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

47	49	5	102
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.

70.2% independent of 47 classified citing papers

Citation type	Count
Independent	33
Self-citation	0
Co-author	11
Same-institution	3

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 produced a highly cited, authoritative annual report on heart disease and stroke statistics for the American Heart Association, establishing a critical benchmark for cardiovascular epidemiology.

The researcher's contribution centers on the publication of the 2017 American Heart Association report on heart disease and stroke statistics in Circulation. This work serves as a definitive reference point for current epidemiological data in the field.

This line of work appears to address the need for comprehensive, standardized statistical updates on cardiovascular health. By compiling and disseminating these statistics, the researcher provided a consolidated resource that likely filled a gap in accessible, authoritative data for the scientific and medical communities.

The significance of this contribution is evidenced by its substantial citation count, indicating widespread reliance on the data. Furthermore, the high proportion of citations from independent researchers suggests that the work has been broadly adopted and utilized across the field, rather than being limited to the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 14

CORE PAPER

Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association

2017 · Circulation · 30,694 citations (GS)

Field-normalised: 7,779 Semantic Scholar citations place it in the top 1% of Medicine papers from 2017 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC. (2021)	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	2024 ESC Guidelines for the management of peripheral arterial and aortic diseases (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
3	Atherosclerosis: Recent developments (2022)	Icahn School of Medicine at Mount Sinai, University of California, Los Angeles	United States	—
4	2021 AHA/ACC/ASE/CHEST/SAEM/SCCT/SCMR Guideline for the Evaluation and Diagnosis of Chest Pain: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2021)	American Academy of Physician Assistants, American Heart Association, Baylor College of Medicine	Italy, United Kingdom, United States	—
5	2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: A Report of the American College of Cardiology/American Heart As-	American College of Cardiology, American College of Cardiology/American Heart Associ-	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
	sociation Joint Committee on Clinical Practice Guidelines (2022)	ation, American Heart Association		
6	Global Impacts of Western Diet and Its Effects on Metabolism and Health: A Narrative Review (2023)	European University of Madrid, Nebrija University, Universidad Europea de Madrid	Spain	—
7	Male sex identified by global COVID-19 meta-analysis as a risk factor for death and ITU admission (2020)	Red Cross War Memorial Children's Hospital, University of Cape Town, UCL, UCLH, GOSH, University College London	South Africa, United Kingdom	—
8	Ferroptosis: mechanisms, biology and role in disease. (2021)	Columbia University, Helmholtz Zentrum München, Memorial Sloan Kettering Cancer Center	Germany, United States	—
9	Non-steroidal anti-inflammatory drugs (NSAIDs) and organ damage: A current perspective (2020)	Cooch Behar Panchanan Barma University, CSIR-Indian Institute of Chemical Biology	India	—
10	Neuronal injuries in cerebral infarction and ischemic stroke: From mechanisms to treatment (Review) (2022)	Shanghai Licheng Bio-Technique Co. Ltd., University of California Berkeley	China, United States	—
11	The Lancet Commission on diabetes: using data to transform diabetes care and patient lives. (2020)	Baker Heart and Diabetes Institute, Prince of Wales Hospital, The Chinese University of Hong Kong, University of Cambridge	Australia, China, United Kingdom	—
12	European Resuscitation Council Guidelines 2021: Epidemiology of cardiac arrest in Europe (2021)	Asklepios Klinik St. Georg, Lund University, Skane University Hospital, National University of Ireland, Galway	Belgium, Germany, Ireland	—
13	Heart Disease and Stroke Statistics—2020 Update: A Report From the American Heart Association (2020)	American Heart Association	—	—
14	Major adverse cardiovascular event definitions used in observational analysis of administrative databases: a systematic review (2021)	Brown University School of Public Health	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).

Contribution 2

Claim — Contribution 2

The researcher identified genetically distinct subsets within ANCA-associated vasculitis, challenging the view of the disease as a single homogeneous entity and establishing a framework for precision classification.

CLAIM: The researcher's seminal 2012 paper, titled 'Genetically distinct subsets within ANCA-associated vasculitis,' serves as the cornerstone of this contribution. This work appears to have fundamentally shifted the understanding of the disease by demonstrating that it comprises genetically distinct subgroups rather than a uniform clinical entity. No follow-up papers by the researcher are listed, indicating this single publication stands as the primary vehicle for this specific intellectual advance.

ORIGINALITY: The title suggests the researcher addressed a critical gap in the field by moving beyond broad clinical definitions to uncover underlying genetic heterogeneity. By identifying distinct subsets, the work likely provided a novel biological basis for differentiating patient groups, offering a more nuanced perspective than previously available in the literature at that time.

