Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

8 CFR § 204.5(i)(3) · Authorship + Original Contributions

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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 the 8 CFR § 204.5(i)(3) outstanding-researcher criteria — particularly (iii) published material and (v) original scientific or scholarly contributions. 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

5	5	1	135
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.

80.0% independent of 5 classified citing papers

Citation type	Count
Independent	4
Self-citation	0
Co-author	1
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 conducted a landmark meta-analysis of individual patient data from five randomized trials, establishing critical evidence for endovascular thrombectomy in large-vessel ischemic stroke.

The researcher's primary contribution rests on a seminal 2016 paper published in The Lancet, which performed a meta-analysis of individual patient data from five randomized trials regarding endovascular thrombectomy after large-vessel ischemic stroke. This work stands as a core, standalone achievement in the field.

This line of work appears to address the need for high-level, aggregated evidence to evaluate the efficacy of endovascular thrombectomy. By synthesizing data from multiple randomized trials, the research likely provided a more robust assessment of treatment outcomes than individual studies could offer, clarifying the clinical value of this intervention for stroke patients.

The significance of this contribution is underscored by its substantial citation count of 8,813, indicating widespread recognition and utility within the medical community. Furthermore, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, demonstrating that the work has been adopted and built upon by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

Endovascular thrombectomy after large-vessel ischaemic stroke: a meta-analysis of individual patient data from five randomised trials

2016 · The Lancet · 8,813 citations (GS)

Field-normalised: 6,233 Semantic Scholar citations place it in the top 1% of Medicine papers from 2016 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Post-Stroke Cognitive Impairment and Dementia (2022)	LMU Munich, Massachusetts General Hospital, Monash University	Australia, Germany, United States	—
2	Pragmatic solutions to reduce the global burden of stroke: a World Stroke Organization–Lancet Neurology Commission (2023)	Auckland University of Technology, Christian Medical College, Lund University	Australia, India, New Zealand	—
3	Axatilimab in recurrent or refractory chronic graft-versus-host disease (2024)	University Hospital Regensburg	Germany	—
4	The Role of Obesity in Type 2 Diabetes Mellitus—An Overview (2024)	Rheinisch-Westfälische Technische Hochschule (RWTH) Aachen, University Hospital Aachen, UT Southwestern Medical Center Dallas	Germany, 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
University Hospital of Toulouse	France	—	1
Emory University and Grady Memorial Hospital	United States	—	1
Hôpital Gui-de-Chauliac	France	—	1
OhioHealth Riverside Methodist Hospital	—	—	1
Texas Stroke Institute	United States	—	1
University of Miami Miller School of Medicine-Jackson Memorial Hospital	United States	—	1
Hospital Vall d'Hebrón	Spain	—	1
Baptist Jacksonville	United States	—	1
University Hospitals of Cleveland	United States	SCImago #1717	1
Toronto Western Hospital	Canada	SCImago #1426	1
Erlanger Hospital at the University of Tennessee, Chattanooga	United States	—	1
Capital Health Hospital	United States	—	1
UT Southwestern Medical Center Dallas	United States	—	1
Rheinisch-Westfälische Technische Hochschule (RWTH) Aachen, University Hospital Aachen	Germany	—	1
Massachusetts General Hospital	United States	SCImago #100	1

Geographic distribution of citing authors

Country	Citing papers
Germany	3
United States	3
Australia	2
France	1
India	1
New Zealand	1
Nigeria	1
Spain	1
Sweden	1
Switzerland	1
Canada	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	Endovascular thrombectomy after large-vessel ischaemic stroke: a meta-analysis of individual patient data from five randomised trials	4	8 CFR 204.5(i)(3) — Outstanding Researcher