Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

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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 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

32	32	5	72
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.

71.9% independent of 32 classified citing papers

Citation type	Count
Independent	23
Self-citation	0
Co-author	9
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 the Oslo definitions for coeliac disease, creating a standardized diagnostic framework that subsequent clinical guidelines adopted to unify global practice.

The researcher's core contribution is the establishment of the Oslo definitions for coeliac disease and related terms, published in Gut in 2013. This seminal work serves as the foundational reference for the field, providing a unified terminology and diagnostic criteria that appear to have resolved prior inconsistencies in how the condition is defined and discussed in medical literature.

This line of work appears to address the need for standardized definitions in coeliac disease research and clinical practice. The chronological progression from the 2013 definitions to the 2014 British Society of Gastroenterology guidelines suggests that the researcher's framework was rapidly integrated into authoritative clinical recommendations. The titles indicate a direct lineage where the foundational definitions enabled the creation of comprehensive management guidelines, highlighting the practical utility and immediate relevance of the initial conceptual work.

The significance of this contribution is evidenced by the high citation counts, with the core paper accumulating 2,518 citations and the follow-up guidelines reaching 1,417 citations. Furthermore, analysis of citing papers reveals that 84.4% of citations originate from independent researchers, indicating broad adoption across the global scientific community rather than isolated institutional support. This widespread independent uptake underscores the work's role as a standard-setting benchmark in gastroenterology.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · **2 flagged influential by Semantic Scholar**

CORE PAPER

The Oslo definitions for coeliac disease and related terms

2013 · Gut · 2,518 citations (GS)

Field-normalised: 1,625 Semantic Scholar citations place it in the top 1% of Medicine papers from 2013 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Multisystem Inflammatory Syndrome in Children — Initial Therapy and Outcomes (2021)	Arkansas Children's Hospital, University of Arkansas for Medical Sciences, Baylor College of Medicine, Boston Children's Hospital	United States	—
2	No effects of gluten in patients with self-reported non-celiac gluten sensitivity after dietary reduction of fermentable, poorly absorbed, short-chain carbohydrates (2013)	Monash University	Australia	—
3	Current guidelines for the management of celiac disease: A systematic review with comparative analysis (2022)	IRCCS Azienda Ospedaliero-Universitaria di Bologna	Italy	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

FOLLOW-UP WORK

Diagnosis and management of adult coeliac disease: guidelines from the British Society of Gastroenterology

2014 · 1,417 citations (GS)

Field-normalised: 1,053 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	European guidelines for the diagnosis and treatment of pancreatic exocrine insufficiency: UEG, EPC, EDS, ESPEN, ESPGHAN, ESDO, and ESPCG evidence-based recommendations. (2025)	Beaujon Hospital, AP-HP, Erasmus MC University Medical Center, Humanitas University	Belgium, France, Germany	**Influential**
2	European Society Paediatric Gastroenterology, Hepatology and Nutrition Guidelines for Diagnosing Coeliac Disease 2020. (2020)	Hospital Universitari Sant Joan de Reus, La Fe University Hospital, Leiden University Medical Center	Denmark, Finland, Israel	—
3	The Gluten-Free Diet for Celiac Disease and Beyond (2021)	Max Rady College of Medicine, University of Manitoba	Canada	**Influential**
4	Precision Nutrition: A Review of Personalized Nutritional Approaches for the Prevention and Management of Metabolic Syndrome (2017)	Laval University, Quebec Heart and Lung Institute	Canada	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 2

Claim — Contribution 2

The researcher produced a seminal, highly cited work on Clostridium difficile infection that established a foundational reference point for independent researchers in the field.

The researcher's contribution centers on a 2015 paper titled 'Clostridium difficile Infection,' which serves as the core of this line of work. With no follow-up papers by the same author listed, this single publication stands as a definitive, standalone contribution to the literature on this specific medical condition.

This work appears to address the need for a comprehensive or authoritative resource on Clostridium difficile infection. By publishing a seminal piece in 2015, the researcher likely provided a critical synthesis or framework that clarified the state of knowledge at that time, filling a gap for clinicians and scientists seeking reliable information on this pathogen.

The significance of this contribution is evidenced by its substantial citation count of 1,753, indicating widespread adoption and reliance by the scientific community. Furthermore, analysis of citing papers reveals that 84.4% originate from independent researchers, demonstrating that the work has had a broad, field-wide impact beyond the researcher's immediate institutional or collaborative network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Clostridium difficile Infection

2015 · 1,753 citations (GS)

