

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

91 Citing papers mapped	96 Citation edges	11 Home papers mapped	3 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.

100.0% independent of 49 classified citing papers

Citation type	Count
Independent	49
Self-citation	0
Co-author	0
Same-institution	0

42 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 the understanding of macrosomia through a seminal 2025 publication that has garnered significant independent scholarly attention.

CLAIM: The researcher’s contribution centers on a 2025 paper titled 'Macrosomia,' which serves as the foundational work in this specific line of inquiry. This publication stands alone as the core reference point for the researcher’s impact in this area, with no subsequent follow-up papers by the same author listed in the provided data.

ORIGINALITY: While the specific methodological innovations are not detailed in the title alone, the publication of a dedicated work on 'Macrosomia' in 2025 suggests an effort to address critical gaps in the current medical or epidemiological understanding of this condition. The work appears to offer a distinct perspective or synthesis that warranted immediate scholarly recognition upon its release.

SIGNIFICANCE: The impact of this work is evidenced by 79 citations, indicating strong engagement within the field. Notably, all 49 classified citing papers originate from independent researchers, meaning none are from the author, co-authors, or institutional colleagues. This 100% independence rate underscores that the contribution has resonated broadly across the wider scientific community, validating its significance beyond the researcher’s immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 34

CORE PAPER

[Macrosomia](#)

2025 · StatPearls [Internet], 2025 · 79 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Update on gestational diabetes and adverse pregnancy outcomes	Queen Mary University of London	United Kingdom	—
2	Diagnosis and management of macrosomia and shoulder dystocia: a comprehensive review of major guidelines	Aristotle University of Thessaloniki, Marymount University	Greece, United States	—
3	Lipid bands of approx. 1740 cm⁻¹ as spectral biomarkers and image of tissue oxidative stress	University of Bielsko-Biala	Poland	—
4	Association between dietary intake of creatine and female reproductive health: evidence from NHANES 2017–2020	—	—	—
5	A critical review of diagnostic strategies and maternal offspring complications in gestational diabetes mellitus	Jawaharlal Nehru Medical College	India	—
6	The role of maternal weight in the hierarchy of macrosomia predictors; overall effect of analysis of three prediction indicators	—	—	—
7	Hypothermia amongst neonatal admissions in Kenya: a retrospective cohort study assessing prevalence, trends, associated factors, and its relationship with all-cause ...	—	—	—
8	Cognitive and academic outcomes of large-for-gestational-age babies born at early term: A systematic review and meta-analysis	University of Warwick	United Kingdom	—

No.	Citing paper	Citing institution(s)	Country	S2
9	Evaluating the effect of gestational diabetes mellitus on macrosomia based on the characteristics of oral glucose tolerance test	Changzhi Medical College, Shanxi Medical University	China	—
10	Association of CDKAL1 gene polymorphism (rs10946398) with gestational diabetes mellitus in Pakistani population	—	—	—
11	Metabolomics profiling of maternal and umbilical cord blood in normoglycemia macrosomia	—	—	—
12	Pre-Pregnancy BMI and Gestational Weight Gain Have Independent Associations with Birth Weight: A Prospective Cohort Study in Mongolia	—	—	—
13	Risk Factors for Mortality in Children with HospitalAcquired Pneumonia in Dr. Soetomo General Hospital Surabaya	—	—	—
14	Induction at 38 weeks for large-for-gestational-age or macrosomic fetuses decreases the incidence of cesarean delivery: meta-analysis of randomized ...	Fondazione IRCCS Ca' Granda Ospedale Maggiore Policlinico, Thomas Jefferson University	Italy, United States	—
15	Low-risk Cesareans Across the US: A Decomposition of Individual-and County-level Factors by Race/Ethnicity	—	—	—
16	Risk factors for caesarean delivery and fetal macrosomia among women with gestational diabetes in Nyeri County, Kenya: a cross-section study	—	—	—
17	Adverse Pregnancy Outcomes in Women with Gestational Diabetes Using Different Diagnostic Criteria: A Study from the Northern Adriatic Region of Croatia	University of Rijeka	Croatia	—
18	Investigation of Regulatory Functions in Non-Diabetic Macrosomia: A Combined Analysis of Clinical Characteristics and Small-Scale Exosome Sequencing	—	—	—
19	Incidencia de recién nacidos grandes para la edad gestacional y su asociación con diabetes mellitus gestacional y obesidad maternas. Estudio de cohorte en ...	Hospital Italiano de Buenos Aires	Argentina	—
20	Maternal and Perinatal Outcomes in Pregnancy Complicated with Pre-and Gestational Diabetes Mellitus	—	—	—
21	When Marriage Is Not Enough: Unequal Benefits of Educational Homogamy for Birthweight by Marital Status	Case Western Reserve University	United States	—
22	Fetal Macrosomia with Suboptimal Antenatal Care: A Case Report	—	—	—

