U.S. Citizenship and Immigration Services

Non-Precedent Decision of the Administrative Appeals Office

In Re: 43549692

Date: JULY 21, 2026

Appeal of U.S. Citizenship and Immigration Services (USCIS) Decision

Form I-140, Immigrant Petition for Alien Workers (National Interest Waiver)

The Petitioner, who intends to work as a public health specialist, seeks classification as a member of the professions holding an advanced degree. *See* Immigration and Nationality Act (the Act) section 203(b)(2), 8 U.S.C. § 1153(b)(2). The Petitioner also seeks a national interest waiver of the job offer requirement that is attached to this EB-2 immigrant classification. *See* section 203(b)(2)(B)(i) of the Act. U.S. Citizenship and Immigration Services (USCIS) may grant this discretionary waiver of the required job offer, and thus of a labor certification, when it is in the national interest to do so.

USCIS denied, concluding that the record did not establish that the Petitioner qualifies for the national interest waiver. The matter is now before us on appeal under 8 C.F.R. § 103.3.

The Petitioner bears the burden of proof to demonstrate eligibility by a preponderance of the evidence. *Matter of Chawathe*, 25 I&N Dec. 369, 375-76 (AAO 2010). We review the questions in this matter de novo. *Matter of Christo's, Inc.*, 26 I&N Dec. 537, 537 n.2 (AAO 2015). Upon de novo review, we will dismiss the appeal.

I. LAW

To qualify for a national interest waiver, a petitioner must first show eligibility for the underlying EB-2 visa classification, as either an advanced degree professional or an alien of exceptional ability in the sciences, arts, or business. Section 203(b)(2)(B)(i) of the Act.

If a petitioner establishes eligibility for the underlying EB-2 classification, they must then establish that they merit a discretionary waiver of the job offer requirement "in the national interest." Section 203(b)(2)(B)(i) of the Act. *Matter of Dhanasar*, 26 I&N Dec. 884, 889 (AAO 2016), provides the framework for adjudicating national interest waiver petitions. *Dhanasar* states that USCIS may, as matter of discretion,[1] grant a national interest waiver if the petitioner demonstrates that:

- The proposed endeavor has both substantial merit and national importance;
- The alien is well positioned to advance their proposed endeavor; and

[1] *See Flores v. Garland*, 72 F.4th 85, 88 (5th Cir. 2023) (joining the Third, Ninth, Eleventh, and D.C. Circuit Courts of Appeals in concluding that USCIS' decision to grant or deny a national interest waiver is discretionary in nature).

- On balance, waiving the job offer requirement would benefit the United States.

II. ANALYSIS

USCIS did not dispute that the Petitioner qualifies as a member of the professions holding a foreign degree equivalent to a U.S. advanced degree. The remaining issue to be determined is whether the Petitioner has established that a waiver of the requirement of a job offer, and thus a labor certification, would be in the national interest. USCIS determined that the Petitioner had established the substantial merit of the proposed endeavor, but otherwise had not satisfied the requirements of the *Dhanasar* national interest test.

The Petitioner earned a medical degree in Armenia in July 2024. From September 2024 to September 2025, he served a residency in phthisiology, a subspecialty of pulmonology focusing on tuberculosis (TB). In April 2025, during that residency, the Petitioner began working as a "remote Armenian English medical interpreter," providing translation services "between Armenian-speaking patients and English-speaking medical staff." He was still working as an interpreter when he filed the petition in October 2025.

Although the Petitioner holds a medical degree, he does not claim that he intends to work as a physician in the United States. The Petitioner instead seeks to pursue a proposed endeavor "as an Independent Public Health Specialist focused on tuberculosis care." He stated:

> My proposed endeavor is to address deficiencies in tuberculosis care in the United States by analyzing real-world treatment challenges and adherence barriers observed in high-risk populations. This work responds to the persistent problem of treatment interruption and its link to resistant strains, contributing to a more complete understanding of the patient-related and structural factors that undermine long-term disease control. Drawing on clinically informed training, the project seeks to identify patterns in treatment failure and highlight practical considerations relevant to public health teams working with populations at elevated risk of tuberculosis.

The Petitioner added that his "goal is to promote tuberculosis control strategies that are targeted, sustainable, and adapted to local conditions, helping reduce transmission, prevent relapse, and contain the spread of resistant strains to strengthen public health outcomes across the United States." The Petitioner indicated that he would base his endeavor in California, which has a particularly high rate of TB incidence relative to the United States as a whole.

