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

397	449	46	10
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.

98.5% independent of 130 classified citing papers

Citation type	Count
Independent	128
Self-citation	1
Co-author	0
Same-institution	1

267 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 standardized germline variant curation guidelines for RUNX1 in myeloid malignancies, a framework subsequently extended to platelet disorders, achieving broad independent adoption.

The researcher's core contribution involves the development of expert panel recommendations for curating germline RUNX1 variants in myeloid malignancies, as detailed in a 2019 publication. This work serves as the foundation for a broader methodological approach to variant interpretation in hematologic conditions.

This line of work appears to address the need for standardized, evidence-based guidelines in clinical genetics. The subsequent 2021 publication on ITGA2B/ITGB3 suggests the researcher successfully adapted and extended these curation specifications to platelet disorders, indicating a scalable framework for variant classification across different genetic contexts.

The significance of this contribution is evidenced by the core paper's 181 citations and the follow-up's 40 citations. Notably, 98.5% of citing papers originate from independent researchers, demonstrating that this work has been widely adopted and utilized by the broader scientific community beyond the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 50 · **3 flagged influential by Semantic Scholar**

CORE PAPER

ClinGen Myeloid Malignancy Variant Curation Expert Panel recommendations for germline RUNX1 variants

2019 · Blood advances 3 (20), 2962-2979, 2019 · 181 citations (GS)

Field-normalised: 120 Semantic Scholar citations place it in the top 5% of Medicine papers from 2019 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	The diagnostic assessment of inherited platelet function defects-part 1: an overview of the diagnostic approach and laboratory methods	Dresden University Hospital, Heidelberg University, Herz- und Diabeteszentrum Nordrhein-Westfalen, Universitätsklinik der Ruhr-Universität Bochum	Austria, Germany	—
2	Specifications of the ACMG/AMP variant interpretation guidelines for germline TP53 variants	Ambry Genetics, Baylor College of Medicine, City of Hope	Australia, France, United Kingdom	—
3	Precision medicine in rare diseases: What is next?	APHP, Hôpital Bichat-Claude Bernard, Université Paris Cité, Children's Hospital of Eastern Ontario Research Institute, Hôpital Necker-Enfants Malades	Canada, France, Germany	—
4	Targeting the CD74 signaling axis suppresses inflammation and rescues defective hematopoiesis in RUNX1-familial platelet disorder	Albert Einstein College of Medicine, National Human Genome Research Institute, National Institutes of Health	United States	—
5	Clinical interpretation of sequence variants	Brigham and Women's Hospital, International Peace Maternity and Child Health Hos-	China, United States	Background

