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

1,438	1,555	132	19
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.

98.4% independent of 565 classified citing papers

Citation type	Count
Independent	556
Self-citation	4
Co-author	0
Same-institution	5

873 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 foundational clinical guidelines for kidney cancer and extended this framework to address complex translocation renal cell carcinomas through multi-institutional analyses.

The researcher's contribution centers on the development and refinement of clinical practice standards for kidney cancer, anchored by the seminal 2022 NCCN clinical practice guidelines. This core work serves as the foundation for subsequent research, including studies on immune-oncology combination therapies and the management of translocation carcinomas published in 2024 and 2025.

This line of work appears to address the evolving complexity of renal oncology by moving from broad clinical guidelines to specialized management strategies for rare subtypes. The progression from general guidelines to specific analyses of MiT family translocation renal cell carcinoma suggests an effort to fill gaps in treatment protocols for difficult-to-treat metastatic cases.

The significance of this contribution is evidenced by the high citation count of the core guidelines, with 727 citations indicating widespread adoption. Notably, 98.4% of these citations originate from independent researchers, demonstrating that the work has substantially influenced the broader scientific community beyond the researcher's immediate institution or collaborators.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 252 · **11 flagged influential by Semantic Scholar**

CORE PAPER

Kidney cancer, version 3.2022, NCCN clinical practice guidelines in oncology

2022 · Journal of the National Comprehensive Cancer Network 20 (1), 71-90, 2022 · 727 citations (GS)

Field-normalised: 546 Semantic Scholar citations place it in the top 1% of Medicine papers from 2022 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Renal Cell Carcinoma: A Review (2024)	University of North Carolina at Chapel Hill	—	—
2	Prognostic and predictive biomarkers for immunotherapy in advanced renal cell carcinoma (2023)	IRCCS Azienda Ospedaliero-Universitaria di Bologna, I.R.C.C.S. Istituto Tumori "Giovanni Paolo II", Macerata Hospital	Italy	—
3	CD70-Targeted Allogeneic CAR T-Cell Therapy for Advanced Clear Cell Renal Cell Carcinoma (2024)	City of Hope Comprehensive Cancer Center, CRISPR Therapeutics, Huntsman Cancer Institute, University of Utah	Australia, Canada, Netherlands	—
4	[89Zr]Zr-girentuximab for PET–CT imaging of clear-cell renal cell carcinoma: a prospective, open-label, multicentre, phase 3 trial (2024)	University of California Los Angeles	United States	—
5	Pembrolizumab plus axitinib versus sunitinib as first-line treatment of advanced renal cell carcinoma: 43-month follow-up of the phase 3 KEYNOTE-426 study (2023)	Barts Health NHS Trust and the Royal Free NHS Foundation Trust, Bell Land General Hospital, Central Clinical Hospital With Outpatient Clinic	Canada, France, Germany	—

