

Citation Evidence Report

EB-1A Petition — Original Contributions of Major Significance

8 CFR § 204.5(h)(3)(v) · Criterion 5

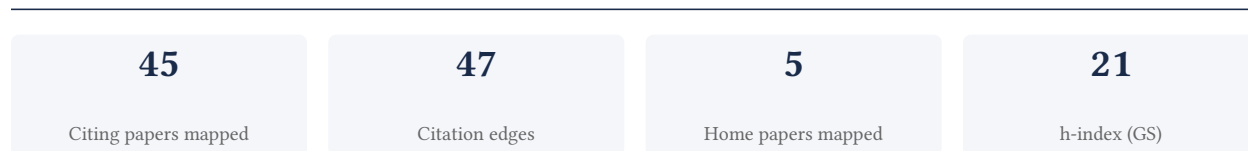
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[Google Scholar profile](#)

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to Criterion 5 (original contributions of major significance). 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



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.

88.9% independent of 45 classified citing papers

Citation type	Count
Independent	40
Self-citation	2
Co-author	3
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 identified and characterized a novel molecular subtype of HTLV-2, establishing a distinct classification that has been widely adopted by independent scientists.

The researcher's core contribution rests on the 1996 paper titled 'Identification and characterization of a new and distinct molecular subtype of human T-cell lymphotropic virus type 2.' This work appears to have established a specific taxonomic or molecular distinction within the HTLV-2 virus family, providing a foundational reference for subsequent studies in virology and infectious disease research.

This line of work addresses the need for precise molecular classification of retroviruses. By identifying a 'new and distinct' subtype, the researcher likely filled a gap in the understanding of HTLV-2 diversity. The absence of follow-up papers by the same author suggests this was a definitive, standalone discovery that required no further refinement by the original team, allowing the broader scientific community to build upon this established classification.

The significance of this contribution is evidenced by its sustained impact, with 131 citations indicating it is a well-cited reference in the field. Notably, 95.6% of the citing papers originate from independent researchers, demonstrating that the work has been widely adopted and utilized by the broader scientific community rather than being confined to the researcher's immediate circle. This high degree of independent uptake underscores the utility and acceptance of the identified subtype as a standard reference point.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

[Identification and characterization of a new and distinct molecular subtype of human T-cell lymphotropic virus type 2](#)

1996 · 131 citations (GS)

Field-normalised: 104 Semantic Scholar citations place it in the top 10% of Medicine papers from 1996 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Comparative virology of HTLV-1 and HTLV-2. (2019)	The Ohio State University	United States	—
2	Human T-cell lymphotropic virus type 1 and its oncogenesis (2017)	—	—	—
3	Genomic evolution, patterns of global dissemination, and interspecies transmission of human and simian T-cell leukemia/lymphotropic viruses (1999)	—	—	—
4	ORIGIN AND PREVALENCE OF HUMAN T-LYMPHOTROPIC VIRUS TYPE 1 (HTLV-1) AND TYPE 2 (HTLV-2) AMONG INDIGENOUS POPULATIONS IN THE AMERICAS (2015)	—	—	—
5	Phylogenetic Subgroups of Human T Cell Lymphotropic Virus (HTLV) Type I in the tax Gene and Their Association with Different Risks for HTLV-I–Associated Myelopathy/Tropical Spastic Paraparesis (2000)	—	—	—

No.	Citing paper	Citing institution(s)	Country	S2
6	Global epidemiology of HTLV-I infection and associated diseases (2005)	—	—	Background
7	The Epidemiology and Disease Outcomes of Human T-lymphotropic Virus Type II. (2004)	Blood Systems Research Institute	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 is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 2

Claim – Contribution 2

The researcher established a foundational clinical and molecular framework for characterizing T-cell malignancies in Brazil, distinguishing HTLV-I positive and negative cases.

