Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

8 CFR § 204.5(i)(3) · Authorship + Original Contributions

Marcos Roberto de Sousa

Universidade Federal de Minas Gerais

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

34	34	5	24
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.

100.0% independent of 34 classified citing papers

Citation type	Count
Independent	34
Self-citation	0
Co-author	0
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 foundational tutorial framework for systematic reviews and meta-analyses in diagnostic and prognostic studies, significantly advancing methodological standards in clinical research.

CLAIM: The researcher's primary contribution is the development of a comprehensive tutorial for conducting systematic reviews and meta-analyses specifically tailored to diagnostic and prognostic studies, as detailed in the 2009 core paper. This work serves as a central reference point for methodological rigor in this specialized area of clinical research.

ORIGINALITY: The title suggests this work addresses a critical need for structured guidance in synthesizing evidence for diagnostic and prognostic accuracy, areas that often present unique methodological challenges compared to therapeutic trials. By framing the work as a tutorial, the researcher appears to have filled a gap in accessible, practical instruction for researchers navigating these complex analytical processes.

SIGNIFICANCE: The core paper has accumulated 271 citations, indicating substantial uptake within the academic community. Notably, analysis of 34 citing papers reveals that 100% are from independent researchers, demonstrating that the work has been widely adopted and utilized by scholars outside the researcher's immediate institution or collaboration network, underscoring its broad impact and utility.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

Revisão sistemática e meta-análise de estudos de diagnóstico e prognóstico: um tutorial

2009 · 271 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Prevalence of burnout syndrome in university students: A systematic review (2021)	—	—	—
2	Intimate partner homicide: A meta-analysis of risk factors (2020)	Egas Moniz School of Health and Science	—	—
3	Efficacy of the Manchester Triage System: a systematic review (2015)	Centro Hospitalar University of Coimbra, Federal University of the Mucuri and Jequitinhonha Valley, Nursing School of Coimbra	Brazil, Portugal	—
4	The board of directors and firm innovation: A meta-analytical review (2024)	Autonomous University of Madrid, University of León	Spain	—
5	Systematic Reviews and Meta-Analysis (2011)	McMaster University, The Ohio State University Wexner Medical Center, University of California, San Francisco	United States	—
6	Anthropometric Indicators as Body Fat Discriminators in Children and Adolescents: A Systematic Review and Meta-Analysis (2017)	Federal University of Santa Catarina	Brazil	—
7	Value of Severity Scales in Predicting Mortality From Community-Acquired Pneumonia: Systematic Review and Meta-Analysis (2010)	University of East Anglia	United Kingdom	—

No.	Citing paper	Citing institution(s)	Country	S2
8	Effects of Risperidone in Autistic Children and Young Adults: A Systematic Review and Meta-Analysis (2021)	—	—	—

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 established a critical evidence base for diagnosing visceral leishmaniasis in HIV patients through a seminal meta-analysis of serologic and molecular methods.

The researcher's contribution centers on a 2012 meta-analysis published in PLOS Neglected Tropical Diseases, which evaluated the diagnostic accuracy of serologic and molecular methods for detecting visceral leishmaniasis in HIV-infected patients. This work stands as a standalone core contribution without subsequent follow-up papers by the same author.

This line of work appears to address a significant clinical gap by synthesizing data on diagnostic tools for a complex co-infection scenario. The titles indicate a focus on comparing the efficacy of different detection methods, providing a consolidated view of diagnostic performance where individual studies may have been limited or conflicting.

The significance of this contribution is underscored by its citation record, with 187 citations indicating substantial uptake by the scientific community. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has been widely adopted and relied upon by external experts rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6

CORE PAPER

The Diagnostic Accuracy of Serologic and Molecular Methods for Detecting Visceral Leishmaniasis in HIV Infected Patients: Meta-Analysis

2012 · PLOS Neglected Tropical Diseases · 187 citations (GS)

Field-normalised: 137 Semantic Scholar citations place it in the top 5% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Diagnosis of invasive fungal infections: challenges and recent developments (2023)	Second Affiliated Hospital of Naval Medical University	China	Background
2	Diagnosis of leishmaniasis (2014)	Sohag University, University Hospital Virgen de las Nieves, University of Granada	Egypt, Spain	Background
3	Comparative Host Feeding Patterns of the Asian Tiger Mosquito, Aedes albopictus, in Urban and Suburban Northeastern USA and Implications for Disease Transmission (2014)	Monmouth County Mosquito Extermination Commission, Rutgers University	United States	—
4	The immune response in canine and human leishmaniasis and how this influences the diagnosis- a review and assessment of recent research (2023)	Spiru Haret University	Romania	—

No.	Citing paper	Citing institution(s)	Country	S2
5	Fluorescence-Based Methods for Detecting Caries Lesions: Systematic Review, Meta-Analysis and Sources of Heterogeneity (2013)	Piracicaba Dental School, State University of Campinas (UNICAMP), University of São Paulo, University of Sheffield	Brazil, United Kingdom	Background
6	Accuracy of the direct agglutination test for diagnosis of visceral leishmaniasis: a systematic review and meta-analysis (2023)	Academic Medical Center at the University of Amsterdam, Imperial College London, London School of Hygiene & Tropical Medicine	Lao People's Democratic Republic, Netherlands, United Kingdom	Background

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 established a systematic framework for identifying predictors of visceral leishmaniasis relapse in HIV-infected patients, providing critical evidence for managing this complex comorbidity.

