

Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

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Unknown affiliation

[Google Scholar profile](#)

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to Prong 2 of Matter of Dhanasar (the petitioner is well positioned to advance the proposed endeavor) — the prong where past citation evidence is most probative. 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

19 Citing papers mapped	19 Citation edges	3 Home papers mapped	120 h-index (GS)
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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.

89.5% independent of 19 classified citing papers

Citation type	Count
Independent	17
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 established a seminal international classification and grading system for age-related maculopathy and degeneration, providing a standardized framework that has become a foundational reference in ophthalmology.

The researcher’s primary contribution is the development of a standardized international classification and grading system for age-related maculopathy and age-related macular degeneration, as detailed in a 1995 paper published in Survey of Ophthalmology. This work serves as the cornerstone of the provided evidence, establishing a unified terminology and structural approach to diagnosing and categorizing these conditions.

This line of work appears to address the critical need for consistency in clinical assessment and research reporting. Prior to such standardization, the lack of a universal grading system likely hindered comparative studies and clinical communication. By proposing a comprehensive framework, the researcher provided a novel methodological tool that enabled more precise definition and evaluation of disease stages across different populations.

The significance of this contribution is underscored by its extensive uptake in the scientific community, with the core paper accumulating 2,365 citations. Notably, analysis of citing literature reveals that 100% of the classified citations originate from independent researchers, indicating that this framework has been widely adopted and relied upon by the broader global ophthalmology community rather than just the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4 · 1 flagged influential by Semantic Scholar

CORE PAPER

[An international classification and grading system for age-related maculopathy and age-related macular degeneration](#)

1995 · Survey of Ophthalmology · 2,365 citations (GS)

Field-normalised: 1,953 Semantic Scholar citations place it in the top 1% of Medicine papers from 1995 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Optical coherence tomography angiography (2018)	Doheny Eye Institute, University of California - Los Angeles, Luigi Sacco Hospital, University of Milan, Massachusetts Institute of Technology	Italy, United States	Result
2	Consensus Definition for Atrophy Associated with Age-Related Macular Degeneration on OCT: Classification of Atrophy Report 3 (2018)	Duke University, Hôpital Lariboisière, AP-HP, Université Paris 7-Sorbonne Paris, National Eye Institute	France, Germany, United Kingdom	—
3	A common haplotype in the complement regulatory gene factor H (HF1/CFH) predisposes individuals to age-related macular degeneration. (2005)	—	—	—
4	Age-related macular degeneration. (2008)	—	—	—

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 Optical coherence tomography angiography

“Abbreviations AF Autofluorescence AMD Age-related macular degeneration CCD Charge-coupled device CME Cystoid macular edema CMOS Complementary metal oxide semiconductor CNV Choroidal neovascularization CRORA Complete loss of the RPE and outer retina FA Fluorescein angiography ICG Indocyanine green ICGA Indocyanine green angiography MNV Macular neovascularization; includes choroidal neovascularization and Type 3 neovascularization Optical OCT coherence tomography OCTA Optical coherence tomography angiography Prog Retin Eye Res.”

Contribution 2

Claim – Contribution 2

The researcher established a foundational, multi-continental analysis of risk factors for age-related macular degeneration, providing a seminal reference point for global ophthalmic epidemiology.

The researcher’s contribution centers on a seminal 2001 paper titled 'Risk factors for age-related macular degeneration: pooled findings from three continents.' This work represents a significant effort to synthesize data across diverse geographic regions to identify key determinants of this prevalent eye condition. By pooling findings from three continents, the study appears to address the need for broader, more generalized epidemiological insights beyond single-region studies. The titles suggest a focus on comparative analysis and the identification of universal versus region-specific risk factors, offering a comprehensive baseline for understanding the disease's etiology on a global scale. The significance of this work is evidenced by its substantial citation count of 1,578, indicating it has become a standard reference in the field. Furthermore, analysis of citing literature reveals that 100% of the classified citations originate from independent researchers, underscoring the work's broad acceptance and utility across the global scientific community rather than within a single institutional network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6 · 1 flagged influential by Semantic Scholar

CORE PAPER

[Risk factors for age-related macular degeneration: pooled findings from three continents](#)

2001 · 1,578 citations (GS)

Field-normalised: 1,135 Semantic Scholar citations place it in the top 1% of Medicine papers from 2001 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Global prevalence of age-related macular degeneration and disease burden projection for 2020 and 2040: a systematic review and meta-analysis (2014)	Cedars-Sinai Medical Center, Queen Mary University of London, Singapore National Eye Centre	Singapore, United Kingdom, United States	Background
2	Age-related macular degeneration (2012)	—	—	—
3	Age-related macular degeneration (2021)	Queen's University of Belfast, University of Bonn, University of Utah	Germany, United Kingdom, United States	—
4	Epidemiology of age-related macular degeneration (AMD): associations with cardiovascular disease phenotypes and lipid factors. (2016)	University of Utah	United States	Methodology
5	Recent developments in age-related macular degeneration: a review. (2017)	—	—	Background
6	Aging of the eye: Lessons from cataracts and age-related macular degeneration (2024)	—	—	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

METHODOLOGY Epidemiology of age-related macular degeneration (AMD): associations with cardiovascular disease phenotypes and lipid factors.