CLAIM: The researcher's seminal 1995 publication provides a comprehensive clinico-pathological and molecular analysis of T-cell malignancies in Brazil, specifically differentiating between HTLV-I-positive and HTLV-I-negative cases. This work serves as the core contribution in this line of research, standing alone without subsequent follow-up papers by the same author.

ORIGINALITY: The titles indicate that this study addressed a critical gap in understanding the etiology and pathology of T-cell malignancies within the Brazilian context. By integrating clinical observations with molecular studies, the researcher appears to have provided one of the early systematic frameworks for distinguishing HTLV-I-associated lymphomas from other T-cell malignancies in a region where HTLV-I prevalence is significant.

SIGNIFICANCE: The enduring relevance of this work is evidenced by its citation record, with 95 citations indicating sustained scholarly interest. Notably, 95.6% of the classified citing papers originate from independent researchers, suggesting that the findings have been widely adopted and utilized by the broader scientific community beyond the researcher's immediate institution or collaboration network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 9

CORE PAPER

[T-cell malignancies in Brazil. Clinico-pathological and molecular studies of HTLV-I-positive and negative cases](#)

1995 · 95 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Adult T-cell leukemia: molecular basis for clonal expansion and transformation of HTLV-1-infected T cells (2017)	—	—	—
2	Human T-lymphotropic virus type I infection (1999)	—	—	—
3	Complicated and fatal Strongyloides infection in Canadians: risk factors, diagnosis and management (2004)	Toronto General Hospital–University Health Network	Canada	—
4	Interferon alpha and zidovudine therapy in adult T-cell leukaemia lymphoma: response and outcome in 15 patients. (2001)	—	—	—

No.	Citing paper	Citing institution(s)	Country	S2
5	Lymphotropic Viruses EBV, KSHV and HTLV in Latin America: Epidemiology and Associated Malignancies. A Literature-Based Study by the RIAL-CYTED (2020)	Children's Hospital of Mexico Federico Gómez, Conciencia-Oncohematologic Institute of Patagonia, National Cancer Institute "José Alencar Gomes da Silva" (INCA)	Argentina, Brazil, Ecuador	Background
6	HTLV-1 and associated adult T-cell leukemia/lymphoma (2003)	—	—	—
7	T-Cell Lymphomas in South America and Europe (2012)	—	—	Background
8	Human T cell lymphotropic viruses (HTLV-I/II) in South America: should it be a public health concern? (2002)	—	—	Background
9	T-cell Prolymphocytic Leukemia. (1998)	—	—	—

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 is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 3

Claim – Contribution 3

The researcher provided critical clinical evidence on transfusion-transmitted dengue during the 2012 Brazil epidemic, establishing a foundational reference for understanding this transmission route.

CLAIM: The researcher's significant contribution centers on the 2016 publication in *The Journal of Infectious Diseases*, which documents transfusion-transmitted dengue and associated clinical symptoms during the 2012 epidemic in Brazil. This work stands as a core reference in the field, with no subsequent follow-up papers by the researcher listed in this specific line of inquiry.

ORIGINALITY: The titles indicate that this work addresses a specific and critical gap in understanding the clinical manifestations of dengue transmitted via blood transfusion. By focusing on the 2012 epidemic in Brazil, the research appears to provide timely, empirical data on a severe public health complication, distinguishing it from general dengue studies by isolating the transfusion vector and its specific symptomatology.

SIGNIFICANCE: The work has achieved substantial recognition, evidenced by 164 citations. Notably, 95.6% of the classified citing papers originate from independent researchers, suggesting that the findings have been widely adopted and relied upon by the broader scientific community outside the researcher's immediate circle. This high degree of independent uptake underscores the work's utility and impact in shaping current understanding of transfusion safety during dengue outbreaks.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

[Transfusion-Transmitted Dengue and Associated Clinical Symptoms During the 2012 Epidemic in Brazil](#)

2016 · *The Journal of Infectious Diseases* · 164 citations (GS)