No.	Citing paper	Citing institution(s)	Country	S2
6	Adjuvant nivolumab plus ipilimumab versus placebo for localised renal cell carcinoma after nephrectomy (CheckMate 914): a double-blind, randomised, phase 3 trial (2023)	Lancashire Teaching Hospitals NHS Trust, Memorial Sloan Kettering Cancer Center, Niigata University	Germany, Japan, Poland	—
7	Stereotactic body radiotherapy for primary renal cell carcinoma: a systematic review and practice guideline from the International Society of Stereotactic Radiosurgery (ISRS) (2024)	Miami Cancer Institute, Baptist Health South Florida, Peter MacCallum Cancer Centre, Sunnybrook Health Sciences Centre	Australia, Canada, United States	—
8	Neoadjuvant cabozantinib for locally advanced nonmetastatic clear cell renal cell carcinoma: a phase 2 trial (2025)	Emory University, Johns Hopkins Medicine, Moffitt Cancer Center	United States	—
9	Belzutifan plus cabozantinib as first-line treatment for patients with advanced clear-cell renal cell carcinoma (LITESPARK-003): an open-label, single-arm, phase 2 study (2025)	Dana-Farber Cancer Institute and Harvard Medical School, Merck & Co., Inc., Sarah Cannon Cancer Center and Tennessee Oncology	United States	—
10	Micropeptide MIAC inhibits the tumor progression by interacting with AQP2 and inhibiting EREG/EGFR signaling in renal cell carcinoma. (2022)	China Pharmaceutical University, NANJING ANJI BIOTECHNOLOGY CO. LTD, Nanjing University	China	Background
11	Updated systematic review and network meta-analysis of first-line treatments for metastatic renal cell carcinoma with extended follow-up data. (2024)	Medical University of Vienna, University Hospital Essen, University of Rennes	Austria, France, Germany	—
12	Deep Reinforcement Learning for Robotic Grasping: A Survey (2023)	Beihang University, Chinese University of Hong Kong, National University of Singapore	China, Singapore, South Korea	—
13	Deep Transfer Learning for Kidney Cancer Diagnosis (2024)	University Salhi Ahmed	Algeria	—
14	Clear Cell Renal Cell Carcinoma: A Comprehensive Review of its Histopathology, Genetics, and Differential Diagnosis. (2025)	Case Western Reserve University; University Hospitals Cleveland Medical Center, Northwestern University Feinberg School of Medicine	United States	—
15	Stereotactic Magnetic Resonance-Guided Adaptive and Non-Adaptive Radiotherapy on Combination MR-Linear Accelerators: Current Practice and Future Directions (2023)	—	—	—
16	EHBP1L1 Drives Immune Evasion in Renal Cell Carcinoma through Binding and Stabilizing JAK1. (2023)	Affiliated Longhua People's Hospital, Southern Medical University, Sun Yat-sen University Cancer Center, The First Affiliated Hospital, Sun Yat-sen University	China	—

No.	Citing paper	Citing institution(s)	Country	S2
17	Health-related quality-of-life outcomes in patients with advanced renal cell carcinoma treated with lenvatinib plus pembrolizumab or everolimus versus sunitinib (CLEAR): a randomised, phase 3 study (2022)	Dana-Farber Cancer Institute, Eisai, Kyushu University	Canada, Italy, Japan	—
18	The incidence, pathogenesis, and management of non-clear cell renal cell carcinoma. (2024)	Boston University Chobanian and Avedisian School of Medicine, University of California, San Diego	United States	—
19	OTUD3-mediated stabilization of SLC7A11 drives sunitinib resistance by suppressing ferroptosis in clear cell renal cell carcinoma (2025)	Hunan University	—	—
20	Phase I LITESPARK-001 study of belzutifan for advanced solid tumors: Extended 41-month follow-up in the clear cell renal cell carcinoma cohort (2024)	The University of Texas MD Anderson Cancer Center	United States	—
21	Ablative treatments for small renal masses and management of recurrences: a comprehensive review (2024)	European Institute of Oncology, IRCCS, Fondazione Policlinico Universitario Agostino Gemelli, Istituto Nazionale Tumori, IRCCS, "Fondazione G. Pascale"	Italy	Background
22	Interpreting Randomized Controlled Trials (2023)	The University of Texas MD Anderson Cancer Center, University of California Santa Cruz	United States	**Influential**
23	Metabolic profiling of patient-derived organoids reveals nucleotide synthesis as a metabolic vulnerability in malignant rhabdoid tumors (2025)	Netherlands Cancer Institute, Princess Máxima Center, Utrecht University	Netherlands	—
24	Chronic kidney disease and aging: dissecting the p53/p21 pathway as a therapeutic target. (2024)	Batterjee Medical College, Chandigarh Pharmacy College, Chandigarh Group of College, GLA University	India, Saudi Arabia	—
25	Survival pattern of metastatic renal cell carcinoma patients according to WHO/ISUP grade: a long-term multi-institutional study (2024)	Hallym University Medical Center	South Korea	Background
26	LITESPARK-012: pembrolizumab plus lenvatinib with or without belzutifan or quavonlimab for advanced renal cell carcinoma. (2023)	Dana-Farber Cancer Institute, Fox Chase Cancer Center, Memorial Sloan Kettering Cancer Center	Australia, United States	—
27	The role of immunotherapy in targeting tumor microenvironment in genitourinary cancers. (2025)	Dokuz Eylul University, Rutgers-Jersey City Medical Center, Winship Cancer Institute of Emory University	Turkey, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
28	Novel small molecule inhibitors targeting renal cell carcinoma: Status, challenges, future directions (2024)	Sichuan Provincial People's Hospital, Sichuan University, University of Tennessee Health Science Center	China, United States	—
29	Advances in non-clear cell renal cell carcinoma management: From heterogeneous biology to treatment options. (2024)	The Ohio State University Comprehensive Cancer Center, University of Michigan; Michigan Medicine	United States	Influential
30	Tumorigenesis Mechanisms Found in Hereditary Renal Cell Carcinoma: A Review (2022)	National Cancer Institute, Roswell Park Comprehensive Cancer Center, University of Tennessee Health Science Center	United States	Methodology