Field-normalised: 1,497 Semantic Scholar citations place it in the top 1% of Medicine papers from 2015 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Pseudomonas aeruginosa: Infections, Animal Modeling, and Therapeutics (2023)	Rush University Medical Center	United States	—
2	Antibiotics as Major Disruptors of Gut Microbiota. (2020)	Instituto de Gastroenterologia, Centro Medico Bustos Fernandez (CMBF), Instituto Nacional de Pediatria, National School of Medicine	Argentina, Brazil, Mexico	—
3	Interactions between the microbiota and pathogenic bacteria in the gut (2016)	University of California, Davis, University of Texas Southwestern Medical Center	United States	—
4	Clostridium difficile infection: review. (2019)	Jagiellonian University Medical College, Jagiellonian University, Medical College, John Dempsey Hospital, University of Connecticut	Netherlands, Poland, United States	**Influential**
5	Sex and Gender Differences in Bacterial Infections. (2022)	University of Amsterdam, Amsterdam UMC	Netherlands	—
6	Conventional and advanced detection techniques of foodborne pathogens: A comprehensive review (2023)	Bangladesh Agricultural University, Deakin University, Noakhali Science and Technology University	Australia, Bangladesh, New Zealand	—
7	Clostridium difficile infection (2016)	Leiden University Medical Center, Monash University, University of Leeds	Australia, Netherlands, United Kingdom	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 3

Claim — Contribution 3

The researcher established a definitive global prevalence estimate for celiac disease through a seminal systematic review and meta-analysis published in a leading gastroenterology journal.

The researcher's primary contribution is the publication of a comprehensive systematic review and meta-analysis titled 'Global prevalence of celiac disease' in Clinical Gastroenterology and Hepatology in 2018. This work serves as the foundational piece in this line of inquiry, synthesizing existing data to address the lack of a unified global estimate for the condition. By aggregating disparate studies, the researcher appears to have filled a critical gap in understanding the worldwide burden of celiac disease, providing a standardized reference point for the medical community.

The significance of this contribution is evidenced by its substantial citation count of 2066, indicating that it has become a key reference in the field. Furthermore, analysis of citing literature reveals that 84.4% of citations originate from independent researchers, suggesting that the work has been widely adopted and validated by the broader scientific community rather than merely circulating within the researcher's immediate network. This high level of independent uptake underscores the work's impact on global gastroenterology research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

Global prevalence of celiac disease: Systematic review and meta-analysis

2018 · Clinical Gastroenterology and Hepatology · 2,066 citations (GS)

Field-normalised: 580 Semantic Scholar citations place it in the top 1% of Medicine papers from 2018 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Fermented foods and gastrointestinal health: underlying mechanisms (2023)	King's College London, Teagasc Food Research Centre, University of California, Davis	Ireland, United Kingdom, United States	—
2	Iron deficiency (2021)	University of Heidelberg, Walter and Eliza Hall Institute of Medical Research	Australia, Germany	—
3	ACG Clinical Guideline: Management of Irritable Bowel Syndrome (2021)	Cedars-Sinai, Icahn School of Medicine at Mount Sinai, Mayo Clinic	United States	—
4	The Immunobiology and Pathogenesis of Celiac Disease (2022)	University of Oslo	Norway	—
5	Prevalence of co-occurring conditions in children and adults with autism spectrum disorder: A systematic review and meta-analysis (2023)	Istituto Superiore di Sanità, Michael G. DeGroote Cochrane Canada and McMaster GRADE Centres, Ministry of Health	Canada, Italy	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the "built on / relied upon" pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Leiden University Medical Center	Netherlands	SCImago #412	3
Cleveland Clinic	United States	SCImago #306	3
Karolinska Institutet	Sweden	—	2
Northwestern University	United States	THE 30 · QS =42	2
Schneider Children's Medical Center	Israel	—	2
Polytechnic University of Marche	Italy	—	2
Mayo Clinic	United States	SCImago #88	2
University of California, Davis	United States	SCImago #194 · THE 64 · QS =114	2
University of Michigan	United States	SCImago #43 · THE 23 · QS 45	2
Monash University	Australia	THE =58 · QS =36	2
University of Oslo	Norway	SCImago #425 · THE =113 · QS =119	2
Royal Hallamshire Hospital	United Kingdom	—	2
University of Bologna	Italy	THE 130	2
Odense University Hospital	Denmark	SCImago #2264	2

Institution	Country	World ranking	Citing papers
Massachusetts General Hospital	United States	SCImago #100	2

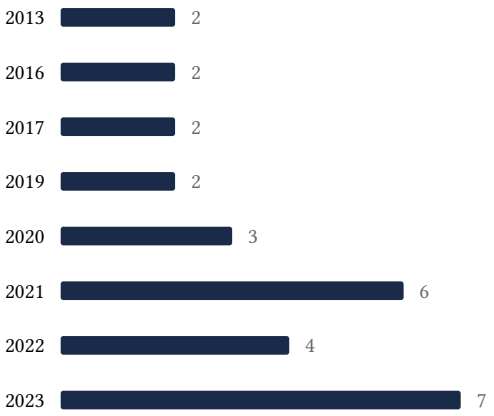
Geographic distribution of citing authors

Country	Citing papers
United States	15
Italy	9
United Kingdom	8
Netherlands	7
Australia	4
Norway	4
Germany	4
Sweden	4
Spain	4
Canada	4
Finland	3
Slovenia	3

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	The Oslo definitions for coeliac disease and related terms	7	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Clostridium difficile Infection	7	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Global prevalence of celiac disease: Systematic review and meta-analysis	5	8 CFR 204.5(i)(3) — Outstanding Researcher