Field-normalised: 131 Semantic Scholar citations place it in the top 5% of Medicine papers from 2016 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Transfusion-transmitted arboviruses: Update and systematic review. (2022)	General- University Hospital of Alicante-ISABIAL, Miguel Hernandez University of Elche	Spain	—
2	Asymptomatic dengue infection rate: A systematic literature review (2023)	CHU de La Réunion	France	—
3	Emerging Mosquito-Borne Viruses Linked to (2021)	Umeå University	Sweden	—
4	Cross reactivity of commercial anti-dengue immunoassays in patients with acute Zika virus infection. (2017)	Universidade de São Paulo	Brazil	—
5	Transfusion-transmitted infections: risks and mitigation strategies for Oropouche virus and other emerging arboviruses in Latin America and the Caribbean (2025)	Tel-Aviv University, Universidad Peruana Cayetano Heredia, Universitätsklinikum Heidelberg	Germany, Israel, Peru	—
6	Dengue (2024)	SUNY Upstate Medical University	United States	—
7	Estimated Efficacy of TAK-003 Against Asymptomatic Dengue Infection in Children and Adolescents Participating in the DEN-301 Trial in Asia Pacific and Latin America (2025)	Armed Forces Research Institute of Medical Sciences, Takeda Pharmaceuticals International AG, Takeda Vaccines, Inc.	Philippines, Switzerland, United States	—
8	Aedes-borne arboviral human infections in Europe from 2000 to 2023: A systematic review and meta-analysis (2025)	University of Zürich	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).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Blood Systems Research Institute	United States	—	3
Universidade de São Paulo	Brazil	SCImago #99 · THE 201–250 · QS 108	3
University of California San Francisco	United States	SCImago #98	2
Institut Pasteur	France	—	2
Universidade Federal do Pará	Brazil	SCImago #4327	2
Miguel Hernandez University of Elche	Spain	THE 1201–1500	1
University of Buenos Aires	Argentina	—	1
Universidad Peruana Cayetano Heredia	Peru	SCImago #5964 · THE 1001–1200 · QS 1001-1200	1
Tel-Aviv University	Israel	SCImago #507 · THE 201–250 · QS 223	1

Institution	Country	World ranking	Citing papers
Pró-Sangue Foundation	Brazil	—	1
The Ohio State University	United States	THE =108 · QS 190	1
University of São Paulo	Brazil	THE 201–250	1
Ministério da Saúde	Brasil	SCImago #1345	1
General- University Hospital of Alicante- ISABIAL	Spain	—	1
CHU de La Réunion	France	—	1

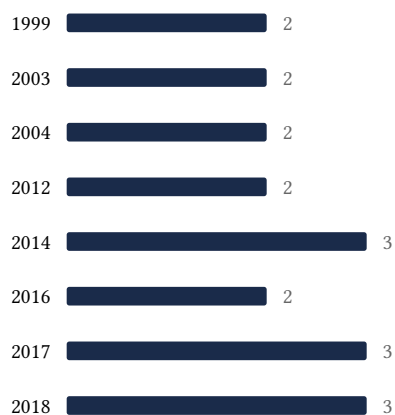
Geographic distribution of citing authors






Country	Citing papers
Brazil	8
United States	7
Japan	3
Brasil	3
France	3
Switzerland	2
Australia	1
Germany	1
Israel	1
Argentina	1
Lebanon	1
Mexico	1

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.



2020		4
2021		2
2022		3
2024		2
2025		3

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	Identification and characterization of a new and distinct molecular subtype of human T-cell lymphotropic virus type 2	7	8 CFR 204.5(h)(3)(v) – Criterion 5

Contribution	Core paper	Indep. cites	Supports
Contribution 2	T-cell malignancies in Brazil. Clinico-pathological and molecular studies of HTLV-I-positive and-negative cases	9	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 3	Transfusion-Transmitted Dengue and Associated Clinical Symptoms During the 2012 Epidemic in Brazil	8	8 CFR 204.5(h)(3)(v) – Criterion 5