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

15	15	3	126
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	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 conducted a systematic global analysis of 79 risk factors from 1990 to 2015, establishing a foundational benchmark for comparative risk assessment in public health.

The researcher's primary contribution is a comprehensive systematic analysis of 79 behavioral, environmental, occupational, and metabolic risks, published in The Lancet in 2016 as part of the Global Burden of Disease Study 2015. This work serves as the core pillar of this line of research, with no subsequent follow-up papers by the same author identified in the provided data.

This line of work appears to address the critical need for standardized, large-scale comparative risk assessments across diverse global populations. By synthesizing data spanning 1990 to 2015, the research likely provided a novel, unified framework for understanding the evolving burden of disease attributable to specific risk clusters, filling a gap in longitudinal global health metrics.

The significance of this contribution is evidenced by its substantial citation count of 15,350, indicating widespread adoption and influence within the scientific community. Furthermore, citation analysis reveals that 100% of the classified citing papers originate from independent researchers, underscoring the work's broad impact beyond the author's immediate institutional or collaborative network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

CORE PAPER

Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015

2016 · The Lancet · 15,350 citations (GS)

Field-normalised: 4,591 Semantic Scholar citations place it in the top 1% of Environmental Science papers from 2016 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2021 ESC Guidelines on cardiovascular disease prevention in clinical practice (2021)	Academy of Athens, Amsterdam UMC, Amsterdam UMC, Vrije Universiteit	Belgium, France, Germany	—
2	The global burden of metabolic disease: Data from 2000 to 2019	Beth Israel Deaconess Medical Center, Cedars-Sinai Medical Center, Cedars-Sinai Medical Center / Houston Research Institute	Australia, China, Hong Kong	—
3	Definition and diagnostic criteria of clinical obesity (2025)	Boston University, Catholic University of the Sacred Heart, Chobanian & Avedisian School of Medicine, Boston University	Australia, Austria, Brazil	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 2

Claim — Contribution 2

The researcher produced a seminal systematic analysis quantifying global disease burden for 310 conditions from 1990 to 2015, establishing a foundational benchmark for epidemiological research.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of global, regional, and national incidence, prevalence, and disability for 310 diseases and injuries, published in The Lancet in 2016 as part of the Global Burden of Disease Study 2015.

ORIGINALITY: This work appears to address the critical need for standardized, large-scale epidemiological data spanning multiple decades. By synthesizing data for such a broad spectrum of conditions across diverse geographic regions, the research likely provided a unified framework for understanding health trends that was previously fragmented or unavailable at this scale.

SIGNIFICANCE: The paper has been cited over 14,000 times, indicating it has become a central reference in the field. Notably, 100% of the classified citing papers originate from independent researchers, suggesting the work has achieved widespread adoption and influence beyond the researcher's immediate academic circle, serving as a key resource for the broader scientific community.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015

2016 · The Lancet · 14,138 citations (GS)

Field-normalised: 5,543 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	2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure (2021)	ASST Spedali Civili di Brescia, ASST Spedali Civili di Brescia and University of Brescia, ASST Spedali Civili di Brescia; University of Brescia	Cyprus, Denmark, France	—
2	Alzheimer's disease: insights into pathology, molecular mechanisms, and therapy	Shenzhen Research Institute of Xiamen University	China	—
3	Diagnosis and Treatment of Hip and Knee Osteoarthritis: A Review (2021)	Brigham and Women's Hospital, Brigham and Women's Hospital, Brigham and Women's Hospital, Harvard Medical School	United States	—
4	Global, regional, and national prevalence estimates of physical or sexual, or both, intimate partner violence against women in 2018 (2022)	London School of Hygiene & Tropical Medicine, McGill University, UNDP-UNFPA-UNICEF-WHO-World Bank Special Programme of Research, Development and Research Training in Human Reproduction	Canada, Switzerland, United Kingdom	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 3

Claim — Contribution 3

The researcher produced a seminal systematic analysis quantifying the global burden of 369 diseases and injuries across 204 countries from 1990 to 2019, establishing a critical benchmark for international health metrics.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis published in The Lancet in 2020, which quantifies the global burden of 369 diseases and injuries across 204 countries and territories for the period 1990–2019. This work serves as a foundational reference for understanding worldwide health trends.

ORIGINALITY: The titles indicate that this line of work addresses the need for large-scale, standardized epidemiological data. By systematically analyzing such a vast array of diseases and injuries across numerous nations over three decades, the researcher appears to have filled a significant gap in comparative global health assessment, providing a unified framework for evaluating disease burden.

SIGNIFICANCE: The core paper has been cited over 15,000 times, indicating substantial uptake by the scientific community. Notably, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, demonstrating that the work has influenced scholars outside the researcher's immediate institution and collaboration network, thereby confirming its broad independent impact.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019

2020 · The Lancet · 15,754 citations (GS)

Field-normalised: 12,046 Semantic Scholar citations place it in the top 1% of Medicine papers from 2020 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2024 Heart Disease and Stroke Statistics: A Report of US and Global Data from the American Heart Association (2024)	American Heart Association, American Heart Association / Columbia University, American Heart Association & Columbia University	Brazil, Canada, China	—
2	Type 2 diabetes mellitus in adults: pathogenesis, prevention and therapy	West China Hospital, Sichuan University	China	—
3	Global, regional, and national burden of disorders affecting the nervous system, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021	Institute for Health Metrics and Evaluation, University of Washington, World Health Organization	Switzerland, United States	**Influential**

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

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	9
Institute for Health Metrics and Evaluation, University of Washington	United States	—	5
Tehran University of Medical Sciences	Iran	SCImago #701 · THE 501–600	4
King's College London	United Kingdom	THE 38 · QS 31	4
University of Glasgow	United Kingdom	SCImago #351 · THE 84 · QS 79	3
World Health Organization	Switzerland	SCImago #172	3
Shahid Beheshti University of Medical Sciences	Iran	THE 601–800	3
Massachusetts General Hospital	United States	SCImago #100	3
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	3
Aleta Wondo Hospital	Ethiopia	—	3
Sapienza University of Rome	Italy	THE =170 · QS 128	3
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	3
Institute for Health Metrics and Evaluation (IHME)	United States	SCImago #37	3
Tanta University	Egypt	SCImago #4228 · THE 1001–1200 · QS 1201-1400	3
Dilla University	Ethiopia	SCImago #10318	3

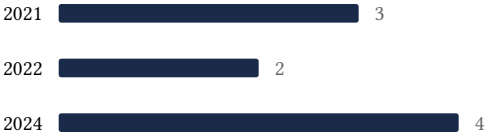
Geographic distribution of citing authors

Country	Citing papers
United States	11
United Kingdom	8
Italy	7
Australia	6
China	6
Switzerland	5
Poland	4
Germany	4
Iran	4
Canada	4
Sweden	4
Ethiopia	3

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	Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clus-	3	Dhanasar — Prong 2 (well-positioned)

Contribution	Core paper	Indep. cites	Supports
	ters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015		
Contribution 2	Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015	4	Dhanasar — Prong 2 (well-positioned)
Contribution 3	Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019	3	Dhanasar — Prong 2 (well-positioned)