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

42	50	5	48
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.

78.6% independent of 42 classified citing papers

Citation type	Count
Independent	33
Self-citation	0
Co-author	9
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 established a definitive, annually updated statistical framework for heart disease and stroke, providing the field with a critical, high-impact reference standard for epidemiological data.

The researcher's core contribution is the development and maintenance of a comprehensive statistical report on heart disease and stroke, anchored by the seminal 2020 publication in Circulation. This work serves as a foundational reference for the field, establishing a rigorous standard for reporting cardiovascular epidemiology.

This line of work appears to address the need for consistent, authoritative, and regularly updated global and US-specific data on cardiovascular health. By producing subsequent updates in 2023 and 2024, the researcher demonstrates a sustained commitment to refining this statistical framework, ensuring that the data remains current and relevant for ongoing medical and public health research.

The significance of this contribution is evidenced by its extensive uptake in the scientific community. The core 2020 paper has garnered over 22,000 citations, while the 2023 and 2024 updates have accumulated thousands of citations each. Furthermore, analysis of citing literature reveals that over 90% of citations originate from independent researchers, indicating that this work has become a widely accepted and essential resource across the broader scientific community, rather than being limited to the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 22

CORE PAPER

Heart Disease and Stroke Statistics—2020 Update: A Report From the American Heart Association

2020 · Circulation · 22,490 citations (GS)

Field-normalised: 6,079 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	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 (2022)	American College of Cardiology, American College of Cardiology/American Heart Association, American Heart Association	United States	—
2	2024 ACC/AHA/AACVPR/APMA/ABC/SCAI/SVM/SVN/SVS/SIR/VESS Guideline for the Management of Lower Extremity Peripheral Artery Disease: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines. (2024)	AHA/ACC Joint Committee Liaison, American Heart Association/American College of Cardiology, American Physical Therapy Association	Canada, United States	—
3	Aging and aging-related diseases: from molecular mechanisms to interventions and treatments (2022)	Beijing Hospital, Chinese Academy of Medical Sciences	China	—
4	Iron homeostasis and ferroptosis in human diseases: mechanisms and therapeutic prospects (2024)	Central South University, Jianghan University, The First Affiliated Hospital, Zhejiang University School of Medicine	China	—

No.	Citing paper	Citing institution(s)	Country	S2
5	Non-coding RNAs in disease: from mechanisms to therapeutics (2023)	The University of Texas MD Anderson Cancer Center, University of Bologna	Italy, United States	—
6	Life's Essential 8: Updating and Enhancing the American Heart Association's Construct of Cardiovascular Health: A Presidential Advisory From the American Heart Association (2022)	American Heart Association	—	—
7	The Burden of Chronic Disease (2024)	Centers for Disease Control and Prevention	United States	—

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.

FOLLOW-UP WORK

2024 heart disease and stroke statistics: a report of US and global data from the American Heart Association

2024 · 3,725 citations (GS)

Field-normalised: 1,497 Semantic Scholar citations place it in the top 1% of Medicine papers from 2024 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2025 ACC/AHA/ACEP/NAEMSP/SCAI Guideline for the Management of Patients With Acute Coronary Syndromes: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2025)	NYU Langone Health	United States	—
2	The potential for large language models to transform cardiovascular medicine. (2024)	Scripps Research Translational Institute	United States	—
3	Axatilimab in recurrent or refractory chronic graft-versus-host disease (2024)	University Hospital Regensburg	Germany	—
4	Lifetime risk and projected burden of dementia (2025)	Johns Hopkins Bloomberg School of Public Health, Johns Hopkins Medicine, Mayo Clinic	China, United States	—
5	Atrial Fibrillation: A Review (2025)	Boston Medical Center, Boston University Chobanian & Avedisian School of Medicine, Boston University School of Public Health, Cleveland Clinic	United States	—
6	Beta-Blocker Interruption or Continuation after Myocardial Infarction (2024)	French Alliance for Cardiovascular Trials, Hôpital Européen Georges Pompidou, Sorbonne Université	France	—
7	Adjunctive Intravenous Argatroban or Eptifibatide for Ischemic Stroke (2024)	McGovern Medical School at UTHealth Houston, McLaren Flint, Medical University of South Carolina	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
8	PI3K/AKT signaling and neuroprotection in ischemic stroke: molecular mechanisms and therapeutic perspectives (2025)	Chinese PLA General Hospital, The 940 Hospital of Joint Logistics Support Forces of Chinese PLA, The First Medical Center, Chinese PLA General Hospital	China	—

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.