Showing the 30 most-cited of 250 independent citing papers.

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 Tumorigenesis Mechanisms Found in Hereditary Renal Cell Carcinoma: A Review

"Regular cross-sectional imaging (MRI preferred) is recommended by national guidelines to be every 3–5 years beginning at age 12 [67,198]."

FOLLOW-UP WORK

Multi-institutional Analysis of Immune-Oncology Combination Therapy for Metastatic MiT Family Translocation Renal Cell Carcinoma

2025 · Journal of Immunotherapy 48 (3), 113-117, 2025 · 3 citations (GS)

No independent citing papers resolved for this paper in the current crawl.

FOLLOW-UP WORK

Management of translocation carcinomas of the kidney

2024 · Translational Cancer Research 13 (11), 6438-6447, 2024 · 11 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Management of Renal Cell Carcinoma of Variant Histology.	ACCamargo Cancer Center, The University of Texas MD Anderson Cancer Center, Universidade Professor Edson Antônio Velano (UNIFENAS)	Brazil, United States	—
2	An update on the treatment paradigm for non-clear cell renal cell carcinoma	Fondazione IRCCS Istituto Nazionale dei Tumori di Milano	Italy	—

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 foundational framework linking PBAF complex mutations to immunotherapy response, subsequently refining predictive biomarkers for renal cell carcinoma treatment outcomes.

The researcher's core contribution centers on a 2020 pan-cancer analysis of PBAF complex mutations and their association with immunotherapy response. This seminal work serves as the foundation for a sustained line of inquiry into genomic predictors of treatment efficacy, accumulating 65 citations since publication.

This line of work appears to address the critical need for reliable biomarkers in oncology. By extending the initial pan-cancer findings to specific clinical contexts, the researcher published follow-up studies in 2021 and 2023 focusing on kidney cancer. These subsequent papers suggest a methodological evolution from broad genomic association to the development of combinatorial biomarkers for predicting anti-PD-1 therapy outcomes in metastatic clear cell renal cell carcinoma.

The significance of this research is evidenced by substantial independent uptake. With 556 of 565 citing papers originating from independent researchers, the work demonstrates broad relevance beyond the author's immediate circle. The core paper's 65 citations, combined with the follow-up studies' 29 and 22 citations respectively, indicate that this framework has become a recognized reference point for understanding immunotherapy response mechanisms.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 20 · **1 flagged influential by Semantic Scholar**

CORE PAPER

A pan-cancer analysis of PBAF complex mutations and their association with immunotherapy response

2020 · Nature communications 11 (1), 4168, 2020 · 65 citations (GS)