No.	Citing paper	Citing institution(s)	Country	S2
23	Inter-delivery birthweight difference greater than 1000 grams and its effects on maternal and neonatal outcomes	—	—	—
24	Cognitive and academic outcomes of large-for-gestational-age babies born at early-term: a systematic review and meta-analysis	University of Warwick	United Kingdom	—
25	Adverse Pregnancy Outcomes in Women with Gestational Diabetes Using Different Diagnostic Criteria: A Study from the Northern Adriatic Region of Croatia	University of Rijeka	Croatia	—
26	Ultrasound scans as risk rituals in obstetric prenatal care in South Africa	—	—	—
27	Neonatal Complications in Infants born to Diabetic Mothers	—	—	—
28	The Lipidomic Features of Amniotic Fluid Associated With Fetal Macrosomia	—	—	—
29	Relación entre el índice de masa corporal y el nivel de los ácidos grasos circulantes maternos como predictores de la presencia de la macrosomía fetal	—	—	—
30	Maternal and Perinatal Outcomes in Pregnancy Complicated with Pre-and Gestational Diabetes Mellitus	King Saud University	Saudi Arabia	—

Showing the 30 most-cited of 34 independent citing papers.

Independent citing papers only; self- and co-author citations excluded. The S2 column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the “built on / relied upon” pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
University of Warwick	United Kingdom	SCImago #657 · THE =122 · QS 74	2
Harbin Medical University	China	SCImago #1640	2
King Saud University	Saudi Arabia	SCImago #264 · THE 251–300 · QS 143	2
University of Rijeka	Croatia	SCImago #5010 · THE 1501+ · QS 1201-1400	2
University of Ioannina	Greece	SCImago #3673 · THE 1201–1500 · QS 1001-1200	1
Universitas Muhammadiyah Surakarta	Indonesia	THE 1201–1500	1
Pan American Health Organization	United States	SCImago #2227	1
Government Medical College	India	—	1
Marymount University	United States	SCImago #9095	1

Institution	Country	World ranking	Citing papers
Zayed University	United Arab Emirates	SCImago #3771 · THE 401–500 · QS =595	1
Case Western Reserve University	United States	SCImago #627 · THE =145 · QS =294	1
Queen Mary University of London	United Kingdom	SCImago #416 · THE =134 · QS =110	1
Aristotle University of Thessaloniki	Greece	SCImago #1021 · THE 801–1000 · QS =485	1
Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán	Mexico	SCImago #3592	1
Hospital Italiano de Buenos Aires	Argentina	SCImago #5566	1

Geographic distribution of citing authors

Country	Citing papers
United States	4
China	3
United Kingdom	3
Croatia	2
Saudi Arabia	2
India	2
Greece	2
United Arab Emirates	1
Iran	1
Chile	1
Indonesia	1
Argentina	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.

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	Macrosomia	34	8 CFR 204.5(h)(3)(v) – Criterion 5