A. Substantial Merit and National Importance

The first prong, substantial merit and national importance, focuses on the specific endeavor that the individual proposes to undertake. *Matter of Dhanasar*, 26 I&N Dec. at 889. The endeavor's merit may be demonstrated in a range of areas such as business, entrepreneurialism, science, technology, culture, health, or education. *Id.* In determining whether the proposed endeavor has national importance, we consider its potential prospective impact. *Id.*

The Petitioner cited government reports to show that his proposed endeavor "addresses a matter that has been explicitly supported by the U.S. government," showing the nation's interest in preventing and ultimately eliminating tuberculosis. The Petitioner stated that his proposed "endeavor has national importance as it will reduce tuberculosis transmission and drug resistance by addressing treatment adherence barriers and implementing patient-centered strategies." The Petitioner also asserted that his proposed endeavor "will optimize tuberculosis control programs and improve resource allocation through the analysis of treatment challenges and program performance data."

We do not question that the United States has an interest in reducing TB cases. They key issue here is the extent of the impact that the Petitioner's specific endeavor would have toward achieving that desired goal.

The Petitioner cited statistics showing that patients often fail to adhere to treatment regimens, partly due to "[s]tructural barriers—including lack of insurance coverage . . . , out-of-pocket costs, and fragmented care delivery." The Petitioner stated that he intends to "propose targeted strategies—ranging from tailored patient support to improve follow-up mechanisms—that improve completion rates and help prevent disease relapse and transmission." The Petitioner stated:

> My methodology—grounded in the analysis of treatment failure patterns across diverse care settings—will bring these inequities to light, informing practical responses that are responsive to the lived experiences of affected communities. By understanding how systemic exclusion and care fragmentation undermine TB control, this work can support public health teams in designing outreach and retention efforts that are culturally appropriate and locally adapted.

The Petitioner also cited a lack of coordination between public health departments and "the broader primary care system," making it more difficult to track and follow up on cases in high-risk populations. The Petitioner stated that "[t]he evidence generated [by his endeavor] will offer public health agencies, healthcare systems, and community organizations actionable insights to implement feasible, equitable strategies grounded in real-world care environments."

When considering the possible impact of the proposed endeavor, we must consider not only what the Petitioner hopes to accomplish, but also how he plans to accomplish it. The Petitioner stated:

> I will begin offering specialized contributions to health departments, community clinics, and care networks engaged in TB control. By working directly with institutions responsible for implementing public health strategies, I will contribute to ongoing efforts to improve patient outcomes and reduce transmission.
>
> In parallel, I will conduct a systematic analysis of tuberculosis care models in the United States to identify recurring challenges in sustaining long-term treatment adherence. . . .
>
> Building on these insights, I will develop applied recommendations to support more effective care delivery in diverse clinical environments.

USCIS issued a request for evidence (RFE), stating that the Petitioner had not established that the proposed endeavor has broader implications that would show national importance.

In response, the Petitioner asserted that he has demonstrated that "optimizing tuberculosis (TB) care delivery is of national importance" because it improves treatment slows the spread of the disease. The Petitioner cited articles and government reports, both in the initial submission and newly provided in response to the RFE, describing efforts to eradicate TB.

USCIS did not question the substantial merit of efforts to combat TB. But it does not follow that every endeavor with that goal would, itself, have sufficient implications to meet the national importance threshold.

The Petitioner stated that his "work will support advancements in the field through the development of actionable, integrated care frameworks that bridge the operational gaps between primary care providers and public health departments to ensure treatment continuity." The Petitioner also stated that his "proposed endeavor's emphasis on patient retention protocols and integrated care frameworks has the potential to avert expensive hospitalizations, to reduce the clinical complexity of subsequent cases, and to preserve treatment options by reducing the probability of resistance emerging." The Petitioner stated that "successful models [could] be adopted and scaled across jurisdictions."

USCIS concluded that the Petitioner "has not sufficiently demonstrated the potential prospective impact or broader potential implications of his specific endeavor," and had not established that his proposed endeavor would have more than a local impact on a limited number of people.

On appeal, the Petitioner states that his proposed "endeavor is plainly different from the proposed employment," and that his intended occupation "should . . . only be considered as a vehicle by which to achieve or otherwise further [the] endeavor." Whether or not the endeavor is viewed through the lens of the occupational title that the Petitioner specifically claimed on Form I-140, the burden is on the Petitioner to establish the broader implications of his proposed endeavor.

The Petitioner asserts that the "mischaracterization of the Petitioner's endeavor as localized to a startup or immediate clients fails to accurately capture its scope, purpose, and national significance." But the Petitioner has not sufficiently established the broader scope of the proposed endeavor.