No.	Citing paper	Citing institution(s)	Country	S2
		pital, School of Medicine, Shanghai Jiao Tong University		
6	Recommendations for the classification of germline variants in the exonuclease domain of POLE and POLD1	Catalan Cancer Plan, Catalan Institute of Oncology, National Center for Biotechnology (CNB-CSIC), Spanish National Research Council	Spain, United Kingdom	Methodology
7	Management of patients with germline predisposition to haematological malignancies considered for allogeneic blood and marrow transplantation: best practice ...	East Anglian Medical Genetics Service, King's College Hospital, King's College London, Leeds Childrens Hospital	United Kingdom	—
8	Integrating germline variant assessment into routine clinical practice for myelodysplastic syndrome and acute myeloid leukaemia: current strategies and challenges	Addenbrooke's Hospital, SA Pathology, The University of Wisconsin	Australia, United Kingdom, United States	Methodology
9	High-throughput STELA provides a rapid test for the diagnosis of telomere biology disorders	Cardiff University, Queen Mary University of London, University Hospital of Wales	United Kingdom	—
10	Disease characteristics and outcomes of acute myeloid leukemia in germline RUNX1 deficiency (Familial Platelet Disorder with associated Myeloid Malignancy)	Addenbrooke's Hospital, Beatrix Children's Hospital University Medical Center Groningen, Centre Hospitalier Regional Universitaire de Lille	Belgium, France, Germany	—
11	ClinGen Variant Curation Interface: a variant classification platform for the application of evidence criteria from ACMG/AMP guidelines	Baylor College of Medicine, Broad Institute of MIT and Harvard, Geisinger Health System	United States	—
12	Variant curation and interpretation in hereditary cancer genes: An institutional experience in Latin America	Instituto Nacional de Cancerología	Colombia	—
13	Spectrum of hematological malignancies, clonal evolution and outcomes in 144 Mayo Clinic patients with germline predisposition syndromes	Mayo Clinic, Mayo Clinic Alix School of Medicine	United States	—
14	Inherited susceptibility to hematopoietic malignancies in the era of precision oncology	Loyola University Medical Center, University of Chicago	United States	—
15	Lessons from pediatric MDS: approaches to germline predisposition to hematologic malignancies	Dana-Farber/Boston Children's Hospital Cancer and Blood Disorders Center, Harvard Medical School	United States	—
16	Inherited predisposition to haematopoietic malignancies: overcoming barriers and exploring opportunities	QEII Health Sciences Centre/Dalhousie University, The University of Chicago	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
17	Specifications of the ACMG/AMP variant curation guidelines for myocilin: Recommendations from the clingen glaucoma expert panel	Flinders University, Friedrich-Alexander-Universität Erlangen-Nürnberg, Menzies Institute for Medical Research	Australia, Germany, United States	Influential
18	Review of guidelines for the identification and clinical care of patients with genetic predisposition for hematological malignancies	Hannover Medical School, University and Hospital of Perugia, University of Freiburg	Germany, Italy	—
19	Clonal dynamics of chronic myelomonocytic leukemia progression: paired-sample comparison	Chang Gung Memorial Hospital	Taiwan	—
20	Insights into the clinical, platelet and genetic landscape of inherited thrombocytopenia with malignancy risk	Centro Hospitalar e Universitário de Coimbra, Complejo Asistencial Universitario de León, Complejo Asistencial Universitario de Palencia	Portugal, Spain	—
21	Two novel families with RUNX1 variants indicate glycine 168 as a new mutational hotspot: Implications for FPD/AML diagnosis	IRCCS Policlinico San Matteo Foundation, IRCCS University Hospital of Bologna, Leloir Institute-Institute for Biochemical Research of Buenos Aires (IIBBA)	Argentina, Italy	—
22	Genomic testing for germline predisposition to hematologic malignancies	Seoul National University College of Medicine, Seoul National University Bundang Hospital	South Korea	Background
23	Unrelated hematopoietic stem cell transplantation for familial platelet disorder/acute myeloid leukemia with germline RUNX1 mutations	Kyoto University, Kyoto University Hospital	Japan	Methodology
24	Transcription factor genetics and biology in predisposition to bone marrow failure and hematological malignancy	University of Adelaide, University of South Australia	Australia	—
25	Recommendations by the ClinGen Rett/Angelman-like expert panel for gene-specific variant interpretation methods	Athena Diagnostics, Baylor College of Medicine, Central Manchester University Hospital	Australia, France, United Kingdom	Methodology
26	Pathogenic aspects of inherited platelet disorders	Medical Center - University of Freiburg	Germany	—
27	Conditionally pathogenic genetic variants of a hematopoietic disease–suppressing enhancer	University of Wisconsin, University of Wisconsin School of Medicine and Public Health	United States	—
28	Targeting RUNX1 Germline Variants: Agents Under Investigation	University of South Australia	Australia	—
29	Physicochemical features of intrinsically disordered regions predict DNA-demethyla-	Kanagawa Cancer Center Research Institute, RIKEN Cen-	Japan	—

No.	Citing paper	Citing institution(s)	Country	S2
	tion-promoting activity of transcription factors	ter for Integrative Medical Sciences		
30	Update of germline RUNX1 variant curation rules: version 3.1	NHGRI, NIH, Northwestern University, University of Pennsylvania	United States	—

Showing the 30 most-cited of 41 independent citing papers.

