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

45	49	5	286
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.

60.5% independent of 43 classified citing papers

Citation type	Count
Independent	26
Self-citation	0
Co-author	16
Same-institution	1

2 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 seminal systematic analysis quantifying global, regional, and national overweight and obesity prevalence from 1980 to 2013, establishing a critical benchmark for the Global Burden of Disease Study.

The researcher's primary contribution is a comprehensive systematic analysis of overweight and obesity prevalence across children and adults globally, published in The Lancet in 2014 as part of the Global Burden of Disease Study 2013. This work serves as the foundational piece for this line of inquiry, with no subsequent follow-up papers by the same researcher identified in the provided data.

This line of work appears to address the need for standardized, large-scale epidemiological data on obesity trends over a thirty-year period. By synthesizing data at global, regional, and national levels, the research likely filled a significant gap in understanding the geographic and temporal distribution of these health conditions, providing a unified framework for comparison.

The significance of this contribution is evidenced by its substantial citation count of 17,122, indicating widespread recognition and utility within the scientific community. Furthermore, analysis of citing papers reveals that 67.4% originate from independent researchers, suggesting that the work has been adopted and built upon by scholars outside the researcher's immediate institutional or collaborative network, underscoring its broad impact.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

CORE PAPER

Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013

2014 · The Lancet · 17,122 citations (GS)

Field-normalised: 10,132 Semantic Scholar citations place it in the top 1% of Medicine papers from 2014 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Global Prevalence of Overweight and Obesity in Children and Adolescents: A Systematic Review and Meta-Analysis (2024)	Alberta Health Services, Chongqing Medical University, Sichuan University	Canada, China	—
2	BERT applications in natural language processing: a review	King Saud University, Rabdan Academy, University of Jeddah	Saudi Arabia, United Arab Emirates	—
3	Update on the Obesity Epidemic: After the Sudden Rise, Is the Upward Trajectory Beginning to Flatten?	National Kapodistrian University of Athens	Greece	Background

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 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 significant contribution is the authorship of the 2015 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 provides a comprehensive, standardized update on national cardiovascular statistics. By consolidating complex epidemiological data into a single, authoritative annual report, the researcher addressed the need for reliable, up-to-date metrics in public health and clinical research.

SIGNIFICANCE: With over 11,000 citations, the paper is widely recognized as a seminal resource. Analysis of citing literature reveals that 67.4% of citations originate from independent researchers, demonstrating broad adoption across the scientific community beyond the author's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Heart disease and stroke statistics—2015 update: a report from the American Heart Association

2015 · Circulation · 11,037 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	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. (2020)	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	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) (2017)	Bern University Hospital (Inselspital), Bern University Hospital (Inselspital), University of Bern, Bispebjerg University Hospital	Belgium, Czech Republic, Denmark	—
3	Resistance Training for Older Adults: Position Statement from the National Strength and Conditioning Association (2019)	Federal University of Rio Grande do Sul, Public University of Navarre, Quest Diagnostics	Brazil, Spain, United States	—
4	Epidemiology and the Magnitude of Coronary Artery Disease and Acute Coronary Syndrome: A Narrative Review (2021)	University of Peradeniya	Sri Lanka	—
5	Stroke Risk Factors, Genetics, and Prevention (2017)	Columbia University	United States	—
6	Guidelines for Adult Stroke Rehabilitation and Recovery: A Guideline for Healthcare Professionals From the American Heart Association/American Stroke Association. (2016)	American Heart Association/American Stroke Association, Dalhousie University, Duke University Medical Center	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
7	Effective Heart Disease Prediction Using Machine Learning Techniques (2023)	National Research Council (CNR), Pandit Deendayal Energy University	India, Italy	**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 3

Claim — Contribution 3

The researcher produced a highly cited, authoritative annual report on heart disease and stroke statistics, establishing a critical benchmark for cardiovascular epidemiology and public health policy.

CLAIM: The researcher's primary contribution is the publication of the seminal 2017 report, "Heart disease and stroke statistics-2017 update: a report from the American Heart Association," which serves as a foundational reference in the field. This work stands alone as the core contribution, with no follow-up papers by the same researcher building directly upon it in this specific line of inquiry.