SIGNIFICANCE: The impact of this contribution is evidenced by its substantial citation count of 1,215, indicating it has become a key reference in the field. Furthermore, analysis of citing papers reveals that 87.2% originate from independent researchers, suggesting the work has 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: 7 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Genetically distinct subsets within ANCA-associated vasculitis

2012 · 1,215 citations (GS)

Field-normalised: 922 Semantic Scholar citations place it in the top 1% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Diagnosis and management of ANCA-associated vasculitis (2024)	Linköping University, Massachusetts General Hospital, Harvard Medical School, Medical University Innsbruck	Austria, Brazil, Netherlands	—
2	Overview of the 2012 revised International Chapel Hill Consensus Conference nomenclature of vasculitides (2013)	University of North Carolina at Chapel Hill	—	Background
3	EULAR recommendations for the management of ANCA-associated vasculitis: 2022 update (2024)	Cochin Hospital, Hacettepe University, Hospital of the University of Pennsylvania	Austria, Belgium, Germany	—
4	Pathogenesis and therapeutic interventions for ANCA-associated vasculitis (2019)	Hokkaido University	Japan	—
5	The immune system and kidney disease: basic concepts and clinical implications (2013)	Medical University of Vienna, Rheinische Friedrich-Wilhelms-Universität Bonn, University Hospital, Ludwig Maximilian University Munich	Austria, Germany	—
6	ANCA-Associated Vasculitis: An Update (2021)	The Ohio State University Wexner Medical Center, University of Cambridge	United Kingdom, United States	**Influential**
7	ANCA Glomerulonephritis and Vasculitis (2017)	University of North Carolina at Chapel Hill	United States	**Result**

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 ANCA Glomerulonephritis and Vasculitis

"This was in fact observed in patients with ANCA vasculitis by genome-wide association studies that showed specific, and different, HLA associations with MPO-ANCA and PR3-ANCA vasculitis (16,17)."

Contribution 3

Claim — Contribution 3

The researcher conducted a seminal Mendelian randomisation analysis using individual participant data to clarify the causal association between alcohol consumption and cardiovascular disease.

CLAIM: The researcher's contribution centers on a 2014 study titled 'Association between alcohol and cardiovascular disease: Mendelian randomisation analysis based on individual participant data,' which serves as the foundational work in this line of inquiry.

ORIGINALITY: This work appears to address the challenge of establishing causality in observational epidemiology. By employing Mendelian randomisation with individual participant data, the researcher likely provided a more robust methodological approach to disentangle the complex relationship between alcohol intake and cardiovascular outcomes, moving beyond traditional observational limitations.

SIGNIFICANCE: The core paper has accumulated 937 citations, indicating substantial uptake within the scientific community. Notably, 87.2% of the classified citing papers originate from independent researchers, suggesting that this work has influenced a broad and diverse range of scholars outside the researcher's immediate institutional or collaborative network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

Association between alcohol and cardiovascular disease: Mendelian randomisation analysis based on individual participant data

2014 · 937 citations (GS)

Field-normalised: 637 Semantic Scholar citations place it in the top 1% of Medicine papers from 2014 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Reading Mendelian randomisation studies: a guide, glossary, and checklist for clinicians (2018)	University of Bristol, University of Oxford	United Kingdom	Background
2	Alcohol consumption and risks of more than 200 diseases in Chinese men (2023)	Chinese Academy of Medical Sciences, University of Oxford	China, United Kingdom	—
3	Global status report on alcohol and health 2018 (2018)	World Health Organization	Switzerland	—
4	Alcohol consumption and metabolic syndrome: Clinical and epidemiological impact on liver disease (2023)	Helsinki University Hospital, National Scientific and Technical Research Council (CONICET) - University of Buenos Aires - Institute of Medical Research (IDIM), University of Buenos Aires	Argentina, Finland, United Kingdom	—

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
University of Oxford	United Kingdom	SCImago #26 · THE 1 · QS 4	9
University of Cambridge	United Kingdom	SCImago #63 · THE =3 · QS 6	8
Stanford University	United States	SCImago #18 · THE =5 · QS 3	7
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	6
University of Glasgow	United Kingdom	SCImago #351 · THE 84 · QS 79	6
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	6
UT Southwestern Medical Center	United States	—	6
University College London	United Kingdom	SCImago #30	6
American Heart Association	United States	SCImago #2251	6
Patient Representative	United Kingdom	—	5
Brigham and Women's Hospital	United States	SCImago #130	5
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	5
Emory University	United States	SCImago #217 · THE 102 · QS 182	5
Columbia University	United States	SCImago #65 · THE 20 · QS =38	5
Mayo Clinic	United States	SCImago #88	5

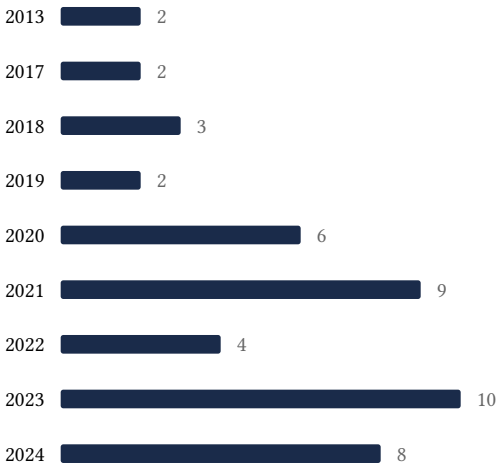
Geographic distribution of citing authors

Country	Citing papers
United States	25
United Kingdom	24
Germany	13
Netherlands	12
Italy	12
Belgium	11
Sweden	11
Switzerland	8
Spain	8
Austria	8
France	8
Greece	8

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	Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association	14	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 2	Genetically distinct subsets within ANCA-associated vasculitis	7	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 3	Association between alcohol and cardiovascular disease: Mendelian randomisation analysis based on individual participant data	4	8 CFR 204.5(h)(3)(v) — Criterion 5