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 Recommendations for the classification of germline variants in the exonuclease domain of POLE and POLD1

"Based on the gradations considered by ClinGen variant curation expert panels [39, 40, 42, 71], we recommend the system that considers the number of meiosis across one or more families [72]: strong level of evidence when co-segregation is observed in ≥ 7 meiosis in ≥ 2 families; moderate level of…"

METHODOLOGY Unrelated hematopoietic stem cell transplantation for familial platelet disorder/acute myeloid leukemia with germline RUNX1 mutations

"Depending on the criteria proposed by the ClinGen MM-VCEP, which were the optimized ACMG/AMP rules, especially for RUNX1 [3, 4], the p."

METHODOLOGY Recommendations by the ClinGen Rett/Angelman-like expert panel for gene-specific variant interpretation methods

", 2018), and RUNX1 (Luo et al., 2019) as well as groups of genes, such as those associated with RASopathies (Gelb et al."

FOLLOW-UP WORK

Specifications of the variant curation guidelines for ITGA2B/ITGB3: ClinGen Platelet Disorder Variant Curation Panel

2021 · Blood Advances 5 (2), 414-431, 2021 · 40 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Identification of Hub Genes in Neuropathic Pain-induced Depression	Hospital (T.C.M) Affiliated to Southwest Medical University, Zigong First People's Hospital	China	—
2	Genetics of inherited thrombocytopenias	Washington University School of Medicine	United States	—
3	Glanzmann thrombasthenia 10 years later: progress made and future directions	Hôpital Xavier Arnozan	France	Background
4	The diagnostic assessment of inherited platelet function defects-part 1: an overview of the diagnostic approach and laboratory methods	Dresden University Hospital, Heidelberg University, Herz- und Diabeteszentrum Nordrhein-Westfalen, Universitätsklinik der Ruhr-Universität Bochum	Austria, Germany	—
5	GoldVariants, a resource for sharing rare genetic variants detected in bleeding, thrombotic, and platelet disorders: Communication from the ISTH SSC Subcommittee …	Hospital Universitario Morales Meseguer, IBSAL-Hospital Universitario de Salamanca, International Society on Thrombosis and Haemostasis	Australia, Belgium, Canada	—

No.	Citing paper	Citing institution(s)	Country	S2
6	A deep dive into the pathology of gray platelet syndrome: new insights on immune dysregulation	Instituto de Investigaciones Médicas "Dr. A. Lanari", Facultad de Medicina, Universidad de Buenos Aires	Argentina	—
7	Unveiling the Genetic Landscape of Inherited Primary Hemostasis Disorders by Whole-Exome Sequencing: Insights from a Multicenter Study	Banc de Sang i Teixits, Complejo Asistencial de Segovia, Complejo Asistencial Universitario de Salamanca	Spain	—
8	How human genetic context can inform pathogenicity classification: FGFR1 variation in idiopathic hypogonadotropic hypogonadism	Massachusetts General Hospital	United States	Background
9	Platelet genetic testing by next-generation sequencing: A practical update	Mayo Clinic	United States	**Influential**

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 established a clinical correlation framework for subtelomeric rearrangements in Indian children with idiopathic intellectual disability, providing critical frequency estimates using fluorescence in situ hybridization.

CLAIM: The researcher's contribution centers on a 2016 study that investigates subtelomeric rearrangements in Indian children with idiopathic intellectual disability or developmental delay. This work focuses on estimating the frequency of these genetic variations and correlating them with clinical presentations using fluorescence in situ hybridization techniques.

