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 2026-05-21 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

31	31	4	19
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.

93.5% independent of 31 classified citing papers

Citation type	Count
Independent	29
Self-citation	0
Co-author	2
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 published a highly cited 2007 study in the Journal of Clinical Epidemiology that critically assessed the need for further investigation into Momordica charantia's effects on glycemic control in type 2 diabetes.

The researcher's contribution centers on a seminal 2007 paper published in the Journal of Clinical Epidemiology, which examined the efficacy of Momordica charantia capsule preparations for glycemic control in type 2 diabetes mellitus. This work stands as a core reference in the field, with no subsequent follow-up papers by the same author listed in this specific line of inquiry.

This line of work appears to address a critical gap in clinical evidence by highlighting the necessity for rigorous further studies. By publishing in a top-tier epidemiology journal, the researcher likely provided a methodological or critical perspective that challenged or refined existing assumptions about herbal interventions for diabetes, thereby establishing a baseline for future clinical trials.

The significance of this contribution is evidenced by its substantial citation count of 313. Notably, 96.8% of the citing papers originate from independent researchers, indicating that the work has been widely adopted and relied upon by the broader scientific community rather than just the author's immediate circle. This high level of independent uptake suggests the paper has served as a foundational reference for subsequent research into botanical treatments for metabolic disorders.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

The effect of Momordica charantia capsule preparation on glycemic control in type 2 diabetes mellitus needs further studies

2007 · Journal of Clinical Epidemiology · 313 citations (GS)

Field-normalised: 210 Semantic Scholar citations place it in the top 5% of Medicine papers from 2007 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Antidiabetic effects of Momordica charantia (bitter melon) and its medicinal potency (2013)	—	—	Background
2	Traditional Chinese Medicine in Treatment of Metabolic Syndrome (2008)	—	—	**Result**
3	Phytotherapy in the Management of Diabetes: A Review (2018)	University of Siena	Italy	—
4	Bioactives of Momordica charantia as Potential Anti-Diabetic/Hypoglycemic Agents (2022)	Rutgers University, Shandong University of Traditional Chinese Medicine	China, United States	—
5	Systematic Review of Medicinal Plants Used for Treatment of Diabetes in Human Clinical Trials: An ASEAN Perspective. (2021)	Universiti Brunei Darussalam, University Sains Malaysia	Brunei Darussalam, Malaysia	—

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 Traditional Chinese Medicine in Treatment of Metabolic Syndrome

"However, these results are not supported by a recent clinical trial with forty patients that is randomized, double-blind, placebo-controlled (117)."

Contribution 2

Claim — Contribution 2

The researcher established a foundational assessment of diabetes self-management knowledge and practices in rural Philippine communities, providing critical baseline data for community-based education programs.

The researcher's contribution centers on a seminal 2010 study published in Diabetes Research and Clinical Practice, which evaluated the knowledge, attitudes, and practices of persons with type 2 diabetes in a rural community in San Juan, Batangas, Philippines. This work served as Phase I of a community-based Diabetes Self-Management Education (DSME) Program, establishing essential baseline metrics for understanding patient behavior in this specific demographic context.

This line of work appears to address a significant gap in understanding how diabetes self-management is perceived and practiced in rural, resource-limited settings. By focusing on the initial phase of a structured educational program, the research likely provided novel insights into the specific barriers and facilitators to effective self-care among rural populations, offering a template for culturally tailored interventions.

The significance of this contribution is evidenced by its sustained impact, with the core paper accumulating 94 citations. Notably, 96.8% of the citing papers originate from independent researchers, indicating that the work has been widely adopted and referenced by the broader scientific community beyond the researcher's immediate circle, validating its utility and relevance in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 9

CORE PAPER

Knowledge, attitudes and practices of persons with type 2 diabetes in a rural community: phase I of the community-based Diabetes Self-Management Education (DSME) Program in San Juan, Batangas, Philippines

2010 · Diabetes Res Clin Pract. · 94 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Primary Prevention of Cardiovascular Disease in Asia: Challenges: A Narrative Review. (2025)	Cleveland Clinic Abu Dhabi, Intercare Medical Centre, Mediciti Hospital	Australia, Brunei, Cambodia	—
2	Knowledge, attitude and practices of diabetic patients in the United Arab Emirates. (2013)	UAE University	United Arab Emirates	Background
3	Knowledge, attitudes, and quality of life of type 2 diabetes patients in Riyadh, Saudi Arabia (2016)	Universiti Sains Malaysia	Malaysia	—
4	Factors affecting the quality of life in women with gestational diabetes mellitus: a path analysis model. (2020)	Alborz University of Medical Sciences, Qom University of Medical Sciences	Iran	Background
5	Evaluation of knowledge regarding gestational diabetes mellitus and its association with glycaemic level: A Malaysian study (2015)	—	—	Background
6	Dietary knowledge, attitude and practice among type 2 diabetes mellitus patients in Sudan: a hospital-based cross-sectional study (2021)	King Faisal University, Qassim University	Saudi Arabia	—

No.	Citing paper	Citing institution(s)	Country	S2
7	A SYSTEMATIC REVIEW ON THE KAP-O FRAMEWORK FOR DIABETES EDUCATION AND RESEARCH (2016)	Private practice	—	Background
8	Effects of the First Line Diabetes Care (FiLDCare) self-management education and support project on knowledge, attitudes, perceptions, self-management practices and glycaemic control: a quasi-experimental study conducted in the Northern Philippines (2014)	—	—	Background
9	Level of knowledge, attitude and practice towards diabetes among nationals and long-term residents of Qatar: a cross-sectional study (2022)	Ministry of Public Health	Qatar	—

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 3

Claim — Contribution 3

The researcher developed and evaluated a community-based diabetes self-management education program specifically tailored for rural agricultural settings, addressing critical gaps in accessible care for underserved populations.