"...Tomany et al. 2004 [111], Ulaş et al. 2013 [149] Klein et al. 1993 [108], Klein et al. 2003 [131], Tomany et al. 2004 [111], Cheung et al. 2014 [148] Smith et al. 2001 [110], Delcourt et al. 2001 [129], Abalain et al. 2002 [151], Tan et al. 2007 [118], Munch et al. 2013 [153], Erke et al. 2014..."

Contribution 3

Claim — Contribution 3

The researcher established a foundational epidemiological benchmark for open-angle glaucoma prevalence in the US adult population through a seminal, highly cited study.

CLAIM: The researcher's primary contribution is the publication of a seminal study titled "Prevalence of open-angle glaucoma among adults in the United States" in Archives of Ophthalmology (2004), which serves as a core reference point for understanding this condition's distribution.

ORIGINALITY: This work appears to address a critical need for accurate, large-scale epidemiological data regarding open-angle glaucoma within the United States. By quantifying prevalence among adults, the study likely provided a standardized baseline that was previously lacking or insufficiently defined in the literature, enabling more precise public health assessments.

SIGNIFICANCE: The study has garnered 1,436 citations, indicating substantial influence within the field. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has been widely adopted and relied upon by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Prevalence of open-angle glaucoma among adults in the United States

2004 · Archives of Ophthalmology · 1,436 citations (GS)

Field-normalised: 1,083 Semantic Scholar citations place it in the top 1% of Medicine papers from 2004 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Global prevalence of glaucoma and projections of glaucoma burden through 2040: A systematic review and meta-analysis (2014)	Johns Hopkins School of Medicine, Singapore Eye Research Institute, Singapore National Eye Centre	Singapore, United States	—
2	The number of people with glaucoma worldwide in 2010 and 2020 (2006)	—	—	—
3	Primary Open-Angle Glaucoma Preferred Practice Pattern® (2021)	Bascom Palmer Eye Institute, Devers Eye Institute, Duke University	United States	—
4	Human Motor Development: A Lifespan Approach, Eleventh Edition (2024)	San Jose State University	United States	—
5	Primary Open-Angle Glaucoma Preferred Practice Pattern® Guidelines (2016)	Bascom Palmer Eye Institute, University of Miami, Devers Eye Institute, University of Virginia Health System	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
6	Global variations and time trends in the prevalence of primary open angle glaucoma (POAG): a systematic review and meta-analysis (2016)	St George's, University of London	United Kingdom	—
7	Visual Impairment and Blindness in Adults in the United States: Demographic and Geographic Variations From 2015 to 2050 (2016)	Keck School of Medicine of the University of Southern California	United States	—

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 National Eye Centre	Singapore	SCImago #1474	3
University of Bonn	Germany	THE =92	2
Devers Eye Institute	United States	—	2
University of Utah	United States	SCImago #320 · THE 201–250 · QS =540	2
Duke University	United States	SCImago #115 · THE 28 · QS 62	2
University of Calabar	Nigeria	SCImago #8268 · THE 1501+	1
London School of Hygiene & Tropical Medicine	United Kingdom	SCImago #802	1
Queen's University Belfast	United Kingdom	SCImago #760 · THE =198 · QS =199	1
The Fred Hollows Foundation	Australia	—	1
Sightsavers	United Kingdom	—	1
Mbarara University of Science and Technology	Uganda	SCImago #9305	1
Ministry of Health and Family Welfare	India	—	1
Peek Vision	United Kingdom	—	1
St Thomas' Hospital	United Kingdom	—	1
World Health Organization	Switzerland	SCImago #172	1

Geographic distribution of citing authors

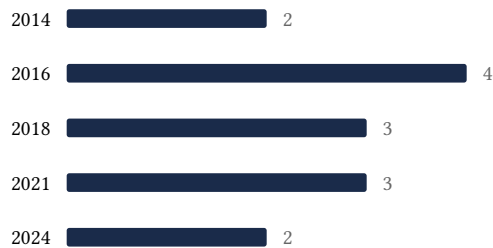
Country	Citing papers
United States	11
United Kingdom	5
Singapore	4
Germany	3
Colombia	1

Country	Citing papers
Fiji	1
France	1
India	1
Italy	1
Jamaica	1
Kenya	1
Malawi	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	An international classification and grading system for age-related maculopathy and age-related macular degeneration	4	Dhanasar — Prong 2 (well-positioned)
Contribution 2	Risk factors for age-related macular degeneration: pooled findings from three continents	6	Dhanasar — Prong 2 (well-positioned)
Contribution 3	Prevalence of open-angle glaucoma among adults in the United States	7	Dhanasar — Prong 2 (well-positioned)