The Petitioner has indicated that his endeavor would involve working with individual "health departments, community clinics, and care networks," providing "tailored patient support." Local-level work of this kind is in furtherance of the broader goal of reducing the incidence of TB, but the Petitioner has not established the broader implications of this local work. The assertion that his work will establish "models" that can be more broadly emulated amounts to speculation. The Petitioner has not shown how his proposed endeavor would propagate these models beyond the local level, particularly when the services are "tailored" to varying individual circumstances.

In *Dhanasar*, we concluded that the petitioner's teaching activity lacked national importance because, while it was in service of articulable national educational goals, the petitioner had not shown direct impact beyond a small number of students. *See Matter of Dhanasar*, 26 I&N Dec. at 893. Similar reasoning applies here. To the extent that the Petitioner has described the proposed endeavor, the

Petitioner has provided more information about individual, customized patient care. The record lacks specific detail as to how the endeavor would have broader implications.

For the above reasons, we agree that the Petitioner has not established the national importance of the proposed endeavor.

B. Well Positioned to Advance the Proposed Endeavor

The second *Dhanasar* prong shifts the focus from the proposed endeavor to the alien. To determine whether an alien is well positioned to advance the proposed endeavor, we consider factors including, but not limited to: their education, skills, knowledge and record of success in related or similar efforts; a model or plan for future activities; any progress towards achieving the proposed endeavor; and the interest of potential customers, users, investors, or other relevant entities or individuals. *Matter of Dhanasar*, 26 I&N Dec. at 890.

The Petitioner asserted that he "is well-positioned to advance his proposed endeavor based on his education, his knowledge and skills, and his record of success in the field of endeavor." USCIS concluded: "While the beneficiary appears to have the necessary education, knowledge, and skills necessary to continue his career, the evidence does not support the claim that he is well-positioned to advance the endeavor. . . . Not every educated and experienced professional will be found well positioned to advance a proposed endeavor." USCIS concluded that the Petitioner had not submitted "evidence to demonstrate that there is significant interest in his endeavor, that he has influenced his field of endeavor, has significant financial support . . . or evidence showing that the petitioner's past work has been utilized or significantly replicated by others in the field."

We agree with the general conclusion that the Petitioner has not established that he is well positioned to advance the proposed endeavor.

The Petitioner cited his "extensive experience with advanced clinical specialization in tuberculosis management, patient retention protocols, and health communication." The Petitioner stated that he "has leveraged his knowledge and skills in healthcare and tuberculosis management in order to address complex medical challenges, improve patient outcomes, and enhance public health practices." The record shows that the Petitioner served a one-year medical residency, receiving training related to the treatment of tuberculosis, but he has not claimed or documented any past experience as a public health specialist or health education specialist, providing the types of services described in his proposed endeavor. The Petitioner also provided no corroborating evidence to show that his past efforts have in fact "improve[d] patient outcomes and enhance[d] public health practices" beyond the care he provided to individual patients. Likewise, the Petitioner cited no evidence to support his claim that his work in mid-2025 as a medical interpreter has "enhanc[ed] treatment adherence."

The Petitioner stated that he "has authored several peer-reviewed publications that underscore his expertise in tuberculosis and its complex clinical management." The record contains copies of four published case studies in which the Petitioner described individual cases. All the articles appeared in August or September 2025, very shortly before the Petitioner filed his petition in October 2025. The Petitioner did not establish that these articles have had any impact on tuberculosis care.

The Petitioner submitted copies of email messages inviting him to participate in peer review, submit papers, and participate in conferences. The Petitioner asserted that these materials demonstrate demand for his services. We note that several of the peer review invitations concern manuscripts on subjects that appear to be outside of the Petitioner's stated medical specialty of phthisiatry. One manuscript involves circulatory disorders in patients with a type of spinal arthritis; another concerns ways that the kidneys manifest HIV infection. The record does not show how these publishers selected the Petitioner, and what those publishers' standards are in terms of selecting peer reviewers. Without such information, the record does not support the inferences that the Petitioner draws regarding the implications of the invitations.

The Petitioner submitted letters from physicians at institutions where he trained in Armenia. These individuals described the Petitioner's work as a student and as a resident, and asserted that he possesses the necessary expertise to pursue his proposed endeavor. The Petitioner's credentials in phthisiatry are not in dispute, but the discussion of the Petitioner's impact centered on individual patient care and practices within the institutions where he was training at the time. While the letters provide some details about his residency training, they do not indicate that the Petitioner's work had a significant impact beyond the institutions where he trained. The letters also do not establish that the Petitioner has any prior experience as a public health specialist, running an operation of the type described in his endeavor statement.

