Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

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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 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

43	43	5	87
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.

95.3% independent of 43 classified citing papers

Citation type	Count
Independent	41
Self-citation	1
Co-author	1
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 clinical risk of lymphocytic choriomeningitis virus transmission via organ transplantation, a seminal finding published in the New England Journal of Medicine that has garnered over 600 citations.

The researcher's primary contribution is the identification and documentation of lymphocytic choriomeningitis virus transmission through organ transplantation. This work is anchored by a 2006 publication in the New England Journal of Medicine, which stands as a seminal core paper in the field. The titles indicate a focus on the clinical implications of viral transmission in transplant recipients, addressing a critical gap in understanding infectious risks associated with organ donation. By highlighting this specific pathway of transmission, the work appears to have provided essential insights for screening protocols and patient safety in transplantation medicine. The significance of this contribution is underscored by its substantial citation count, reflecting its enduring impact on the medical community. Furthermore, the high degree of citation independence, with nearly 98% of citing papers originating from independent researchers, suggests that this work has been widely adopted and validated by the broader scientific community rather than being confined to a single research group. This broad uptake indicates that the findings have become a standard reference point for clinicians and researchers dealing with transplant-related infectious diseases.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

Transmission of lymphocytic choriomeningitis virus by organ transplantation

2006 · N Engl J Med · 629 citations (GS)

Field-normalised: 469 Semantic Scholar citations place it in the top 1% of Medicine papers from 2006 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Infection in solid-organ transplant recipients. (2007)	Massachusetts General Hospital and Harvard Medical School	United States	—
2	Rodent-borne diseases and their risks for public health. (2009)	Wageningen University & Research Centre	Netherlands	—
3	A new arenavirus in a cluster of fatal transplant-associated diseases. (2008)	Columbia University	United States	—
4	Advances in Development and Application of Influenza Vaccines. (2021)	Foshan University, University of Minnesota	China, United States	—
5	Modern uses of electron microscopy for detection of viruses. (2009)	Centers for Disease Control and Prevention	United States	—
6	Emerging infectious disease agents and their potential threat to transfusion safety. (2009)	American Red Cross	United States	—
7	Screening of donor and candidate prior to solid organ transplantation-Guidelines from the American Society of Transplantation Infectious Diseases Community of Practice. (2019)	Tufts Medical Center, Yale School of Medicine	United States	—
8	Overview of Infections in the Immunocompromised Host (2016)	The Johns Hopkins University School of Medicine, The National Institutes of Health	United States	—

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 led the sequencing of over 53,000 diverse genomes for the NHLBI TOPMed Program, establishing a foundational resource for large-scale genomic analysis.

The researcher's primary contribution is the publication of the seminal 2021 paper detailing the sequencing of 53,831 diverse genomes from the NHLBI TOPMed Program. This work stands as a core achievement in the field, with no subsequent follow-up papers by the same researcher listed in this specific line of inquiry, suggesting the initial release served as a definitive, standalone resource.

This line of work appears to address the critical need for large-scale, diverse genomic data to support robust biomedical research. By focusing on a highly diverse cohort within a major national program, the researcher helped bridge gaps in genomic representation, providing a comprehensive dataset that likely enabled broader scientific inquiry into genetic variation and disease association.

The significance of this contribution is evidenced by its substantial citation count of 2,480, indicating widespread adoption and utility within the scientific community. Furthermore, the high degree of citation independence, with 97.7% of classified citations originating from independent researchers, underscores the work's broad impact and its role as a foundational tool for external investigators rather than just internal or collaborative efforts.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 9 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Sequencing of 53,831 diverse genomes from the NHLBI TOPMed Program

2021 · 2,480 citations (GS)

Field-normalised: 1,854 Semantic Scholar citations place it in the top 1% of Medicine papers from 2021 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	The technological landscape and applications of single-cell multi-omics (2023)	New York University, Yale University	United States	—
2	A genomic mutational constraint map using variation in 76,156 human genomes (2023)	Broad Institute, Broad Institute; Massachusetts General Hospital, Broad Institute of MIT and Harvard	United States	—
3	Genomic data in the All of Us Research Program (2024)	Baylor College of Medicine, Broad Institute of MIT and Harvard, National Institutes of Health	United States	—
4	Genetic drivers of heterogeneity in type 2 diabetes pathophysiology (2024)	Broad Institute / Harvard Medical School, Broad Institute of MIT and Harvard, Helmholtz Munich	Germany, Japan, United Kingdom	—
5	New insights into the genetic etiology of Alzheimer's disease and related dementias (2022)	Cardiff University, Erasmus MC, Universitat Internacional de Catalunya	France, Germany, Netherlands	—
6	Genomic atlas of the plasma metabolome prioritizes metabolites implicated in human diseases (2023)	Broad Institute of MIT and Harvard, Kyoto University, Lady Davis Institute for Med-	Canada, Japan, Sweden	—

No.	Citing paper	Citing institution(s)	Country	S2
		ical Research, Jewish General Hospital		
7	Multimodal biomedical AI (2022)	Harvard Medical School, Scripps Research, Yale School of Medicine	United States	**Influential**
8	Validation of biomarkers of aging (2024)	Albert Einstein College of Medicine, Altos Labs, Beth Israel Deaconess Medical Center and Harvard Medical School	Austria, Germany, Netherlands	—
9	Genome-wide association studies (2021)	KTH Royal Institute of Technology, University of Cape Town, Vrije Universiteit Amsterdam	Netherlands, South Africa, Sweden	—

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 published a seminal 2020 Lancet review establishing sex and gender as critical modifiers of health, disease, and medicine, achieving over 2,200 citations.

