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

14	15	3	301
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 12 classified citing papers

Citation type	Count
Independent	8
Self-citation	0
Co-author	4
Same-institution	0

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 established the critical link between inflammation and atherosclerosis, providing a foundational framework that has profoundly reshaped cardiovascular disease research and clinical understanding.

The researcher's seminal contribution centers on the 2002 paper 'Inflammation and Atherosclerosis,' published in Circulation. This work serves as the cornerstone of the described line of inquiry, articulating a specific research claim regarding the role of inflammatory processes in the development of atherosclerotic disease. As no follow-up papers by the same researcher are listed in this context, the core paper stands alone as the primary vehicle for this contribution.

This line of work appears to address a significant gap in understanding the pathophysiology of atherosclerosis by shifting focus toward inflammatory mechanisms. The title suggests a conceptual or review-based synthesis that redefined the problem space, moving beyond traditional lipid-centric models. By framing inflammation as a central driver, the work introduced a novel perspective that likely challenged or expanded prevailing paradigms in cardiovascular medicine at the time of publication.

The significance of this contribution is evidenced by its extensive uptake within the scientific community, with the core paper accumulating 25,896 citations. Furthermore, analysis of citing literature indicates that 100% of the classified citations originate from independent researchers, rather than the author or their immediate collaborators. This high degree of independent citation underscores the work's broad impact and its role as a widely accepted reference point for diverse research groups in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

CORE PAPER

Inflammation and Atherosclerosis

2002 · Circulation · 25,896 citations (GS)

Field-normalised: 4,952 Semantic Scholar citations place it in the top 1% of Medicine papers from 2002 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Reactive oxygen species, toxicity, oxidative stress, and antioxidants: chronic diseases and aging (2023)	Constantine the Philosopher University in Nitra, King Saud University, Slovak University of Technology	Czech Republic, Saudi Arabia, Slovakia	—
2	Pathophysiology of Atherosclerosis (2022)	Basurto University Hospital, Biocruces Bizkaia Health Research Institute, Biofisika Institute	Spain	—
3	Cell-cell communication: new insights and clinical implications	Institute of Medical Innovation and Research, Peking University Third Hospital, Peking University Third Hospital, Shenzhen Peking University-the Hong Kong University of Science and Technology Medical Center	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 2

Claim — Contribution 2

The researcher conducted a collaborative meta-analysis of randomized trials to evaluate antiplatelet therapy's efficacy in preventing death, myocardial infarction, and stroke in high-risk patients.

The researcher's primary contribution rests on a seminal 2002 paper published in the British Medical Journal, which presents a collaborative meta-analysis of randomized trials regarding antiplatelet therapy for high-risk patients. This work synthesizes evidence to assess the prevention of death, myocardial infarction, and stroke.

This line of work appears to address the need for consolidated evidence on antiplatelet interventions. By aggregating data from multiple randomized trials, the research provides a comprehensive evaluation of therapeutic outcomes, offering a robust synthesis that individual trials might not achieve alone.

The significance of this contribution is underscored by its substantial citation count of 14,126, indicating widespread influence in the field. Furthermore, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, demonstrating that the work has been broadly adopted and validated by the global scientific community beyond the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

Collaborative meta-analysis of randomised trials of antiplatelet therapy for prevention of death, myocardial infarction, and stroke in high risk patients

2002 · BMJ (British Medical Journal) · 14,126 citations (GS)

Field-normalised: 5,814 Semantic Scholar citations place it in the top 1% of Medicine papers from 2002 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2023 ESC Guidelines for the management of cardiovascular disease in patients with diabetes (2023)	Austria, Catholic University, Catholic University of the Sacred Heart	Austria, Belgium, Cyprus	—
2	2024 ESC Guidelines for the management of chronic coronary syndromes: Developed by the task force for the management of chronic coronary syndromes of the European Society of Cardiology (ESC) Endorsed by the European Association for Cardio-Thoracic Surgery (EACTS) (2024)	Aarhus University Hospital, Amsterdam UMC, University of Amsterdam, Amsterdam University Medical Centers	Belgium, Denmark, France	—
3	2024 ESC Guidelines for the management of peripheral arterial and aortic diseases (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
4	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	NYU Langone Health	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 3

Claim — Contribution 3

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 2017 report, "Heart disease and stroke statistics—2017 update: a report from the American Heart Association," published in Circulation. This work serves as a definitive reference point for current cardiovascular health metrics.

ORIGINALITY: While the title indicates this is part of an ongoing series, the researcher's role in producing this specific update suggests a significant effort in synthesizing complex epidemiological data. The work addresses the need for timely, standardized statistical reporting to inform clinical practice and public health policy, filling a critical gap in accessible, authoritative data.

SIGNIFICANCE: The paper has accumulated over 65,000 citations, indicating widespread reliance on these statistics within the scientific community. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has been adopted broadly across the field rather than being cited primarily by the researcher's own network or institution.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

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

2017 · Circulation · 65,658 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	2024 ESC Guidelines for the management of peripheral arterial and aortic diseases (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
2	Global Impacts of Western Diet and Its Effects on Metabolism and Health: A Narrative Review	European University of Madrid, Nebrija University, Universidad Europea de Madrid	Spain	—

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
UT Southwestern Medical Center	United States	—	5
Johns Hopkins University School of Medicine	United States	—	4
Patient Representative	United Kingdom	—	4
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	4

Institution	Country	World ranking	Citing papers
Beth Israel Deaconess Medical Center and Harvard Medical School	United States	—	4
University of Chicago	United States	SCImago #124 · THE 15 · QS 13	4
Beth Israel Deaconess Medical Center; Harvard Medical School	United States	—	4
Stanford University	United States	SCImago #18 · THE =5 · QS 3	4
National Institutes of Health	United States	SCImago #44	3
Yale University	United States	SCImago #76 · THE 10 · QS 21	3
Beth Israel Deaconess Medical Center	United States	SCImago #647	3
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	3
Nemours Children's Health	United States	—	3
National Heart, Lung, and Blood Institute	United States	SCImago #345	3
Columbia University	United States	SCImago #65 · THE 20 · QS =38	3

Geographic distribution of citing authors

Country	Citing papers
United States	6
Canada	4
Spain	4
Belgium	3
United Kingdom	3
France	3
Poland	3
Germany	3
Italy	3
Netherlands	2
Brazil	2
China	2

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	Inflammation and Atherosclerosis	3	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Collaborative meta-analysis of randomised trials of antiplatelet therapy for prevention of death, myocardial infarction, and stroke in high risk patients	4	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Heart disease and stroke statistics—2017 update: a report from the American Heart Association	2	8 CFR 204.5(i)(3) — Outstanding Researcher