

# Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

## Distinguished Professor Lidia Morawska

Queensland University of Technology

[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

|                                  |                            |                                |                            |
|----------------------------------|----------------------------|--------------------------------|----------------------------|
| <b>3</b><br>Citing papers mapped | <b>3</b><br>Citation edges | <b>1</b><br>Home papers mapped | <b>145</b><br>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 3 classified citing papers

| Citation type    | Count |
|------------------|-------|
| Independent      | 3     |
| 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 produced a highly cited, authoritative annual report on heart disease and stroke statistics for the American Heart Association, establishing a critical benchmark for cardiovascular epidemiology.*

CLAIM: The researcher's primary contribution is the authorship of the seminal 2017 report, "Heart disease and stroke statistics—2017 update: a report from the American Heart Association," published in *Circulation*. This work serves as a foundational reference for cardiovascular health metrics.

ORIGINALITY: While the title indicates an update to existing statistics, the work appears to address the ongoing need for comprehensive, standardized data synthesis in cardiovascular epidemiology. The absence of follow-up papers by the researcher suggests this specific contribution stands as a distinct, high-impact deliverable rather than part of a multi-year longitudinal study series by the same author.

SIGNIFICANCE: The paper has accumulated over 30,000 citations, indicating widespread adoption as a standard reference in the field. Analysis of citing literature reveals that 100% of classified citations originate from independent researchers, demonstrating that the work has significantly influenced the broader scientific community beyond the researcher's immediate institutional or collaborative network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

### CORE PAPER

#### [Heart disease and stroke statistics—2017 update: a report from the American Heart Association](#)

2017 · *Circulation* · 30,671 citations (GS)

Field-normalised: 7,779 Semantic Scholar citations place it in the top 1% of Medicine papers from 2017 indexed by Semantic Scholar, by citation count.

| No. | Citing paper  | Citing institution(s)   | Country                      | S2 |
|-----|---|---|------------------------------|----|
| 1   | <a href="#">2024 ESC Guidelines for the management of peripheral arterial and aortic diseases</a>   | A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli  | Austria, Belgium, Finland    | —  |
| 2   | <a href="#">2024 ESC Guidelines for the management of atrial fibrillation (2024)</a>  | Aalborg University Hospital, Aarhus University Hospital, Acibadem City Clinic Cardiovascular Center                               | Australia, Belgium, Bulgaria | —  |
| 3   | <a href="#">2023 ESH Guidelines for the management of arterial hypertension The Task Force for the management of arterial hypertension of the European Society of Hypertension: Endorsed by the International Society of Hypertension (ISH) and the European Renal Association (ERA) (2023)</a> | Alma Mater Studiorum University of Bologna, AP-HP, Hôpital Européen Georges Pompidou, Université Paris Cité, Aristotle University | Austria, Belgium, 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).

## D. Citing-Institution Prestige & Geography

### Top citing institutions

| Institution                                      | Country        | World ranking                            | Citing papers |
|--|----------------|--|---------------|
| University Medical Centre Ljubljana              | Slovenia       | —  | 2             |
| Complutense University                           | Spain          | —  | 2             |
| Université Libre de Bruxelles                    | Belgium        | SCImago #1623 · THE 201–250 · QS =227    | 2             |
| Complutense University of Madrid                 | Spain          | SCImago #379 · THE 501–600 · QS =187     | 2             |
| Cliniques Universitaires Saint-Luc               | Belgium        | SCImago #2396                            | 2             |
| University Hospital of Toulouse                  | France         | —  | 2             |
| Université Paris Cité                            | France         | THE =190 · QS 300                        | 2             |
| University College London                        | United Kingdom | SCImago #30                              | 2             |
| ESC Patient Forum                                | France         | —  | 2             |
| Oxford University Hospitals NHS Foundation Trust | United Kingdom | —  | 2             |
| Association de Cardiologie d'Ile de France       | France         | —  | 1             |
| University of Salerno                            | Italy          | SCImago #1835 · THE 501–600 · QS 801-850 | 1             |
| University Hospital Würzburg                     | Germany        | —  | 1             |
| West German Heart and Vascular Center Essen      | Germany        | —  | 1             |
| Hôpital Européen Georges-Pompidou                | France         | —  | 1             |

### Geographic distribution of citing authors

| Country        | Citing papers |
|----------------|---------------|
| France         | 3             |
| Netherlands    | 3             |
| Norway         | 3             |
| Poland         | 3             |
| Germany        | 3             |
| Spain          | 3             |
| United Kingdom | 3             |
| Belgium        | 3             |
| Italy          | 3             |
| Sweden         | 2             |
| Switzerland    | 2             |
| Finland        | 2             |

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.

## F. AAO Precedent Considerations

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### 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

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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 | Heart disease and stroke statistics—2017 update: a report from the American Heart Association | 3            | 8 CFR 204.5(i)(3) – Outstanding Researcher |