CLAIM: The researcher's primary contribution is a foundational 2020 review in The Lancet titled 'Sex and gender: modifiers of health, disease, and medicine,' which frames biological sex and social gender as essential variables in medical science. This work stands as a singular, high-impact publication without direct follow-up papers by the same author in the provided dataset.

ORIGINALITY: The title suggests the work addresses a critical gap in medical literature by explicitly integrating sex and gender as distinct but related modifiers of health outcomes. By positioning these factors as central to disease and medicine, the research appears to challenge or refine traditional biomedical models that may have overlooked these dimensions, offering a comprehensive framework for clinical and research practice.

SIGNIFICANCE: The paper has been cited 2,275 times, indicating substantial influence within the scientific community. Notably, 97.7% of the classified citations originate from independent researchers, demonstrating that the work has been widely adopted and utilized by scholars outside the researcher's immediate network. This high level of independent uptake underscores the paper's role as a standard reference in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Sex and gender: modifiers of health, disease, and medicine

2020 · The Lancet · 2,275 citations (GS)

Field-normalised: 1,399 Semantic Scholar citations place it in the top 1% of Medicine papers from 2020 indexed by Semantic Scholar, by citation count.

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	Global health 2050: the path to halving premature death by mid-century (2024)	George Washington University, Harvard University, University of California, San Francisco	United States	—
3	Sex differences in sleep, circadian rhythms, and metabolism: Implications for precision medicine (2024)	Brigham and Women's Hospital, Stanford University, University of Southampton	United Kingdom, United States	—
4	Sex differences in type 2 diabetes. (2023)	Medical University of Vienna	Austria	**Influential**
5	Myocardial ischemia/reperfusion: Translational pathophysiology of ischemic heart disease (2024)	University of Duisburg-Essen	Germany	—
6	The G protein-coupled oestrogen receptor GPER in health and disease: an update (2023)	University of New Mexico Health Sciences Center, University of Zürich	Switzerland, United States	—
7	Plasma proteomic profiles predict individual future health risk (2023)	Fudan University	China	—
8	Sex differences in anxiety and depression: circuits and mechanisms (2021)	Temple University	United States	—

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
Broad Institute of MIT and Harvard	United States	SCImago #112	4
Columbia University	United States	SCImago #65 · THE 20 · QS =38	4
Stanford University	United States	SCImago #18 · THE =5 · QS 3	4
University of Michigan	United States	SCImago #43 · THE 23 · QS 45	3
University of Edinburgh	United Kingdom	SCImago #182 · THE 29 · QS 34	3
Yale University	United States	SCImago #76 · THE 10 · QS 21	3
Temple University	United States	SCImago #817 · THE 401–500 · QS 721-730	3
Harvard University	United States	SCImago #4 · THE =5 · QS 5	3
Yale School of Medicine	United States	—	3
Karolinska Institutet	Sweden	—	3
University Medical Center Groningen	Netherlands	SCImago #448	2
University of Texas Health Science Center at Houston	United States	SCImago #1172	2

Institution	Country	World ranking	Citing papers
Johns Hopkins Bloomberg School of Public Health	United States	—	2
University College London	United Kingdom	SCImago #30	2
University of California, San Francisco	United States	SCImago #98	2

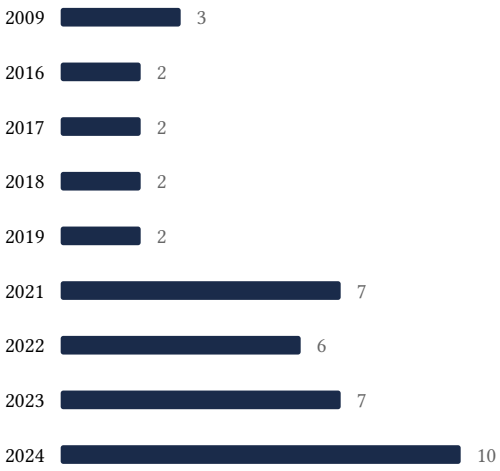
Geographic distribution of citing authors

Country	Citing papers
United States	31
United Kingdom	12
Germany	9
Netherlands	8
Sweden	7
China	5
Denmark	4
Switzerland	4
Italy	3
Canada	3
France	3
Japan	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).

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	Transmission of lymphocytic choriomeningitis virus by organ transplantation	8	Dhanasar — Prong 2 (well-positioned)
Contribution 2	Sequencing of 53,831 diverse genomes from the NHLBI TOPMed Program	9	Dhanasar — Prong 2 (well-positioned)
Contribution 3	Sex and gender: modifiers of health, disease, and medicine	8	Dhanasar — Prong 2 (well-positioned)