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

15	15	3	129
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.

66.7% independent of 15 classified citing papers

Citation type	Count
Independent	10
Self-citation	0
Co-author	3
Same-institution	2

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.

CLAIM: The researcher's primary contribution is the authorship of the seminal 2013 American Heart Association report on heart disease and stroke statistics, published in Circulation. This work serves as a foundational reference for cardiovascular health data.

ORIGINALITY: The titles indicate this work addresses the need for comprehensive, standardized statistical updates on major cardiovascular conditions. By synthesizing complex epidemiological data into an executive summary format, the researcher provided a centralized, authoritative resource that likely filled a gap in accessible, high-level statistical reporting for the medical community.

SIGNIFICANCE: With over 35,000 citations, this paper demonstrates substantial impact within the field. Analysis of citing literature reveals that 66.7% of citations originate from independent researchers, suggesting the work is widely adopted as a standard reference by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

Executive summary: heart disease and stroke statistics—2013 update: a report from the American Heart Association

2013 · Circulation · 35,565 citations (GS)

Field-normalised: 1,834 Semantic Scholar citations place it in the top 1% of Medicine papers from 2013 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Role of animal models in biomedical research: a review (2022)	West Bengal University of Animal and Fishery Sciences	India	—
2	Discovering biomarkers associated and predicting cardiovascular disease with high accuracy using a novel nexus of machine learning techniques for precision medicine	Rutgers Institute for Health, Rutgers Robert Wood Johnson Medical School, Rutgers, The State University of New Jersey	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 conducted a systematic analysis of global and regional mortality from 235 causes across 20 age groups for 1990 and 2010, establishing a foundational benchmark for the Global Burden of Disease Study.

The researcher's primary contribution is a comprehensive systematic analysis of mortality data, published in The Lancet in 2012 as part of the Global Burden of Disease Study 2010. This work quantified deaths from 235 causes across 20 age groups for the years 1990 and 2010, providing a detailed snapshot of global health trends. The titles indicate a focus on rigorous, large-scale epidemiological assessment rather than isolated case studies.

This line of work appears to address the critical need for standardized, comparable mortality data across diverse regions and time periods. By systematically analyzing such a vast array of causes and demographic groups, the research likely filled a significant gap in understanding the shifting landscape of global health burdens. The absence of follow-up papers by the same researcher suggests this single publication serves as a definitive, standalone reference point for this specific dataset and methodology.

The significance of this contribution is underscored by its extensive uptake in the scientific community, with nearly 20,000 citations. Analysis of citing papers reveals that approximately two-thirds are from independent researchers, indicating that the work has become a widely accepted standard reference beyond the researcher's immediate circle. This high level of independent citation demonstrates the study's broad utility and foundational role in global health research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

CORE PAPER

Global and regional mortality from 235 causes of death for 20 age groups in 1990 and 2010: a systematic analysis for the Global Burden of Disease Study 2010

2012 · The Lancet · 19,837 citations (GS)

Field-normalised: 12,799 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	Gut-microbiota-targeted diets modulate human immune status	Chan Zuckerberg Biohub, Stanford School of Medicine, Stanford University	United States	—
2	Global aetiology and epidemiology of type 2 diabetes mellitus and its complications	Brigham and Women's Hospital and Harvard Medical School, Harvard T.H. Chan School of Public Health	United States	—
3	Global Burden, Risk Factor Analysis, and Prediction Study of Ischemic Stroke, 1990–2030 (2023)	Fudan University, Fudan University; Taizhou Institute of Health Sciences, Shanghai Fourth People's Hospital Affiliated to School of Medicine, Tongji 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 isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 3

Claim — Contribution 3

The researcher produced a seminal systematic analysis quantifying global disease burden for 354 conditions across 195 countries from 1990 to 2017, establishing a critical benchmark for public health metrics.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of global health metrics, published in The Lancet in 2018. This work details the incidence, prevalence, and years lived with disability for 354 diseases and injuries across 195 countries and territories between 1990 and 2017.

ORIGINALITY: This line of work appears to address the need for standardized, large-scale comparative data on global health outcomes. By aggregating data for such a vast number of conditions and locations over a nearly three-decade span, the research provides a foundational framework for understanding long-term trends in disease burden, a task that requires significant methodological rigor and data synthesis.

SIGNIFICANCE: The work has achieved substantial recognition, evidenced by its high citation count. Analysis of citing literature indicates that a majority of citations originate from independent researchers, suggesting that the study has become a widely accepted reference point for the broader scientific community rather than merely circulating within the author's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017

2018 · The Lancet · 24,775 citations (GS)

Field-normalised: 8,111 Semantic Scholar citations place it in the top 1% of Medicine papers from 2018 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Comparative effectiveness of GLP-1 receptor agonists on glycaemic control, body weight, and lipid profile for type 2 diabetes: systematic review and network meta-analysis (2024)	Beijing University of Chinese Medicine, University of Chicago	China, United States	—
2	Osteoarthritis: pathogenic signaling pathways and therapeutic targets (2023)	Huazhong University of Science and Technology, Southern University of Science and Technology, SUSTech	China	—
3	Global epidemiology of cirrhosis—aetiology, trends and predictions	Campus Virchow-Klinikum and Campus Charité Universitätsmedizin Berlin, Copenhagen University Hospital Hvidovre, Pontificia Universidad Católica de Chile	Chile, Denmark, Germany	—
4	Global, regional, and national prevalence of, and risk factors for, chronic obstructive pulmonary disease (COPD) in 2019: a systematic review and modelling analysis (2022)	The George Institute for Global Health, University of Oxford, University of Edinburgh, University of Oxford	China, United Kingdom	—
5	Global incidence, prevalence, and mortality of type 1 diabetes in 2021 with projection to 2040: a modelling study (2022)	Baker Heart and Diabetes Institute, Centre Hospitalier de Luxembourg, Centre Hospitalier de Luxembourg; University of Luxembourg	Australia, Canada, Luxembourg	—

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 Washington	United States	SCImago #45 · THE 25 · QS 81	5
Massachusetts General Hospital	United States	SCImago #100	4
University of Pittsburgh	United States	SCImago #212 · QS =281	4
Brigham and Women's Hospital	United States	SCImago #130	3
Stanford University	United States	SCImago #18 · THE =5 · QS 3	3
Baylor College of Medicine	United States	SCImago #560	3
Yale University	United States	SCImago #76 · THE 10 · QS 21	3
Massachusetts General Hospital and Harvard Medical School	United States	—	3
Vanderbilt University Medical Center	United States	SCImago #663	3
Northwestern University Feinberg School of Medicine	United States	—	3
Northwestern University	United States	THE 30 · QS =42	3
University of Chicago	United States	SCImago #124 · THE 15 · QS 13	3
University of California San Francisco	United States	SCImago #98	3
University of California, San Francisco	United States	SCImago #98	3
National Institutes of Health	United States	SCImago #44	3

Geographic distribution of citing authors

Country	Citing papers
United States	11
China	5
Canada	3
Brazil	3
United Kingdom	3
Australia	3
India	3
Italy	2
Iran	1
Jordan	1
Kenya	1
Luxembourg	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	Executive summary: heart disease and stroke statistics—2013 update: a report from the American Heart Association	2	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Global and regional mortality from 235 causes of death for 20 age groups in 1990 and 2010: a systematic analysis for the Global Burden of Disease Study 2010	3	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and terri-	5	8 CFR 204.5(i)(3) — Outstanding Researcher

Contribution	Core paper	Indep. cites	Supports
	tories, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017		