FOLLOW-UP WORK

Heart disease and stroke statistics—2023 update: a report from the American Heart Association

2023 · 5,276 citations (GS)

Field-normalised: 2,962 Semantic Scholar citations place it in the top 1% of Medicine papers from 2023 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2025 ACC/AHA/ACEP/NAEMSP/SCAI Guideline for the Management of Patients With Acute Coronary Syndromes: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2025)	NYU Langone Health	United States	—
2	Non-coding RNAs in disease: from mechanisms to therapeutics (2023)	The University of Texas MD Anderson Cancer Center, University of Bologna	Italy, United States	—
3	2023 ACC/AHA/ACCP/HRS Guideline for the Diagnosis and Management of Atrial Fibrillation: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2023)	American College of Cardiology/American Heart Association, Boston Children's Hospital and Harvard Medical School, Boston University Chobanian & Avedisian School of Medicine and Boston Medical Center	Australia, Turkey, United States	—
4	Heart Failure Epidemiology and Outcomes Statistics: A Report of the Heart Failure Society of America (2023)	Baylor College of Medicine, Beth Israel Deaconess, Boston College	United States	—
5	2024 Guideline for the Primary Prevention of Stroke: A Guideline From the American Heart Association/American Stroke Association (2024)	Yale University	United States	—
6	2023 Guideline for the Management of Patients With Aneurysmal Subarachnoid Hemorrhage: A Guideline From the American Heart Association/American Stroke Association (2023)	Brigham and Women's Hospital, Columbia University Irving Medical Center, Heinrich-Heine University	Germany, United States	—
7	Transcatheter Aortic-Valve Replacement for Asymptomatic Severe Aortic Stenosis (2024)	Cardiovascular Research Foundation, Columbia University Medical Center/New York Pres-	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
		byterian Hospital, Laval University		

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
Stanford University	United States	SCImago #18 · THE =5 · QS 3	12
Baylor College of Medicine	United States	SCImago #560	10
Northwestern University	United States	THE 30 · QS =42	9
Mayo Clinic	United States	SCImago #88	9
Duke University	United States	SCImago #115 · THE 28 · QS 62	9
Northwestern University Feinberg School of Medicine	United States	—	9
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	9
Vanderbilt University Medical Center	United States	SCImago #663	8
Cleveland Clinic	United States	SCImago #306	8
University of California, San Francisco	United States	SCImago #98	8
UT Southwestern Medical Center	United States	—	8
University of Washington	United States	SCImago #45 · THE 25 · QS 81	7
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	7
Medical University of South Carolina	United States	SCImago #1607	7
American Heart Association	United States	SCImago #2251	7

Geographic distribution of citing authors

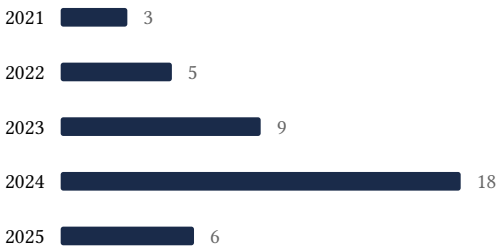
Country	Citing papers
United States	30
Canada	8
United Kingdom	8
Australia	7
Germany	7
China	7
Italy	6
Brazil	5
Poland	4
Netherlands	4
France	3

Country	Citing papers
Singapore	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	Heart Disease and Stroke Statistics—2020 Update: A Report From the American Heart Association	22	8 CFR 204.5(i)(3) — Outstanding Researcher