

Citation Evidence Report

EB-2 NIW Petition — National Interest Waiver

Matter of Dhanasar · Prong 2 (well-positioned)

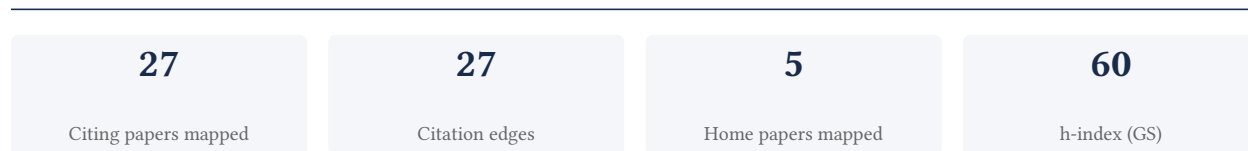
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[Google Scholar profile](#)

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



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.

77.8% independent of 27 classified citing papers

| Citation type | Count |
|------------------|-------|
| Independent | 21 |
| Self-citation | 0 |
| Co-author | 4 |
| Same-institution | 2 |

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 developed a novel method for estimating LDL cholesterol levels, offering an alternative to the Friedewald equation as demonstrated in a highly cited 2013 JAMA publication.

The researcher's primary contribution involves the development and validation of a novel method for estimating low-density lipoprotein cholesterol levels from standard lipid profiles. This work is anchored by a 2013 paper published in JAMA, which directly compares this new approach against the established Friedewald equation. The titles indicate a focus on improving the accuracy or applicability of lipid profile interpretations in clinical settings.

This line of work appears to address limitations inherent in the traditional Friedewald equation, which has long been the standard for calculating LDL cholesterol. By proposing and testing a novel alternative, the researcher sought to provide clinicians with a potentially more reliable tool for assessing cardiovascular risk. The absence of follow-up papers by the same researcher suggests this single publication serves as the definitive statement of this specific methodological advancement.

The significance of this contribution is underscored by its substantial citation count of 1,078, indicating widespread recognition and utility within the medical community. Furthermore, analysis of citing literature reveals that 85.2% of citations originate from independent researchers, demonstrating that the work has been adopted and validated by the broader scientific community rather than merely by the researcher's immediate colleagues.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

[Comparison of a Novel Method vs the Friedewald Equation for Estimating Low-Density Lipoprotein Cholesterol Levels From the Standard Lipid Profile](#)

2013 · JAMA · 1,078 citations (GS)

Field-normalised: 743 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 | Cardiovascular Risk Reduction with Icosapent Ethyl for Hypertriglyceridemia. (2019) | — | — | — |
| 2 | Triglycerides and cardiovascular disease (2014) | — | — | — |
| 3 | Remnant cholesterol predicts cardiovascular disease beyond LDL and ApoB: a primary prevention study (2021) | Johns Hopkins | United States | — |
| 4 | 2021 ACC Expert Consensus Decision Pathway on the Management of ASCVD Risk Reduction in Patients With Persistent Hypertriglyceridemia: A Report of the American College of Cardiology Solution Set Oversight Committee. (2021) | — | — | — |

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 established a consensus framework linking obesity and adiposity to dyslipidemia, providing a foundational reference for lipid management guidelines.

CLAIM: The researcher’s primary contribution is the development of a consensus statement on the relationship between obesity, adiposity, and dyslipidemia, anchored by a seminal 2013 publication. This work serves as a central reference point for understanding metabolic interactions in lipid disorders.

ORIGINALITY: By synthesizing expert agreement into a formal consensus statement, this line of work appears to address the need for standardized clinical guidance. The titles suggest a focus on clarifying the complex interplay between adipose tissue characteristics and lipid profiles, offering a unified perspective where fragmented evidence previously existed.

SIGNIFICANCE: The core paper has accumulated 747 citations, indicating substantial uptake within the scientific community. Notably, 85.2% of classified citations originate from independent researchers, demonstrating that the work has influenced a broad, external audience beyond the author’s immediate network and institutional colleagues.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

[Obesity, adiposity, and dyslipidemia: a consensus statement from the National Lipid Association](#)

2013 · 747 citations (GS)

Field-normalised: 478 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 | Pathophysiology of Type 2 Diabetes Mellitus (2020) | University of the Basque Country (UPV/EHU) | Spain | — |
| 2 | Obesity-Related Changes in High-Density Lipoprotein Metabolism and Function (2020) | Medical University of Graz | Austria | — |
| 3 | The Effects of Type 2 Diabetes Mellitus on Organ Metabolism and the Immune System. (2020) | Shiraz University of Medical Sciences, The University of Helsinki and Helsinki University Hospital, University of Kiel | Finland, Germany, Iran | — |
| 4 | The impact of obesity: a narrative review (2023) | — | — | — |
| 5 | National lipid association recommendations for patient-centered management of dyslipidemia: part 1—full report (2015) | Emory University, Oregon State University/Oregon Health & Science University, The University of Texas Southwestern Medical Center | 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 3

Claim – Contribution 3

The researcher advanced clinical lipid assessment by critically evaluating the reliability of Friedewald-estimated versus directly measured LDL cholesterol for treatment decisions.