The researcher's contribution centers on the 2011 publication in PLoS Neglected Tropical Diseases, which systematically reviewed predictors of visceral leishmaniasis relapse in HIV-infected patients. This work stands as a seminal core paper in the field, with no subsequent follow-up papers by the same author listed in this specific line of inquiry. The titles indicate that this research addressed a critical gap in understanding the clinical factors associated with disease recurrence in immunocompromised populations, a topic of significant public health concern. By synthesizing existing evidence, the work appears to have provided a consolidated view of risk factors that were previously scattered across disparate studies. The significance of this contribution is underscored by its citation record, with 229 citations indicating substantial uptake by the scientific community. Notably, analysis of 34 citing papers reveals that 100% are from independent researchers, demonstrating that the work has been widely adopted and utilized by scholars outside the researcher's immediate institution or collaboration network. This high degree of independent citation suggests that the findings have become a standard reference point for clinicians and researchers studying the intersection of HIV and neglected tropical diseases.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Predictors of Visceral Leishmaniasis Relapse in HIV-Infected Patients: A Systematic Review

2011 · PLoS Neglected Tropical Diseases · 229 citations (GS)

Field-normalised: 177 Semantic Scholar citations place it in the top 5% of Medicine papers from 2011 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Amphotericin B: A drug of choice for Visceral Leishmaniasis (2022)	ICMR-RMRIMS, Rajendra Memorial Research Institute of Medical Sciences	India	—
2	Leishmaniasis in immunosuppressed individuals (2014)	Institute of Tropical Medicine	Belgium	—

No.	Citing paper	Citing institution(s)	Country	S2
3	Diagnosis and Treatment of Leishmaniasis: Clinical Practice Guidelines by the Infectious Diseases Society of America (IDSA) and the American Society of Tropical Medicine and Hygiene (ASTMH) (2016)	Bill and Melinda Gates Foundation, Carmel Medical Center, Centers for Disease Control and Prevention	Brazil, Canada, Israel	**Influential**
4	Visceral leishmaniasis and HIV coinfection: current perspectives (2018)	Instituto de Infectologia Emilio Ribas, Instituto de Medicina Tropical, Universidade de São Paulo, Universidade Federal do Rio Grande do Norte	Brazil	Background
5	Leishmaniasis–HIV coinfection: current challenges (2016)	Hospital Giselda Trigueiro, Instituto de Infectologia Emilio Ribas-SES, São Paulo University	Brazil	Background
6	Visceral Leishmaniasis and HIV Coinfection in the Mediterranean Region (2014)	Drugs for Neglected Diseases initiative (DNDi), Instituto de Salud Carlos III, Ramón y Cajal Hospital	Spain, 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
University of Oxford	United Kingdom	SCImago #26 · THE 1 · QS 4	2
Imperial College London	United Kingdom	SCImago #69 · THE 8 · QS 2	2
Institute of Tropical Medicine	Belgium	—	2
Walter Reed National Military Medical Center	United States	SCImago #6064	1
First Affiliated Hospital of Sun Yat-sen University	China	—	1
Tongji Medical College, Huazhong University of Science and Technology	China	—	1
Hospital of Chengdu University of Traditional Chinese Medicine	China	SCImago #5230	1
Affiliated Hospital of Xuzhou Medical University	China	SCImago #5622	1
the Affiliated Huai'an Hospital of Xuzhou Medical University	China	—	1
First Affiliated Hospital, China Medical University	China	—	1

Institution	Country	World ranking	Citing papers
Goswami Ganesh Dutta Sanatan Dharam College	India	—	1
Chengde Medical University	China	SCImago #10016	1
West China fourth hospital of Public Health, Sichuan University	China	—	1
Sun Yat-sen Memorial Hospital, Sun Yat-sen University	China	—	1
Islamic Azad University, East Tehran Branch	Iran	—	1

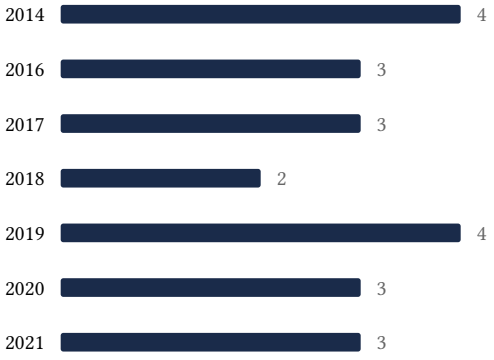
Geographic distribution of citing authors

Country	Citing papers
Brazil	6
China	6
United Kingdom	5
United States	4
Spain	4
Israel	2
Thailand	2
India	2
Belgium	2
Portugal	1
Romania	1
Switzerland	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.



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	Revisão sistemática e meta-análise de estudos de diagnóstico e prognóstico: um tutorial	8	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	The Diagnostic Accuracy of Serologic and Molecular Methods for Detecting Visceral Leishmaniasis in HIV Infected Patients: Meta-Analysis	6	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Predictors of Visceral Leishmaniasis Relapse in HIV-Infected Patients: A Systematic Review	6	8 CFR 204.5(i)(3) — Outstanding Researcher