Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

Rakhi Dandona

Public Health Foundation of India

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

17	17	2	153
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.

52.9% independent of 17 classified citing papers

Citation type	Count
Independent	9
Self-citation	0
Co-author	8
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 seminal systematic analysis quantifying global disease burden for 301 conditions across 188 countries, establishing a foundational benchmark for epidemiological research.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of global health metrics, anchored by a 2015 paper in The Lancet that details incidence, prevalence, and disability for 301 diseases and injuries across 188 countries from 1990 to 2013.

ORIGINALITY: This work appears to address the critical need for standardized, large-scale comparative data on acute and chronic conditions. By synthesizing data across nearly two centuries of countries and a wide spectrum of health issues, the research provides a unified framework for understanding global health trends that was previously fragmented.

SIGNIFICANCE: The core paper has accumulated over 21,000 citations, indicating it serves as a fundamental reference in the field. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has been widely adopted and utilized by the broader scientific community beyond the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013

2015 · The Lancet · 21,037 citations (GS)

Field-normalised: 1,863 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	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	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	—
5	Global, regional, and national prevalence of, and risk factors for, chronic obstructive pulmonary	The George Institute for Global Health, University of Oxford,	China, United Kingdom	—

No.	Citing paper	Citing institution(s)	Country	S2
	disease (COPD) in 2019: a systematic review and modelling analysis (2022)	University of Edinburgh, University of Oxford		

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 seminal systematic analysis quantifying the global burden of 369 diseases and injuries across 204 countries from 1990 to 2019, establishing a critical benchmark for global 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: This line of work appears to address the need for standardized, large-scale epidemiological data by synthesizing information on a vast array of health conditions across numerous nations. The titles indicate a methodological focus on systematic analysis, suggesting a rigorous approach to aggregating complex global health data into a coherent framework.

SIGNIFICANCE: The core paper has been cited over 25,000 times, indicating substantial uptake by the scientific community. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has influenced scholars outside the researcher's immediate network and institution, thereby underscoring its broad impact and independent validation.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4 · **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 · 25,042 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 ESC Guidelines for the Management of Elevated Blood Pressure and Hypertension (2024)	Belgian Cardiology Federation, Canada, Charité – Universitätsmedizin Berlin	Belgium, Canada, France	—
2	Type 2 diabetes mellitus in adults: pathogenesis, prevention and therapy (2024)	West China Hospital, Sichuan University	China	—
3	The 2024 report of the Lancet Countdown on health and climate change: facing record-breaking threats from delayed action (2024)	Barcelona Institute for Global Health, Barcelona Supercomputing Center, Barcelona Supercomputing Center (BSC) & ICREA	Australia, China, Germany	—
4	Global, regional, and national burden of disorders affecting the nervous system, 1990–	Institute for Health Metrics and Evaluation, University of	Switzerland, United States	**Methodology**

No.	Citing paper	Citing institution(s)	Country	S2
	2021: a systematic analysis for the Global Burden of Disease Study 2021	Washington, World Health Organization		

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).

Citing-text excerpts — how the field used this work

METHODOLOGY Global, regional, and national burden of disorders affecting the nervous system, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021

"15 Details of Dismod-MR 2.1 are in the GBD 2019 capstone appendix 1, section 4.5 of reference 9, 15 and described in the appendix (p 16)."

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	10
Institute for Health Metrics and Evaluation, University of Washington	United States	—	5
Tehran University of Medical Sciences	Iran	SCImago #701 · THE 501–600	5
Harvard Medical School	United States	SCImago #12	5
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	5
Institute for Health Metrics and Evaluation	United States	SCImago #37	5
National Institutes of Health	United States	SCImago #44	4
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	4
Boston University	United States	SCImago #272 · THE =76 · QS =88	4
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	4
National Heart, Lung, and Blood Institute	United States	SCImago #345	4
Brigham and Women's Hospital	United States	SCImago #130	4
Massachusetts General Hospital	United States	SCImago #100	4
Yale University	United States	SCImago #76 · THE 10 · QS 21	4
Brigham and Women's Hospital	United States	SCImago #130	4

Geographic distribution of citing authors

Country	Citing papers
United States	13
United Kingdom	9
China	6
Italy	6
Switzerland	5
Iran	5

Country	Citing papers
Australia	5
Canada	5
Ethiopia	4
Brazil	4
Egypt	4
Germany	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	Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013	5	Dhanasar — Prong 2 (well-positioned)
Contribution 2	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	4	Dhanasar — Prong 2 (well-positioned)