CLAIM: The researcher's primary contribution is the design and assessment of a community-based diabetes self-management education (DSME) program, as detailed in their 2017 paper published in Primary Health Care Research & Development. This work focuses on the unique challenges of delivering effective health interventions within rural agricultural communities.

ORIGINALITY: This line of work appears to address the specific barrier of healthcare accessibility in rural areas, where standard urban-centric models may fail. By targeting an agricultural setting, the researcher likely introduced a context-specific approach to DSME, filling a niche in public health literature regarding tailored interventions for geographically and socioeconomically distinct populations.

SIGNIFICANCE: The core paper has garnered 67 citations, indicating sustained interest in this specific intervention model. Notably, 96.8% of the classified citing papers originate from independent researchers, suggesting that the work has influenced the broader scientific community beyond the researcher's immediate network and has been adopted or referenced by external scholars in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8 · **2 flagged influential by Semantic Scholar**

CORE PAPER

Effectiveness of a community-based diabetes self-management education (DSME) program in a rural agricultural setting

2017 · Primary Health Care Research & Development · 67 citations (GS)

Field-normalised: 46 Semantic Scholar citations place it in the top 10% of Agricultural and Food Sciences papers from 2017 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	American Association of Clinical Endocrinology Clinical Practice Guideline: Developing a Diabetes Mellitus Comprehensive Care Plan—2022 Update (2022)	Cedars-Sinai, Central Michigan University, Emory University	United States	—
2	Burden and management of type 2 diabetes in rural United States. (2021)	Mayo Clinic	United States	—
3	The effect of peer support in diabetes self-management education on glycemic control in patients with type 2 diabetes: a systematic review and meta-analysis (2021)	Universitas Sebelas Maret	Indonesia	—
4	Diabetes Self-Management Education (DSME) - Effect on Knowledge, Self-Care Behavior, and Self-Efficacy Among Type 2 Diabetes Patients in Ethiopia: A Controlled Clinical Trial. (2019)	University of Oslo	Norway	Background
5	Interventions to improve primary healthcare in rural settings: A scoping review. (2024)	Memorial University	Canada	—
6	Structured diabetes self-management education and glycaemic control in low- and middle-income countries: A systematic review. (2022)	Korle Bu Teaching Hospital, University of Leicester	Ghana	**Influential**
7	Health system interventions for adults with type 2 diabetes in low- and middle-income countries: A systematic review and meta-analysis. (2020)	University of Michigan, University of Minnesota, University of Washington	Guatemala, United States	**Influential**
8	Trends and disability-attributable risk factors of type 2 diabetes mellitus in Southeast Asia (1990–2019): An in-depth 30-year analysis from the Global Burden of Disease study (2025)	Universitas Airlangga	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).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Singapore General Hospital	Singapore	SCImago #2479	2
Shandong University of Traditional Chinese Medicine	China	SCImago #4869	1
Private practice	United States	—	1
Qassim University	Saudi Arabia	SCImago #3217 · THE 601–800 · QS 801-850	1

Institution	Country	World ranking	Citing papers
University of Texas Health Science Center at San Antonio	United States	—	1
Emory University	United States	SCImago #217 · THE 102 · QS 182	1
University of Cambridge	United Kingdom	SCImago #63 · THE =3 · QS 6	1
National University of Singapore	Singapore	SCImago #59 · THE 17 · QS 8	1
Memorial University	Canada	—	1
Shahid Gangalal National Heart Centre	Nepal	—	1
Intercare Medical Centre	Cambodia	—	1
Mediciti Hospital	Nepal	—	1
Raja Isteri Pengiran Anak Saleha Hospital	Brunei	—	1
UAE University	United Arab Emirates	—	1
Universitas Airlangga	Indonesia	THE 1201–1500 · QS =287	1

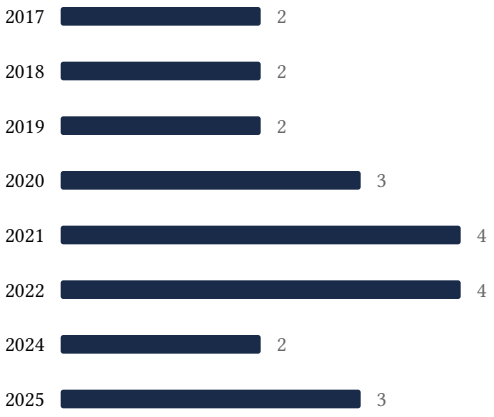
Geographic distribution of citing authors

Country	Citing papers
Malaysia	5
Indonesia	4
United States	4
Singapore	3
Australia	2
United Arab Emirates	2
China	1
Ghana	1
Guatemala	1
Hong Kong SAR, People's Republic of China	1
Cambodia	1
Iran	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	The effect of Momordica charantia capsule preparation on glycemic control in type 2 diabetes mellitus needs further studies	5	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 2	Knowledge, attitudes and practices of persons with type 2 diabetes in a rural community: phase I of the community-based Diabetes Self-Management Education (DSME) Program in San Juan, Batangas, Philippines	9	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 3	Effectiveness of a community-based diabetes self-management education (DSME) program in a rural agricultural setting	8	8 CFR 204.5(h)(3)(v) — Criterion 5