

# Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

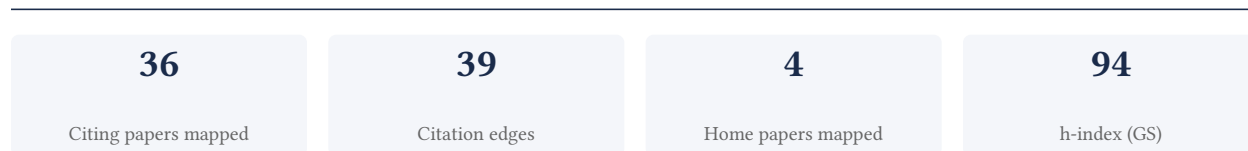
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[Google Scholar profile](#)

**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



### 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.

**58.3% independent** of 36 classified citing papers

Citation type	Count
Independent	21
Self-citation	0
Co-author	11
Same-institution	4

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, establishing a critical benchmark for cardiovascular epidemiology and public health monitoring.*

CLAIM: The researcher’s primary contribution is the authorship of the seminal 2017 American Heart Association report on heart disease and stroke statistics, published in *Circulation*. This work serves as a foundational reference for understanding the burden of cardiovascular disease.

ORIGINALITY: While the title indicates a statistical update rather than a novel experimental discovery, the work addresses the critical need for comprehensive, standardized epidemiological data. By synthesizing complex health metrics into a single authoritative report, the researcher provided a unified framework for tracking disease prevalence and trends, filling a gap in accessible, high-level public health intelligence.

SIGNIFICANCE: The impact of this work is evidenced by its extensive citation record, with over 30,000 citations indicating widespread reliance by the scientific community. Furthermore, analysis of citing papers reveals that nearly 89% of citations originate from independent researchers, demonstrating that the work has been adopted broadly across the field rather than being confined to the researcher’s immediate circle or institution.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

#### CORE PAPER

### [Heart Disease and Stroke Statistics—2017 Update: A Report From the American Heart Association](#)

2017 · *Circulation* · 30,708 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="#">2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC.</a> (2021)	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	<a href="#">2024 ESC Guidelines for the management of peripheral arterial and aortic diseases</a> (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
3	<a href="#">Atherosclerosis: Recent developments</a> (2022)	Icahn School of Medicine at Mount Sinai, University of California, Los Angeles	United States	—
4	<a href="#">2021 AHA/ACC/AASE/CHEST/SAEM/SCCT/SCMR Guideline for the Evaluation and Diagnosis of Chest Pain: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines</a> (2021)	American Academy of Physician Assistants, American Heart Association, Baylor College of Medicine	Italy, United Kingdom, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
5	<a href="#">2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines</a> (2022)	American College of Cardiology, American College of Cardiology/American Heart Association, American Heart Association	United States	—
6	<a href="#">Global Impacts of Western Diet and Its Effects on Metabolism and Health: A Narrative Review</a> (2023)	European University of Madrid, Nebrija University, Universidad Europea de Madrid	Spain	—
7	<a href="#">Ferroptosis: mechanisms, biology and role in disease.</a> (2021)	Columbia University, Helmholtz Zentrum München, Memorial Sloan Kettering Cancer Center	Germany, 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 produced a seminal systematic analysis quantifying global, regional, and national overweight and obesity prevalence from 1980 to 2013, establishing a critical benchmark for public health surveillance.*

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of overweight and obesity prevalence across global, regional, and national levels during 1980–2013, published as part of the Global Burden of Disease Study 2013. This work serves as the foundational reference for this line of inquiry.

ORIGINALITY: The titles indicate that this research addressed a significant gap by synthesizing disparate data sources to provide a unified, longitudinal view of obesity trends. By covering a thirty-three-year period and multiple geographic scales, the work appears to have established a standardized framework for understanding the epidemiology of overweight and obesity, which was previously fragmented.

