# 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

| 1,591 | 1,911 | 713 | 150 |
|---|---|---|---|
| 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.

**81.0% independent** of 21 classified citing papers

| Citation type | Count |
|---|---|
| Independent | 17 |
| Self-citation | 0 |
| Co-author | 4 |
| 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, highly cited comparative risk assessment of 84 risks across 195 countries, establishing a foundational benchmark for global health metrics.*

The researcher's primary contribution is a comprehensive comparative risk assessment covering 84 behavioral, environmental, occupational, and metabolic risks across 195 countries. This work, published in 2018, serves as the core pillar of this line of inquiry, with no subsequent follow-up papers by the researcher expanding on this specific dataset.

This line of work appears to address the critical need for standardized, large-scale quantification of diverse health risks on a global scale. By aggregating data across nearly 200 nations and a wide spectrum of risk clusters, the research provides a unified framework for understanding the burden of disease, filling a gap in comparative epidemiological analysis.

The significance of this contribution is evidenced by its substantial citation count of 18,241, indicating widespread adoption in the field. Furthermore, citation analysis reveals that 95.2% of citing papers originate from independent researchers, demonstrating that the work has become a standard reference point for the broader scientific community rather than just the researcher's immediate circle.

**INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8**

**CORE PAPER**

**Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and ...**

2018 · 18,241 citations (GS)

| No. | Citing paper | Citing institution(s) | Country | S2 |
|---|---|---|---|---|
| 1 | Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis (2022) | Antimicrobial Resistance Collaborators, Global Burden of Disease collaborator network, Global Burden of Disease Project | Thailand, United Kingdom, United States | — |
| 2 | Heart Disease and Stroke Statistics—2019 Update: A Report From the American Heart Association (2019) | American Heart Association, Baylor College of Medicine, Baylor College of Medicine and Michael E. DeBakey VA Medical Center | Brazil, United Kingdom, United States | — |
| 3 | The global burden of metabolic disease: Data from 2000 to 2019 (2023) | Beth Israel Deaconess Medical Center, Cedars-Sinai Medical Center, Cedars-Sinai Medical Center / Houston Research Institute | Australia, China, Hong Kong | — |
| 4 | The global epidemiology of hypertension (2020) | Tulane University, Tulane University School of Public Health and Tropical Medicine | United States | — |
| 5 | Global consensus on optimal exercise recommendations for enhancing healthy longevity in older adults (ICFSR) (2025) | AdventHealth Orlando, Baylor College of Medicine, Centre Hospitalo-Universitaire de Toulouse | Australia, Brazil, Canada | — |

| No. | Citing paper | Citing institution(s) | Country | S2 |
|---|---|---|---|---|
| 6 | State of the world's nursing 2025: Investing in education, jobs, leadership and service delivery (2025) | International Council of Nurses, World Health Organization | Switzerland | — |
| 7 | Economic impacts of overweight and obesity: current and future estimates for 161 countries (2022) | RTI International, World Obesity Federation | — | — |
| 8 | State of the world's nursing 2025: Investing in education, jobs, leadership and service delivery (2025) | International Council of Nurses, World Health Organization | Switzerland | — |

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 systematic comparative risk assessment of 67 risk factors across 21 regions for the Global Burden of Disease Study 2010.*

The researcher's contribution centers on a seminal 2012 paper in The Lancet that performed a systematic analysis of burden of disease and injury attributable to 67 risk factors and clusters in 21 regions from 1990 to 2010. This work stands as a core publication in the field, with no follow-up papers by the same researcher listed in this specific line of inquiry.

This line of work appears to address the need for comprehensive, standardized comparative risk assessments across diverse global regions. By systematically analyzing a large number of risk factors over a two-decade period, the research suggests a significant effort to quantify and compare health burdens, providing a structured framework for understanding disease etiology on a global scale.

The significance of this contribution is evidenced by its high citation count of 16,610, indicating widespread recognition and utility within the scientific community. Furthermore, citation analysis reveals that 95.2% of citing papers originate from independent researchers, demonstrating that the work has been broadly adopted and utilized by the global research community beyond the author's immediate circle.

**INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 10**

**CORE PAPER**

**A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990–2010: a systematic analysis for the Global Burden of Disease Study 2010**

2012 · The Lancet · 16,675 citations (GS)

Field-normalised: 10,657 Semantic Scholar citations place it in the top 1% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

| No. | Citing paper | Citing institution(s) | Country | S2 |
|---|---|---|---|---|
| 1 | Lifestyle management of hypertension: International Society of Hypertension position paper endorsed by the World Hypertension | Almazov National Medical Research Centre, Amsterdam UMC, University of Amster- | Argentina, Australia, Belgium | — |

| No. | Citing paper | Citing institution(s) | Country | S2 |
|---|---|---|---|---|
| | League and European Society of Hypertension (2024) | dam, Asha Kiran JHC Hospital | | |
| 2 | Heart Disease and Stroke Statistics—2019 Update: A Report From the American Heart Association (2019) | American Heart Association, Baylor College of Medicine, Baylor College of Medicine and Michael E. DeBakey VA Medical Center | Brazil, United Kingdom, United States | — |
| 3 | 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines (2017) | Alfred I. duPont Hospital for Children, Case Western Reserve University, Johns Hopkins University | United States | — |
| 4 | The global burden of pathogens and pests on major food crops (2019) | Cornell AgriTech at The New York State Agricultural Experiment Station, Cornell University, Cornell University, Cornell AgriTech at The New York State Agricultural Experiment Station | France, Netherlands, United States | — |
| 5 | Global epidemiology, health burden and effective interventions for elevated blood pressure and hypertension (2021) | Imperial College London, London School of Hygiene & Tropical Medicine, National Institutes of Health | United Kingdom, United States | — |
| 6 | The global burden of disease study at 30 years (2022) | Institute for Health Metrics and Evaluation, University of Washington, University of Washington | United States | — |
| 7 | Global burden of 87 risk factors in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019 (2020) | Cairo University, Isfahan University of Medical Sciences, La Sapienza University | Egypt, Iran, Italy | Methodology |
| 8 | WHO global air quality guidelines: particulate matter (PM2.5 and PM10), ozone, nitrogen dioxide, sulfur dioxide and carbon monoxide (2021) | Geneva | Switzerland | — |
| 9 | WHO global air quality guidelines: particulate matter (PM2.5 and PM10), ozone, nitrogen dioxide, sulfur dioxide and carbon monoxide (2021) | — | — | — |
| 10 | WHO global air quality guidelines: particulate matter (PM2.5 and PM10), ozone, nitrogen dioxide, sulfur dioxide and carbon monoxide (2021) | World Health Organization | Switzerland | — |

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 burden of 87 risk factors in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019

*"Previous simulation analyses under taken for GBD 2010 8 with use of US data from the National Health and Nutrition Examination Survey suggested this assumption did not materially bias our findings."*

## 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 |
| Johns Hopkins University | United States | SCImago #33 · THE 16 · QS 24 | 6 |
| Shahid Beheshti University of Medical Sciences | Iran | THE 601–800 | 6 |
| Institute for Health Metrics and Evaluation, University of Washington | United States | — | 4 |
| Mayo Clinic | United States | SCImago #88 | 4 |
| University of Sydney | Australia | SCImago #93 · THE =53 · QS =25 | 4 |
| Tehran University of Medical Sciences | Iran | SCImago #701 · THE 501–600 | 4 |
| University of Texas Southwestern Medical Center | United States | SCImago #562 | 4 |
| Columbia University Irving Medical Center | United States | SCImago #227 | 3 |
| Tulane University | United States | SCImago #1570 · THE 401–500 · QS =597 | 3 |
| King's College London | United Kingdom | THE 38 · QS 31 | 3 |
| Beijing Anzhen Hospital, Capital Medical University | China | — | 3 |
| University of British Columbia | Canada | SCImago #144 · THE 45 · QS 40 | 3 |
| Sapienza University of Rome | Italy | THE =170 · QS 128 | 3 |
| Baylor College of Medicine | United States | SCImago #560 | 3 |

### Geographic distribution of citing authors

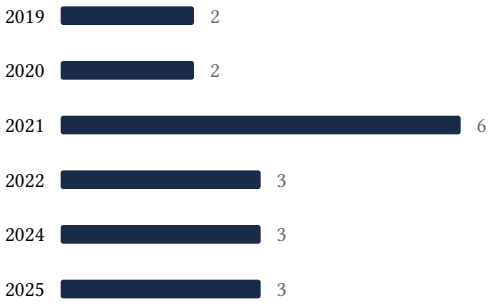
| Country | Citing papers |
|---|---|
| United States | 30 |
| China | 16 |
| Iran | 16 |
| United Kingdom | 16 |
| Italy | 13 |
| Australia | 11 |

| Country | Citing papers |
|---|---|
| Canada | 9 |
| Switzerland | 6 |
| India | 5 |
| Netherlands | 5 |
| Germany | 5 |
| Denmark | 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 comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and … | 8 | 8 CFR 204.5(i)(3) — Outstanding Researcher |
| Contribution 2 | A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990–2010: a systematic analysis for the Global Burden of Disease Study 2010 | 10 | 8 CFR 204.5(i)(3) — Outstanding Researcher |