Field-normalised: 51 Semantic Scholar citations place it in the top 10% of Medicine papers from 2020 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Understanding Factors that Influence Prognosis and Response to Therapy in Clear Cell Renal Cell Carcinoma	Peter O'Donnell School of Public Health, Simmons Comprehensive Cancer Center	United States	—
2	Precision medicine: an optimal approach to patient care in renal cell carcinoma	Fiona Elsey Cancer Research Institute	Australia	Background
3	Update on biomarkers in renal cell carcinoma	Dana-Farber Cancer Institute and Harvard Medical School, Yale School of Medicine	United States	—
4	Spatiotemporal evolution of the clear cell renal cell carcinoma microenvironment links intra-tumoral heterogeneity to immune escape	Illumina, Inc., Memorial Sloan Kettering Cancer Center	United States	—
5	A cytoskeletal function for PBRM1 reading methylated microtubules	Baylor College of Medicine, University of Michigan Medical School, University of North Carolina	United States	—
6	Increased tumor glycolysis is associated with decreased immune infiltration across human solid tumors	Memorial Sloan Kettering Cancer Center, Weill Cornell Medicine	United States	**Methodology**
7	GNE-235: a lead compound selective for the second bromodomain of PBRM1	Genentech, Inc.	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
8	The expression and prognostic value of transporter 1, ATP binding cassette subfamily B member in clear cell renal cell cancer with experimental validation	Fudan University Shanghai Cancer Center	China	—
9	Prognostic Implications of SMARCA4, ARID1A, and Other BAF Mutations in Non-Small Cell Lung Cancer	Foghorn Therapeutics Inc.	United States	**Influential**
10	Impact of interaction networks of B cells with other cells on tumorigenesis, progression and response to immunotherapy of renal cell carcinoma: A review	Third Affiliated Hospital of the Second Military Medical University, Xinhua Hospital, School of Medicine, Shanghai Jiaotong University	China	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).

Citing-text excerpts — how the field used this work

METHODOLOGY Increased tumor glycolysis is associated with decreased immune infiltration across human solid tumors

"(53) given that (i) it produces normally distributed scores for multiple immune cell types, making downstream statistical analyses more straightforward; and (ii) ease of implementation to independent datasets, as demonstrated in previous studies that used ssGSEA for immune deconvolution of various solid tumors (77, 97)."

FOLLOW-UP WORK

Combinatorial biomarker for predicting outcomes to anti-PD-1 therapy in patients with metastatic clear cell renal cell carcinoma

2023 · Cell Reports Medicine 4 (2), 2023 · 29 citations (GS)

Field-normalised: 24 Semantic Scholar citations place it in the top 10% of Medicine papers from 2023 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Computed tomography-based unsupervised clustering identifies clusters associated with progression free survival in clear cell renal cell carcinoma	Armed Forces Daejeon Hospital, Severance Hospital, Yonsei University College of Medicine, Yonsei University College of Medicine	South Korea	—
2	Established and emerging biomarkers of immunotherapy in renal cell carcinoma	Emory University, Mercer University, Winship Cancer Institute of Emory University	United States	—
3	Advances in immunotherapy and targeted therapy for advanced clear-cell renal cell carcinoma: current strategies and future directions	Shanghai Medical College, Fudan University, University of Freiburg, West China Hospital, Sichuan University	China, Germany	—
4	CXCL14 as a potential marker for immunotherapy response prediction in renal cell carcinoma	Guangdong Provincial Clinical Research Center for Cancer, Sun Yat-sen University Cancer Center, Sun Yat-sen University Cancer Center	China	Background

No.	Citing paper	Citing institution(s)	Country	S2
5	Virtual patient analysis identifies strategies to improve the performance of predictive biomarkers for PD-1 blockade	Johns Hopkins University School of Medicine, Kaiser Permanente, Sidney Kimmel Comprehensive Cancer Center, Johns Hopkins University School of Medicine	United States	—
6	High pathological tumor response associates with enhanced overall survival in HNSCC patients following neoadjuvant immunochemotherapy and surgery	National Cancer Center/National Clinical Research Center for Cancer/Cancer Hospital, Chinese Academy of Medical Sciences and Peking Union Medical College	China	—
7	Journal of Pathology and Translational Medicine	St. Vincent's Hospital, College of Medicine, The Catholic University of Korea, St. Vincent's Hospital, The Catholic University of Korea	South Korea	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).