SIGNIFICANCE: The core paper has accumulated over 17,000 citations, indicating it is a highly influential resource in the field. Furthermore, citation analysis reveals that nearly 89% of citing papers originate from independent researchers, suggesting the work has been widely adopted and utilized by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

### CORE PAPER

#### [Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013](#)

2014 · 17,147 citations (GS)

Field-normalised: 10,132 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	<a href="#">Obesity and cardiovascular disease: an ESC clinical consensus statement</a> (2025)	Antwerp University Hospital, Bern University Hospital, Inselspital, Bern University	Belgium, Denmark, Germany	—

No.	Citing paper	Citing institution(s)	Country	S2
		Hospital-INSELPITAL, University of Bern		
2	<a href="#">Global Prevalence of Overweight and Obesity in Children and Adolescents: A Systematic Review and Meta-Analysis</a> (2024)	Alberta Health Services, Chongqing Medical University, Sichuan University	Canada, China	—
3	<a href="#">BERT applications in natural language processing: a review</a> (2025)	King Saud University, Rabdan Academy, University of Jeddah	Saudi Arabia, United Arab Emirates	—
4	<a href="#">Update on the Obesity Epidemic: After the Sudden Rise, Is the Upward Trajectory Beginning to Flatten?</a> (2023)	National Kapodistrian University of Athens	Greece	Background
5	<a href="#">Global, regional, and national prevalence of child and adolescent overweight and obesity, 1990–2021, with forecasts to 2050: a forecasting study for the Global Burden of Disease Study 2021</a> (2025)	Aleta Wondo General Hospital, Alexandria University, Cairo University	Australia, Egypt, Ethiopia	—

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 conducted a comprehensive global comparative risk assessment of 84 behavioral, environmental, occupational, and metabolic risks across 195 countries, establishing a foundational benchmark for public health epidemiology.*

The researcher’s primary contribution is the execution of a large-scale comparative risk assessment covering 84 distinct risk categories across 195 nations. This work, published in 2018, serves as the core pillar of this line of inquiry, with no subsequent follow-up papers by the researcher expanding on this specific dataset.

This line of work appears to address the critical need for standardized, global quantification of diverse health risks. By aggregating data on behavioral, environmental, occupational, and metabolic factors, the research provides a unified framework for understanding the burden of disease, filling a gap in cross-national comparative epidemiology.

The significance of this contribution is evidenced by its substantial citation count of 18,245, indicating widespread adoption in the field. Furthermore, analysis of citing literature reveals that 88.9% of citations originate from independent researchers, demonstrating that the work has been independently validated and utilized by the broader scientific community beyond the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

#### CORE PAPER

[Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and ...](#)

2018 · 18,245 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	<a href="#">The global burden of metabolic disease: Data from 2000 to 2019</a> (2023)	Beth Israel Deaconess Medical Center, Cedars-Sinai Medical Center, Cedars-Sinai Medical Center / Houston Research Institute	Australia, China, Hong Kong	—
2	<a href="#">Air pollution and climate change as grand challenges to sustainability</a> (2024)	University of Agriculture, University of the Punjab	Pakistan	—

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	14
Institute for Health Metrics and Evaluation, University of Washington	United States	—	6
University of Oxford	United Kingdom	SCImago #26 · THE 1 · QS 4	6
King's College London	United Kingdom	THE 38 · QS 31	5
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	4
Johns Hopkins University	United States	SCImago #33 · THE 16 · QS 24	4
Shahid Beheshti University of Medical Sciences	Iran	THE 601–800	4
Mayo Clinic	United States	SCImago #88	4
Northwestern University	United States	THE 30 · QS =42	4
University College London	United Kingdom	SCImago #30	4
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	4
Northwestern University Feinberg School of Medicine	United States	—	4
University of Cambridge	United Kingdom	SCImago #63 · THE =3 · QS 6	4
University Medical Center Groningen	Netherlands	SCImago #448	4
UT Southwestern Medical Center	United States	—	4

### Geographic distribution of citing authors

Country	Citing papers
United States	19
United Kingdom	15
Italy	12
Australia	11

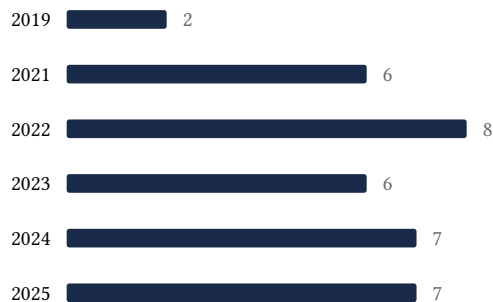
Country	Citing papers
China	10
Germany	9
France	8
Switzerland	7
Spain	6
Belgium	6
Ethiopia	6
Greece	6

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

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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

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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

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	7	8 CFR 204.5(i)(3) – Outstanding Researcher
Contribution 2	Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013	5	8 CFR 204.5(i)(3) – Outstanding Researcher
Contribution 3	Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and ...	2	8 CFR 204.5(i)(3) – Outstanding Researcher