The Petitioner intends to establish his proposed endeavor in the [redacted] area. To show the interest of potential customers in that area, the Petitioner submitted letters from officials of a home health agency, a nonprofit organization for individuals with developmental disabilities, and a pharmacy. These individuals expressed interest, in very general terms, in working with the Petitioner in order to improve outcomes for their clients. The Petitioner stated that the letters are from "relevant professionals in his field," but none of the authors claim to work in the same field as the Petitioner. One of these writers, identified as the consumer services supervisor at the [redacted] Regional Center, acknowledged that the organization "is not a medical provider and does not specialize in TB treatment," but stated that the groups most affected by TB in the [redacted] area "overlap[] significantly with the population we serve."

In the RFE, USCIS acknowledged the Petitioner's qualifications but determined that he had not submitted evidence of influence in his field and experience in similar endeavors. USCIS further observed that the Petitioner did not establish experience as an entrepreneur.

In response, the Petitioner submitted new letters. Three of these letters are follow-up letters from individuals who had provided letters submitted with the initial filing of the petition. The letters include statistics about challenges in TB care, but provide few details as to how the Petitioner's work would be implemented on a scale beyond targeted interventions customized to individual patients.

Two further letters, both from physicians in Armenia who claim no specialized expertise in TB medicine, summarized information from elsewhere and asserted that the Petitioner is well qualified to pursue his proposed endeavor. These letters do not add significant new information to the record.

USCIS denied the petition, concluding that the Petitioner did not establish sufficient interest in his proposed endeavor, and did not show a past history of experience and influence in similar endeavors.

On appeal, the Petitioner asserted that his "specialized knowledge and skills are well-documented through his academic achievements, professional experience, and scholarly contributions." The Petitioner has documented medical training and a year's experience as a resident in phthisiatry, and he has published case studies detailing his work in that regard, but the Petitioner does not seek to establish a clinical practice in phthisiatry. The Petitioner seeks, instead, to work in a related but distinct occupation in which he has no demonstrated experience.

The Petitioner has not established the type and level of education, training, and credentials that are ordinarily required to work as a public health specialist, and therefore we cannot conclude that the Petitioner has shown that he is qualified to work in that field. We will not presume that a medical degree is either an appropriate or sufficient qualification in this regard.

The Petitioner asserts that he submitted "letters of support from experts in his field," but if we define "his field" as his intended occupation as a public health specialist, then none of the letters are from individuals in that field. He submitted several letters from physicians, but as noted above the Petitioner has not indicated that he intends to practice medicine.

The letters of interest are from individuals in diverse fields, all impacted in some way by the type of work that the Petitioner intends to pursue, but they do not present a coherent picture in sufficient detail to show that the Petitioner is well positioned to undertake that work.

The Petitioner does not appear to have practiced medicine after his one-year residency. His subsequent work as a medical translator entails communication skills, and his knowledge of medicine appears to be useful for that occupation, but its relationship to the proposed endeavor seems to be tangential.

Ultimately, the record shows that the Petitioner has training and experience treating patients with TB, and he intends to use his knowledge in his proposed endeavor, but the proposed endeavor is distinct from medical practice. The record lacks detail concerning some aspects of the proposed endeavor and the record is ambiguous and fragmentary concerning how well positioned he is to advance that endeavor.

We agree with the conclusion that the Petitioner has not met the second *Dhanasar* prong.

In light of the above conclusions, the Petitioner has not met his burden of proof to show that he satisfies the first and second prongs of the *Dhanasar* national interest test. Detailed discussion of the third prong cannot change the outcome of this appeal. Because the Petitioner has not otherwise established eligibility for the classification sought, we need not reach, and therefore reserve, the third *Dhanasar* prong. *See INS v. Bagamasbad*, 429 U.S. 24, 25 (1976) (per curiam) (holding that agencies are not required to make "purely advisory findings" on issues that are unnecessary to the ultimate decision).

III. CONCLUSION

The Petitioner has not established the national importance of the proposed endeavor and has not shown that he is well positioned to advance that endeavor. Therefore, the Petitioner has not shown eligibility for the national interest waiver, and we will dismiss the appeal as a matter of discretion.

ORDER: The appeal is dismissed.

NOTICE: This constitutes the final decision in this matter. The filing of a motion will not postpone the effect of the decision. 8 C.F.R. § 103.5(a)(1)(iv). Aliens who are not lawfully present, or who are otherwise inadmissible or deportable, may be subject to the commencement of removal proceedings under section 240 of the Act through the issuance of a Form I-862, Notice to Appear. Those proceedings may result in their removal from the United States and possible ineligibility for future visas or other immigration benefits.