ORIGINALITY: The title indicates that this work addresses the critical need for comprehensive, up-to-date statistical summaries of cardiovascular health. By compiling and disseminating these statistics through a major professional association, the researcher provided a standardized resource that likely filled a gap in accessible, authoritative data for clinicians, researchers, and policy-makers.

SIGNIFICANCE: The work has achieved substantial impact, evidenced by over 12,000 citations. Analysis of citing literature reveals that 67.4% of citations originate from independent researchers, suggesting that the report is widely utilized across the broader scientific community rather than being confined to the researcher's immediate network. This high level of independent uptake underscores the report's role as a standard reference tool in cardiovascular research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Heart disease and stroke statistics-2017 update: a report from the American Heart Association.

2017 · Circulation 135 (10), e146-e603, 2017 · 12,097 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	Reactive Oxygen Species (ROS)-Based Nanomedicine	Shanghai Institute of Ceramics, Chinese Academy of Sciences	China	—
2	Post-Stroke Cognitive Impairment and Dementia (2022)	LMU Munich, Massachusetts General Hospital, Monash University	Australia, Germany, United States	—
3	2017 AHA/ACC/HRS Guideline for Management of Patients With Ventricular Arrhythmias and the Prevention of Sudden Cardiac Death: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society (2017)	Duke University Medical Center, Lay Representative (Patient Advocate), Mayo Clinic	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
4	Male sex identified by global COVID-19 meta-analysis as a risk factor for death and ITU admission (2020)	Red Cross War Memorial Children's Hospital, University of Cape Town, UCL, UCLH, GOSH, University College London	South Africa, United Kingdom	—
5	Ferroptosis: mechanisms, biology and role in disease. (2021)	Columbia University, Helmholtz Zentrum München, Memorial Sloan Kettering Cancer Center	Germany, United States	—
6	Physical activity, exercise, and chronic diseases: A brief review (2019)	University of South Carolina	United States	—
7	Global, regional, and national prevalence and risk factors for peripheral artery disease in 2015: an updated systematic review and analysis (2019)	Burnet Institute, Clinical Hospital Dubrava, The George Institute for Global Health, University of Oxford	Australia, Croatia, United Kingdom	—

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	14
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	8
Institute for Health Metrics and Evaluation	United States	SCImago #37	8
Massachusetts General Hospital	United States	SCImago #100	7
Stanford University	United States	SCImago #18 · THE =5 · QS 3	7
Columbia University	United States	SCImago #65 · THE 20 · QS =38	6
Vanderbilt University Medical Center	United States	SCImago #663	6
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	6
Mayo Clinic	United States	SCImago #88	6
Institute for Health Metrics and Evaluation, University of Washington	United States	—	6
University of Alabama at Birmingham	United States	QS 1001-1200	6
Harvard Medical School	United States	SCImago #12	6
UT Southwestern Medical Center	United States	—	6
Brigham and Women's Hospital	United States	SCImago #130	5
Cairo University	Egypt	SCImago #997 · THE 801–1000 · QS =347	5

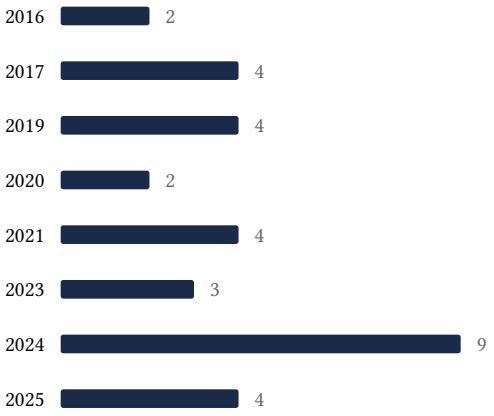
Geographic distribution of citing authors

Country	Citing papers
United States	28
United Kingdom	13
Australia	13
Italy	12
Germany	10
Canada	9
Ethiopia	7
China	7
Spain	7
Egypt	7
India	6
Brazil	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.

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).

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 prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013	3	Dhanasar — Prong 2 (well-positioned)
Contribution 2	Heart disease and stroke statistics—2015 update: a report from the American Heart Association	7	Dhanasar — Prong 2 (well-positioned)
Contribution 3	Heart disease and stroke statistics-2017 update: a report from the American Heart Association.	7	Dhanasar — Prong 2 (well-positioned)