FOLLOW-UP WORK

Novel emerging biomarkers to immunotherapy in kidney cancer

2021 · Therapeutic Advances in Medical Oncology 13, 17588359211059367, 2021 · 22 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	Understanding and integrating cytoreductive nephrectomy with immune checkpoint inhibitors in the management of metastatic RCC	University of Wisconsin School of Medicine and Public Health	United States	**Methodology**
2	A novel prognostic signature associated with the tumor microenvironment in kidney renal clear cell carcinoma	The Fifth Affiliated Hospital of Zhengzhou University	China	Background
3	Analyses of tumor microenvironment in patients with advanced renal cell carcinoma receiving immunotherapy (Meet-URO 18 study)	AUSL-IRCCS di Reggio Emilia, Azienda Ospedaliera Universitaria Pisana, Candiolo Cancer Institute, FPO-IRCCS	Italy, United Kingdom	—

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 Understanding and integrating cytoreductive nephrectomy with immune checkpoint inhibitors in the management of metastatic RCC

"In early studies, PDL1 expression was assessed by immunohistochemistry as a potential predictor of therapy response in other solid malignancies such as non-small-cell lung cancer 130 owing to the central role of this protein in the mechanism of action of ICI therapy."

Contribution 3

Claim — Contribution 3

The researcher established that sarcomatoid differentiation dictates clinical outcomes in metastatic chromophobe renal cell carcinoma, a framework subsequently expanded to include high-grade nonsarcomatoid variants and rare extrarenal manifestations.

The researcher's core contribution rests on a 2019 study demonstrating that the presence or absence of sarcomatoid differentiation determines the clinical course and treatment outcomes of metastatic chromophobe renal cell carcinoma. This work provides a critical prognostic stratification for a rare and aggressive cancer subtype.

This line of work appears to address the need for refined pathological classification in chromophobe renal cell carcinoma. By initially focusing on sarcomatoid features, the researcher laid a foundation that was later extended in 2024 to investigate high-grade, nonsarcomatoid cases with novel molecular features, as well as rare extrarenal Birt-Hogg-Dube-associated neoplasms. This progression suggests a comprehensive effort to characterize the full spectrum of disease heterogeneity beyond initial diagnostic categories.

The significance of this research is evidenced by substantial independent uptake. The core paper has accumulated 68 citations, while the follow-up studies have garnered 13 and 2 citations respectively. Notably, 98.4% of the 565 citing papers classified for this scholar originate from independent researchers, indicating that this framework has been widely adopted and validated by the broader scientific community outside the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 15 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Metastatic chromophobe renal cell carcinoma: presence or absence of sarcomatoid differentiation determines clinical course and treatment outcomes

2019 · Clinical Genitourinary Cancer 17 (3), e678-e688, 2019 · 68 citations (GS)

Field-normalised: 56 Semantic Scholar citations place it in the top 10% of Medicine papers from 2019 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	The incidence, pathogenesis, and management of non-clear cell renal cell carcinoma.	Boston University Chobanian and Avedisian School of Medicine, University of California, San Diego	United States	Background
2	Sintilimab combined with axitinib in the treatment of advanced chromophobe renal cell carcinoma: a case report	The First Hospital of Jilin University	China	—
3	The relationship between body mass index and survival in patients with renal cell carcinoma treated with nivolumab	Bakirkoy Dr. Sadi Konuk Training and Research Hospital, Kartal Dr. Lütfi Kırdar City Hospital, Koc University Hospital	Turkey	—
4	Multi-institutional re-evaluation of prognostic factors in chromophobe renal cell carcinoma: proposal of a novel two-tiered grading scheme	Aichi Medical University Hospital, Friedrich Alexander-University Erlangen-Nürnberg, Gifu University Hospital	Germany, Italy, Japan	—
5	Recent progress in non-clear cell renal cell carcinoma: biology and therapeutic strategies	Emory University, Emory University School of Medi-	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
		cine, Medical College of Georgia, Augusta University		
6	The role of immunotherapy in non-clear cell renal cell carcinoma	Consorcio Hospital Universitario Parc Tauli	Spain	—
7	Intratumoral and peritumoral radiomics using multi-phase contrast-enhanced CT for diagnosis of renal oncocytoma and chromophobe renal cell carcinoma: a …	Guangdong Provincial Hospital of Traditional Chinese Medicine, Longgang Central Hospital of Shenzhen, Philips Healthcare	China	—
8	Common clinicopathological and immunological features of sarcomatoid carcinoma across organs: a histomorphology-based cross-organ study	National Cancer Center, National Cancer Center Hospital East	Japan	**Influential**
9	Significant response to toripalimab plus axitinib for metastatic chromophobe renal cell carcinoma with sarcomatoid differentiation: a case report and literature …	Binzhou Medical University, Qingdao University Medical College Affiliated Yantai Yuhuangding Hospital, Shandong Second Medical University	China	—
10	Characterization of Intercalated Cell Markers KIT and LINC01187 in Chromophobe Renal Cell Carcinoma and Other Renal Neoplasms	Case Western Reserve University, El Camino Hospital, Mayo Clinic	United States	—
11	Chromophobe renal cell carcinoma with sarcomatoid differentiation: clinicopathologic correlation and molecular findings	Northwestern University Feinberg School of Medicine	United States	—
12	Case report: Uncommon gastric metastasis as a presentation of recurrent clear cell renal cell carcinoma	Catalan Institute of Oncology, Clínica Girona, Hospital Universitari Doctor Josep Trueta University Hospital	Spain	—
13	An up-to-date evaluation of cabozantinib for the treatment of renal cell carcinoma	IRCCS Azienda Ospedaliero-Universitaria di Bologna, Macerata Hospital	Italy	—
14	Dissecting outcomes: should cytoreductive nephrectomy be performed for patients with metastatic renal cell carcinoma with sarcomatoid dedifferentiation?	H. Lee Moffitt Cancer Center & Research Institute, H. Lee Moffitt Cancer Center & Research Institute, University of South Florida, University of South Florida	United States	—
15	Two case reports of immune checkpoint therapy on chromophobe renal cell carcinoma with sarcomatoid differentiation	Hiroshima University, Hiroshima University Hospital	Japan	—