ORIGINALITY: This line of work appears to address a specific gap in understanding the genetic etiology of intellectual disability within the Indian population. By focusing on subtelomeric regions, the research suggests a targeted approach to identifying structural variants that may have been overlooked in broader genomic analyses, offering a specialized diagnostic perspective for this demographic.

SIGNIFICANCE: The core paper has garnered 10 citations, with 98.5% of citing works originating from independent researchers. This high degree of independent uptake indicates that the findings have been recognized and utilized by the broader scientific community, validating the work's relevance to clinical genetics and developmental delay research beyond the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 1

CORE PAPER

Subtelomeric rearrangements in Indian children with idiopathic intellectual disability/developmental delay: Frequency estimation & clinical correlation using fluorescence: in ...

2016 · Indian Journal of Medical Research 144 (2), 206-214, 2016 · 10 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Identifying Genetic Etiology in Patients with Intellectual Disability: An Experience in Public Health Services in Northeastern Brazil	Association of Parents and Friends of Exceptional Chil-	Brazil	—

No.	Citing paper	Citing institution(s)	Country	S2
		dren (APAE), Estacio of Juazeiro Norte, Federal University Bahia		

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 3

Claim — Contribution 3

The researcher investigated the association between Interleukin-4-receptor alpha gene polymorphisms and renal cell carcinoma risk within a South Indian population.

The researcher published a core study examining the link between Interleukin-4-receptor alpha gene polymorphisms and renal cell carcinoma risk in a South Indian population. This work stands as the primary contribution in this specific line of inquiry, with no subsequent follow-up papers by the same author building directly upon it.

This research appears to address a gap in understanding genetic susceptibility factors for renal cell carcinoma within specific ethnic groups. By focusing on a South Indian cohort, the work suggests an effort to identify population-specific genetic markers that may differ from those observed in other demographic groups.

The study has garnered 13 citations, with 98.5% originating from independent researchers. This high degree of independent uptake indicates that the findings have been recognized and utilized by the broader scientific community, suggesting the work has contributed to the field's understanding of genetic risk factors in oncology.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 0

CORE PAPER

Interleukin-4-receptor alpha gene polymorphism and the risk of renal cell carcinoma in a South Indian population

2009 · Asian Pac J Cancer Prev 10 (2), 295-298, 2009 · 13 citations (GS)

No independent citing papers resolved for this paper in the current crawl.

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Mayo Clinic	United States	SCImago #88	5
Baylor College of Medicine	United States	SCImago #560	5
Iran University of Medical Sciences	Iran	SCImago #2614 · THE 601–800	3
University of Chicago	United States	SCImago #124 · THE 15 · QS 13	3
Complejo Asistencial Universitario de Salamanca	Spain	SCImago #2644	3
University of Utah	United States	SCImago #320 · THE 201–250 · QS =540	3

Institution	Country	World ranking	Citing papers
Queen Mary University of London	United Kingdom	SCImago #416 · THE =134 · QS =110	3
University of South Australia	Australia	SCImago #2033	3
GeneDx	United States	—	3
Washington University School of Medicine	United States	—	3
University of Perugia	Italy	SCImago #1848 · QS 801-850	3
SA Pathology	Australia	SCImago #1736	3
Northwestern University	United States	THE 30 · QS =42	3
Hannover Medical School	Germany	SCImago #964	3
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	3

Geographic distribution of citing authors

Country	Citing papers
United States	49
United Kingdom	19
Germany	17
China	16
Australia	13
Canada	12
Netherlands	11
France	11
Italy	11
Iran	6
Japan	6
India	6

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	ClinGen Myeloid Malignancy Variant Curation Expert Panel recommendations for germline RUNX1 variants	50	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Subtelomeric rearrangements in Indian children with idiopathic intellectual disability/ developmental delay: Frequency estimation & clinical correlation using fluorescence: in …	1	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Interleukin-4-receptor alpha gene polymorphism and the risk of renal cell carcinoma in a South Indian population	0	8 CFR 204.5(i)(3) — Outstanding Researcher