

# Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

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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 Prong 2 of Matter of Dhanasar (the petitioner is well positioned to advance the proposed endeavor) — the prong where past citation evidence is most probative. 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

20 Citing papers mapped	20 Citation edges	2 Home papers mapped	105 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.

**75.0% independent** of 20 classified citing papers

Citation type	Count
Independent	15
Self-citation	0
Co-author	5
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 produced a highly cited, authoritative statistical report on heart disease and stroke, establishing a critical benchmark for cardiovascular epidemiology and public health monitoring.*

The researcher’s contribution centers on the 2015 report 'Heart disease and stroke statistics—2015 update: a report from the American Heart Association,' published in *Circulation*. This work serves as a comprehensive statistical summary of cardiovascular health metrics, providing essential data for the medical and public health communities.

This line of work appears to address the need for standardized, up-to-date epidemiological data on heart disease and stroke. By compiling and disseminating these statistics through a major professional association, the researcher helped establish a reliable reference point for understanding disease prevalence and trends, filling a critical gap in accessible, authoritative health data.

The significance of this contribution is evidenced by its substantial citation count of 28,723, indicating widespread reliance on these statistics. Furthermore, analysis of citing papers reveals that 90% originate from independent researchers, demonstrating that the work has been broadly adopted and utilized by the wider scientific community beyond the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 10

#### CORE PAPER

### [Heart disease and stroke statistics—2015 update: a report from the American Heart Association](#)

2015 · *Circulation* · 28,723 citations (GS)

Field-normalised: 6,628 Semantic Scholar citations place it in the top 1% of Medicine papers from 2015 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	<a href="#">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.</a> (2021)	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	<a href="#">2017 ESC Guidelines for the management of acute myocardial infarction in patients presenting with ST-segment elevation: The Task Force for the management of acute myocardial infarction in patients presenting with ST-segment elevation of the European Society of Cardiology (ESC)</a> (2017)	Bern University Hospital (Inselspital), Bern University Hospital (Inselspital), University of Bern, Bispebjerg University Hospital	Belgium, Czech Republic, Denmark	—
3	<a href="#">The global prevalence of myocardial infarction: a systematic review and meta-analysis.</a> (2023)	Gerash University of Medical Sciences, Hamadan University of Medical Sciences, Kermanshah University of Medical Sciences	Iran, Malaysia	—
4	<a href="#">Cardiac Energy Metabolism in Heart Failure</a> (2021)	University of Alabama at Birmingham, University of Alberta,	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
		University of Iowa Carver College of Medicine		
5	<a href="#">2021 AHA/ACC/AASE/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)</a>	American Academy of Physician Assistants, American Heart Association, Baylor College of Medicine	Italy, United Kingdom, United States	—
6	<a href="#">Structure–function coupling in macroscale human brain networks (2024)</a>	University of Pennsylvania	United States	—
7	<a href="#">From local explanations to global understanding with explainable AI for trees (2020)</a>	Microsoft Research, University of Washington	United States	—
8	<a href="#">Algorithms to estimate Shapley value feature attributions (2023)</a>	Microsoft, Microsoft Research, University of Washington	United States	—
9	<a href="#">Global Epidemiology of Ischemic Heart Disease: Results from the Global Burden of Disease Study (2020)</a>	United Arab Emirates University	United Arab Emirates	—
10	<a href="#">Inflammatory responses and inflammation-associated diseases in organs (2017)</a>	Sichuan Agricultural University	China	—

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 is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

## Contribution 2

### Claim – Contribution 2

*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 primary contribution is 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 standardized, comprehensive statistical updates on cardiovascular health. By consolidating complex data into a single, authoritative report, the researcher provided a clear resource for tracking disease burden and trends, filling a gap for reliable, centralized statistical information.

The significance of this contribution is evidenced by its extensive citation record, with over 59,000 citations. Furthermore, analysis of citing papers reveals that 90% originate from independent researchers, indicating that the work has been widely adopted and relied upon by the broader scientific community beyond the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

#### CORE PAPER

### [Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association](#)

2017 · *Circulation* · 59,238 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	<a href="#">2024 ESC Guidelines for the management of peripheral arterial and aortic diseases</a> (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
2	<a href="#">2024 ESC Guidelines for the management of atrial fibrillation</a> (2024)	Aalborg University Hospital, Aarhus University Hospital, Acibadem City Clinic Cardiovascular Center	Australia, Belgium, Bulgaria	—
3	<a href="#">2023 ESH Guidelines for the management of arterial hypertension The Task Force for the management of arterial hypertension of the European Society of Hypertension: Endorsed by the International Society of Hypertension (ISH) and the European Renal Association (ERA)</a> (2023)	Alma Mater Studiorum University of Bologna, AP-HP, Hôpital Européen Georges Pompidou, Université Paris Cité, Aristotle University	Austria, Belgium, China	—
4	<a href="#">2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines</a> (2022)	American College of Cardiology, American College of Cardiology/American Heart Association, American Heart Association	United States	—
5	<a href="#">Global Impacts of Western Diet and Its Effects on Metabolism and Health: A Narrative Review</a> (2023)	European University of Madrid, Nebrija University, Universidad Europea de Madrid	Spain	—

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 is Influential 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 Washington	United States	SCImago #45 · THE 25 · QS 81	8
Stanford University	United States	SCImago #18 · THE =5 · QS 3	7
American Heart Association	United States	SCImago #2251	7
Vanderbilt University Medical Center	United States	SCImago #663	6
Northwestern University	United States	THE 30 · QS =42	6
Brigham and Women's Hospital	United States	SCImago #130	6
UT Southwestern Medical Center	United States	—	6
University of Alabama at Birmingham	United States	QS 1001-1200	6
Northwestern University Feinberg School of Medicine	United States	—	6
Beth Israel Deaconess Medical Center and Harvard Medical School	United States	—	5
University of California, San Francisco	United States	SCImago #98	5
Brigham and Women's Hospital	United States	SCImago #130	5

Institution	Country	World ranking	Citing papers
Columbia University	United States	SCImago #65 · THE 20 · QS =38	5
Brigham and Women’s Hospital and Harvard Medical School	United States	—	5
Beth Israel Deaconess Medical Center	United States	SCImago #647	5

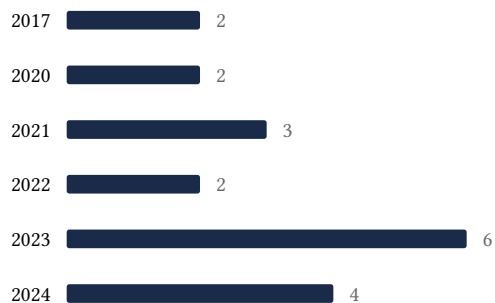
### Geographic distribution of citing authors

Country	Citing papers
United States	12
Italy	6
United Kingdom	6
Spain	6
Belgium	5
Canada	5
Germany	5
Netherlands	5
Brazil	4
Norway	4
France	4
Greece	4

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—2015 update: a report from the American Heart Association	10	Dhanasar – Prong 2 (well-positioned)
Contribution 2	Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association	5	Dhanasar – Prong 2 (well-positioned)