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).

FOLLOW-UP WORK

High-grade, nonsarcomatoid chromophobe renal cell carcinoma: a series of 22 cases with novel molecular features on a subset

2024 · Modern Pathology 37 (5), 100472, 2024 · 13 citations (GS)

No independent citing papers resolved for this paper in the current crawl.

FOLLOW-UP WORK

A confirmed extrarenal Birt-Hogg-Dube-associated oncocytic neoplasm

2024 · The American Journal of Surgical Pathology 48 (12), 1624-1628, 2024 · 2 citations (GS)

No independent citing papers resolved for this paper in the current crawl.

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Memorial Sloan Kettering Cancer Center	United States	SCImago #210	21
Sun Yat-sen University Cancer Center	China	SCImago #1201	13
Tokyo Women's Medical University Adachi Medical Center	Japan	—	11
Tokyo Women's Medical University	Japan	—	11
Dana-Farber Cancer Institute	United States	SCImago #197	10
The University of Texas MD Anderson Cancer Center	United States	—	9
West China Hospital, Sichuan University	China	—	8
Mayo Clinic	United States	SCImago #88	8
Saiseikai Kawaguchi General Hospital	Japan	—	8
Kobe University Graduate School of Medicine	Japan	—	7
Jyoban Hospital	Japan	—	7
Saiseikai Kazo Hospital	Japan	—	7
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	7
National Cancer Institute	United States	SCImago #219	6
Fudan University Shanghai Cancer Center	China	—	5

Geographic distribution of citing authors

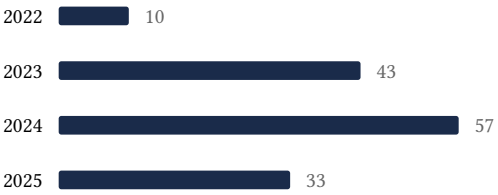
Country	Citing papers
China	209
United States	163
Japan	54
Italy	42
Germany	27
Canada	25
South Korea	20
United Kingdom	17

Country	Citing papers
France	14
Spain	13
Australia	10
Austria	8

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	Kidney cancer, version 3.2022, NCCN clinical practice guidelines in oncology	252	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	A pan-cancer analysis of PBAF complex mutations and their association with immunotherapy response	20	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Metastatic chromophobe renal cell carcinoma: presence or absence of sarcomatoid differentiation determines clinical course and treatment outcomes	15	8 CFR 204.5(i)(3) — Outstanding Researcher