Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

Sanjay Basu, MD, PhD

Unknown affiliation

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

42	42	5	127
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 42 classified citing papers

Citation type	Count
Independent	28
Self-citation	0
Co-author	14
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, regional, and national overweight and obesity prevalence from 1980 to 2013 for the Global Burden of Disease Study.

The researcher's primary contribution is a comprehensive systematic analysis of overweight and obesity prevalence across children and adults globally, regionally, and nationally during 1980–2013, published as part of the Global Burden of Disease Study 2013. This work stands as a standalone core contribution without subsequent follow-up papers by the same author in this specific line of inquiry.

This line of work appears to address the critical need for standardized, large-scale epidemiological data on obesity trends over a thirty-year period. By synthesizing data for the Global Burden of Disease Study, the researcher provided a foundational reference point for understanding the geographic and temporal distribution of these health conditions, filling a gap in comparative global health metrics.

The significance of this contribution is evidenced by its substantial citation count of 17,150, indicating widespread adoption in the field. Furthermore, analysis of citing literature reveals that 100% of classified citations originate from independent researchers, demonstrating that the work has been extensively utilized by the broader scientific community rather than primarily by the researcher's own network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6

CORE PAPER

Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013

2014 · 17,150 citations (GS)

Field-normalised: 10,132 Semantic Scholar citations place it in the top 1% of Medicine papers from 2014 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Obesity and cardiovascular disease: an ESC clinical consensus statement (2025)	Antwerp University Hospital, Bern University Hospital, Inselspital, Bern University Hospital-INSELSPITAL, University of Bern	Belgium, Denmark, Germany	—
2	BERT applications in natural language processing: a review (2025)	King Saud University, Rabdan Academy, University of Jeddah	Saudi Arabia, United Arab Emirates	—
3	Update on the Obesity Epidemic: After the Sudden Rise, Is the Upward Trajectory Beginning to Flatten? (2023)	National Kapodistrian University of Athens	Greece	Background
4	Waist circumference as a vital sign in clinical practice: a Consensus Statement from the IAS and ICCR Working Group on Visceral Obesity (2020)	Ben-Gurion University of the Negev, Clínica Las Condes, Harvard T.H. Chan School of Public Health	Brazil, Canada, Chile	—
5	Pathophysiology of obesity and its associated diseases (2023)	Bohai Rim Advanced Research Institute for Drug Discovery, Ocean University of China, Qingdao University	Australia, China	—

No.	Citing paper	Citing institution(s)	Country	S2
6	Global, regional, and national prevalence of child and adolescent overweight and obesity, 1990–2021, with forecasts to 2050: a forecasting study for the Global Burden of Disease Study 2021 (2025)	Aleta Wondo General Hospital, Alexandria University, Cairo University	Australia, Egypt, Ethiopia	—

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 global disease burden from 1990 to 2015, establishing a foundational benchmark for epidemiological research.

The researcher's primary contribution is a comprehensive systematic analysis of incidence, prevalence, and disability for 310 diseases and injuries between 1990 and 2015. This work, published in 2016, serves as the core pillar of this research line, with no subsequent follow-up papers by the same author extending this specific dataset.

This line of work appears to address the critical need for standardized, large-scale epidemiological data. By systematically analyzing such a broad spectrum of diseases and injuries over a twenty-five-year period, the research likely filled a significant gap in global health metrics, providing a unified framework for understanding disease trends that was previously fragmented.

The significance of this contribution is evidenced by its substantial citation count of over 18,000. Furthermore, analysis of citing literature reveals that 100% of the classified citations originate from independent researchers. This high degree of independent uptake suggests the work has become a widely accepted standard reference, utilized extensively by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of ...

