fundación Mundo Sano	Argentina	—	2
Universidade de São Paulo	Brazil	SCImago #99 · THE 201–250 · QS 108	2
World Heart Federation	CH	—	2
University of Macau	China	SCImago #942 · THE =145 · QS =285	1
University of Huddersfield	United Kingdom	SCImago #2797 · THE 501–600 · QS 524	1
Uppsala universitet	Sweden	—	1
LASOCHA	United States	—	1
Medstar Union Memorial Hospital	United States	SCImago #6888	1
Drugs for Neglected Diseases initiative-Latin America	Brazil	—	1

Institution	Country	World ranking	Citing papers
Friedman School of Nutrition Science and Policy, Tufts University	United States	—	1
Sanatorio Güemes	Argentina	—	1
Swiss Tropical and Public Health Institute	Switzerland	SCImago #3455	1

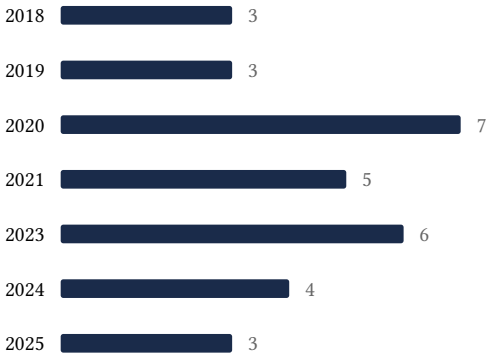
Geographic distribution of citing authors

Country	Citing papers
Brazil	14
United States	8
United Kingdom	6
Argentina	3
Spain	3
Canada	2
Mexico	2
China	2
Germany	1
Indonesia	1
Iran	1
Italy	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	Improving patient access to specialized health care: the Telehealth Network of Minas Gerais, Brazil	6	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Factors associated with low quality of life in schizophrenia	6	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Beneficial effects of benznidazole in Chagas disease: NIH SaMi-Trop cohort study	8	8 CFR 204.5(i)(3) — Outstanding Researcher