Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

Cyrus Cooper

Southampton, Oxford, Mayo Clinic

Google Scholar profile

Generated 2026-05-22 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

15	15	3	252
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.

81.8% independent of 11 classified citing papers

Citation type	Count
Independent	9
Self-citation	0
Co-author	2
Same-institution	0

4 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 developed the STROBE guidelines' explanation and elaboration, establishing a critical framework for improving the reporting quality and transparency of observational studies in epidemiology.

The researcher's primary contribution is the development of the explanation and elaboration document for the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) guidelines. Published in 2014 across high-impact venues including PLOS Medicine and Annals of Internal Medicine, this work serves as the foundational text for this line of research, with no subsequent follow-up papers by the same author identified in the provided data.

This work appears to address a critical gap in scientific communication by providing detailed guidance on how to properly report observational studies. The titles suggest a focus on standardization and clarity, aiming to enhance the reproducibility and reliability of epidemiological findings. By offering an elaboration on the core guidelines, the researcher provided a practical resource for authors and reviewers to improve methodological transparency.

The significance of this contribution is evidenced by its extensive uptake within the scientific community, accumulating 13,883 citations. Furthermore, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, indicating that the work has been widely adopted and utilized by the broader global research community rather than just the author's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 3

CORE PAPER

Strengthening the Reporting of Observational Studies in Epidemiology (STROBE): explanation and elaboration

2014 · PLOS Medicine; Annals of Internal Medicine; Epidemiology · 13,883 citations (GS)

Field-normalised: 8,917 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	Estimating the global prevalence of chronic obstructive pulmonary disease (COPD): a systematic review and meta-analysis (2024)	Hassan First University of Settat, Higher Institute of Nursing Professions and Health Techniques (ISPITS), Provincial Delegation of Health	Morocco	—
2	Blood-based biomarkers of Alzheimer's disease and incident dementia in the community (2025)	Karolinska Institutet, Karolinska Institutet and Stockholm University, Karolinska Institutet, Stockholm University, Stockholm Gerontology Research Center	Sweden	—
3	Cross-sectional studies: strengths, weaknesses, and recommendations (2020)	Cleveland Clinic, Zhongnan Hospital of Wuhan University	China, United States	—

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 revised European consensus on the definition and diagnosis of sarcopenia, creating a standardized framework that has become a foundational reference in the field.

The researcher's primary contribution is the establishment of a revised European consensus on the definition and diagnosis of sarcopenia, as detailed in their 2019 publication. This work serves as the cornerstone of their cited output, providing a unified standard for identifying and assessing this condition.

This line of work appears to address the critical need for standardized criteria in sarcopenia research and clinical practice. By revising previous definitions, the researcher likely resolved inconsistencies that hindered comparative studies and clinical application, offering a clearer, more robust diagnostic framework for the medical community.

The significance of this contribution is evidenced by its substantial citation count of 16,970, indicating widespread adoption and influence. Furthermore, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, demonstrating that the work has been embraced by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

Sarcopenia: revised European consensus on definition and diagnosis

2019 · 16,970 citations (GS)

Field-normalised: 10,897 Semantic Scholar citations place it in the top 1% of Medicine papers from 2019 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Inflammaging: Implications in Sarcopenia (2022)	—	—	Background
2	Type 2 diabetes	Seoul National University Bundang Hospital, University of Leicester	South Korea, 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).

Contribution 3

Claim — Contribution 3

The researcher produced a seminal systematic analysis quantifying global disease burden for 328 conditions across 195 countries, establishing a foundational benchmark for epidemiological research.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of global health metrics, published in The Lancet in 2017. This work details the incidence, prevalence, and years lived with disability for 328 diseases and injuries across 195 countries from 1990 to 2016, serving as a core reference in the Global Burden of Disease Study 2016.

ORIGINALITY: This line of work appears to address the critical need for standardized, large-scale epidemiological data. By synthesizing information on a vast array of conditions and geographic regions, the research provides a unified framework for understanding health trends over time, filling a gap in comparative global health assessment.

SIGNIFICANCE: The work has achieved substantial impact, evidenced by over 14,000 citations. Notably, analysis of citing papers indicates that 100% of classified citations originate from independent researchers, suggesting the work has been widely adopted and utilized by the broader scientific community beyond the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 328 diseases and injuries for 195 countries, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016

2017 · The Lancet · 14,371 citations (GS)

Field-normalised: 2,321 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	Alzheimer's disease: insights into pathology, molecular mechanisms, and therapy	Shenzhen Research Institute of Xiamen University	China	—
2	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	—
3	mRNA-based therapeutics: powerful and versatile tools to combat diseases (2022)	Sichuan University, University of North Dakota, West China Hospital, Sichuan University	China, United States	—
4	Major depressive disorder: hypothesis, mechanism, prevention and treatment	Chengdu University of Traditional Chinese Medicine, China Medical University, The First Hospital, China Medical 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).

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	2
KTH Royal Institute of Technology	Sweden	SCImago #497 · THE =98 · QS 78	1
Baylor College of Medicine and Michael E. DeBakey VA Medical Center	United States	—	1
Duke University Medical Center	United States	—	1
Emory University	United States	SCImago #217 · THE 102 · QS 182	1
London School of Hygiene and Tropical Medicine	United Kingdom	SCImago #802	1

Institution	Country	World ranking	Citing papers
Leiden University Medical Center	Netherlands	SCImago #412	1
Brigham and Women's Hospital; Harvard Medical School	United States	—	1
Cleveland Clinic	United States	SCImago #306	1
Zhongnan Hospital of Wuhan University	China	SCImago #2228	1
Sichuan University	China	SCImago #32 · THE 201–250 · QS =324	1
Brigham and Women’s Hospital	United States	SCImago #130	1
University of Leicester	United Kingdom	SCImago #1023 · THE =192 · QS 326	1
Chengdu University of Traditional Chinese Medicine	China	SCImago #2624	1
Baylor College of Medicine	United States	SCImago #560	1

Geographic distribution of citing authors

Country	Citing papers
China	4
United Kingdom	4
United States	4
Iran	1
Italy	1
Morocco	1
Australia	1
Pakistan	1
Poland	1
Russia	1
South Korea	1
Sweden	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	Strengthening the Reporting of Observational Studies in Epidemiology (STROBE): explanation and elaboration	3	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Sarcopenia: revised European consensus on definition and diagnosis	2	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Global, regional, and national incidence, prevalence, and years lived with disability for 328 diseases and injuries for 195 countries, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016	4	8 CFR 204.5(i)(3) — Outstanding Researcher