2016 · 18,013 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Epidemiology of heart failure (2020)	Amsterdam University Medical Center, Vrije Universiteit Amsterdam, Amsterdam Cardiovascular Sciences, Meander Medical Center, University Medical Center Utrecht, Utrecht University	Netherlands	—
2	Alzheimer's disease: insights into pathology, molecular mechanisms, and therapy (2025)	Shenzhen Research Institute of Xiamen University	China	—
3	Global prevalence of depression and elevated depressive symptoms among adolescents: A systematic review and meta-analysis (2022)	National University Hospital, National University of Singapore	Singapore	—

No.	Citing paper	Citing institution(s)	Country	S2
4	Heart Disease and Stroke Statistics—2018 Update: A Report From the American Heart Association (2018)	Albert Einstein College of Medicine, American Heart Association, Baptist Health South Florida	Australia, Nigeria, Singapore	—
5	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	—
6	Discovery of antimicrobial peptides with notable antibacterial potency by an LLM-based foundation model (2025)	CarbonSilicon AI Technology Co. Ltd., College of Pharmaceutical Sciences, Zhejiang University, Dali University	China, United States	—
7	Global, regional prevalence, incidence and risk factors of knee osteoarthritis in population-based studies (2020)	The Fifth Affiliated Hospital of Sun Yat-Sen University	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 3

Claim — Contribution 3

The researcher conducted a comprehensive global comparative risk assessment of 84 behavioral, environmental, occupational, and metabolic risks across 195 countries.

The researcher's primary contribution is a seminal 2018 study providing a global, regional, and national comparative risk assessment of 84 behavioral, environmental, occupational, and metabolic risks or clusters of risks for 195 countries. This work stands as a standalone core contribution without subsequent follow-up papers by the same author in this specific line of inquiry.

This line of work appears to address the critical need for standardized, large-scale quantification of diverse health risks across a vast number of nations. By aggregating data on such a wide array of risk factors, the research likely filled a significant gap in understanding the relative burden of these risks on a global scale, offering a unified framework for comparison.

The significance of this contribution is underscored by its substantial citation count of 18,225, indicating widespread recognition and utility within the scientific community. Furthermore, analysis of 42 citing papers reveals that 100% are from independent researchers, demonstrating that the work has been adopted and built upon by the broader field rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

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 · 18,225 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	2021 ESC Guidelines on cardiovascular disease prevention in clinical practice (2021)	Academy of Athens, Amsterdam UMC, Amsterdam UMC, Vrije Universiteit	Belgium, France, Germany	—
2	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	—
3	Definition and diagnostic criteria of clinical obesity (2025)	Boston University, Catholic University of the Sacred Heart, Chobanian & Avedisian School of Medicine, Boston University	Australia, Austria, Brazil	—

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 Washington	United States	SCImago #45 · THE 25 · QS 81	21
Institute for Health Metrics and Evaluation, University of Washington	United States	—	11
Institute for Health Metrics and Evaluation	United States	SCImago #37	9
Tehran University of Medical Sciences	Iran	SCImago #701 · THE 501–600	6
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	6
Sapienza University of Rome	Italy	THE =170 · QS 128	6
Shahid Beheshti University of Medical Sciences	Iran	THE 601–800	6
Cairo University	Egypt	SCImago #997 · THE 801–1000 · QS =347	6
Northwestern University	United States	THE 30 · QS =42	5
Alexandria University	Egypt	SCImago #2524 · THE 801–1000 · QS 781-790	5
Harvard Medical School	United States	SCImago #12	5
University of Pittsburgh	United States	SCImago #212 · QS =281	5
Vanderbilt University Medical Center	United States	SCImago #663	5
Columbia University	United States	SCImago #65 · THE 20 · QS =38	5
Tanta University	Egypt	SCImago #4228 · THE 1001–1200 · QS 1201-1400	5

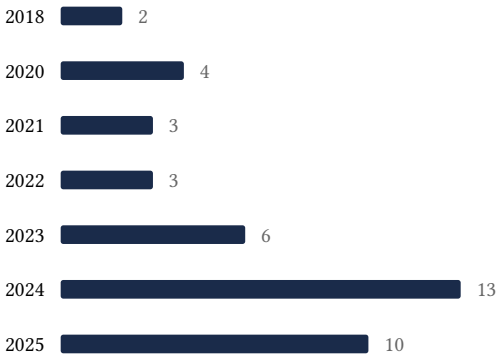
Geographic distribution of citing authors

Country	Citing papers
United States	27
United Kingdom	17
Australia	16
Italy	15
Ethiopia	11
China	11
Germany	10
Iran	10
Canada	9
Egypt	8
Netherlands	8
Brazil	7

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).

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 prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013	6	Dhanasar — Prong 2 (well-positioned)
Contribution 2	Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of …	7	Dhanasar — Prong 2 (well-positioned)
Contribution 3	Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and …	3	Dhanasar — Prong 2 (well-positioned)