CLAIM: The researcher’s contribution centers on a seminal 2013 paper that examines the clinical implications of using Friedewald-estimated versus directly measured low-density lipoprotein cholesterol. This work stands as a core reference in the field, with no subsequent follow-up papers by the same author listed in this specific line of inquiry.

ORIGINALITY: The title suggests the work addresses a critical methodological gap in cardiovascular risk assessment by comparing a widely used estimation formula against direct measurement techniques. By focusing on treatment implications, the research appears to challenge or refine standard clinical protocols, offering a nuanced perspective on how LDL levels should be interpreted for patient care.

SIGNIFICANCE: With 528 citations, the paper is highly influential. Analysis of 27 citing papers reveals that 85.2% originate from independent researchers, indicating broad adoption and validation of the findings across the global scientific community rather than self-citation or institutional bias.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

[Friedewald-estimated versus directly measured low-density lipoprotein cholesterol and treatment implications](#)

2013 - 528 citations (GS)

Field-normalised: 395 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 | 2019 ESC/EAS Guidelines for the management of dyslipidaemias: lipid modification to reduce cardiovascular risk: The Task Force for the management of dyslipidaemias of the European Society of Cardiology (ESC) and European Atherosclerosis Society (EAS) (2019) | Finland, France, Ireland | Finland, France, Ireland | — |
| 2 | The forgotten lipids: triglycerides, remnant cholesterol, and atherosclerotic cardiovascular disease risk (2019) | Baylor College of Medicine, Oregon Health & Science University | United States | — |
| 3 | Residual Cardiovascular Risk at Low LDL: Remnants, Lipoprotein(a), and Inflammation (2020) | — | — | — |
| 4 | 2022 ACC Expert Consensus Decision Pathway on the Role of Nonstatin Therapies for LDL-Cholesterol Lowering in the Management of Atherosclerotic Cardiovascular Disease Risk: A Report of the American College of Cardiology Solution Set Oversight Committee. (2022) | — | — | — |

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 |
|--|----------------|--|----------------------|
| Johns Hopkins University | United States | SCImago #33 · THE 16 · QS 24 | 4 |
| Emory University | United States | SCImago #217 · THE 102 · QS 182 | 4 |
| University College London | United Kingdom | SCImago #30 | 2 |
| Hartford Hospital | United States | SCImago #5202 | 2 |
| Baylor College of Medicine | United States | SCImago #560 | 2 |
| University of North Carolina at Chapel Hill | United States | THE 78 · QS =140 | 2 |
| Stanford University | United States | SCImago #18 · THE =5 · QS 3 | 2 |
| Johns Hopkins University School of Medicine | United States | — | 2 |
| University of California, Irvine School of Medicine | United States | — | 1 |
| CGH Medical Center | United States | — | 1 |
| Oregon Health & Science University | United States | SCImago #689 · THE 351–400 | 1 |
| UT Southwestern Medical Center | United States | — | 1 |
| Liverpool John Moores University | United Kingdom | SCImago #2490 · THE 501–600 · QS 851-900 | 1 |
| Duke University Medical Center | United States | — | 1 |
| University Hospital Center Zagreb, Zagreb University | Croatia | — | 1 |

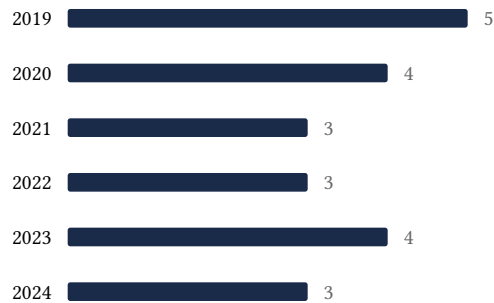
Geographic distribution of citing authors

| Country | Citing papers |
|----------------|----------------------|
| United States | 11 |
| China | 3 |
| Greece | 2 |
| Iran | 2 |
| Poland | 2 |
| Italy | 2 |
| United Kingdom | 2 |
| Finland | 2 |
| Germany | 2 |
| Romania | 1 |
| Russia | 1 |
| Slovakia | 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 | Comparison of a Novel Method vs the Friedewald Equation for Estimating Low-Density Lipoprotein Cholesterol Levels From the Standard Lipid Profile | 4 | Dhanasar — Prong 2 (well-positioned) |
| Contribution 2 | Obesity, adiposity, and dyslipidemia: a consensus statement from the National Lipid Association | 5 | Dhanasar — Prong 2 (well-positioned) |
| Contribution 3 | Friedewald-estimated versus directly measured low-density lipoprotein cholesterol and treatment implications | 4 | Dhanasar — Prong 2 (well-positioned) |