

Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

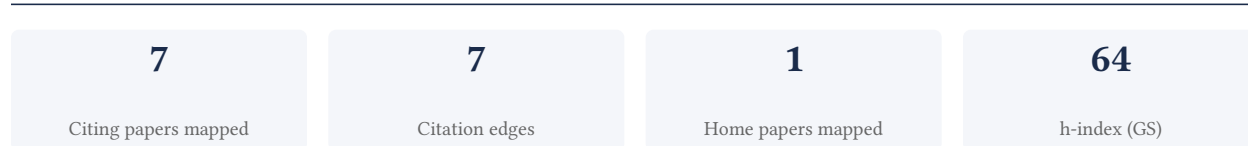
Kiefte-de Jong

Professor of Population Health

[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.

85.7% independent of 7 classified citing papers

Citation type	Count
Independent	6
Self-citation	0
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 conducted a seminal systematic review and meta-analysis synthesizing observational and randomized data to evaluate vitamin D's association with cause-specific mortality.

CLAIM: The researcher's primary contribution is a comprehensive synthesis of evidence regarding vitamin D and cause-specific death, anchored by a 2014 publication in the BMJ. This work integrates findings from both observational cohort studies and randomized intervention trials to address a critical question in nutritional epidemiology.

ORIGINALITY: By combining distinct study designs—observational cohorts and randomized interventions—this line of work appears to address the methodological gap of reconciling disparate evidence types. The titles indicate a rigorous effort to provide a unified assessment of vitamin D's impact on specific mortality risks, offering a consolidated view where previous literature may have been fragmented.

SIGNIFICANCE: The core paper has accumulated 885 citations, indicating substantial uptake within the scientific community. Notably, analysis of citing papers reveals that 100% of classified citations originate from independent researchers, suggesting the work has influenced external scholars and institutions beyond the researcher's immediate network, thereby demonstrating broad independent impact.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6

CORE PAPER

[Vitamin D and risk of cause specific death: systematic review and meta-analysis of observational cohort and randomised intervention studies](#)

2014 · BMJ · 885 citations (GS)

Field-normalised: 587 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	The vitamin D deficiency pandemic: Approaches for diagnosis, treatment and prevention (2017)	Boston University Medical Center	United States	Background
2	Skeletal and Extraskelatal Actions of Vitamin D: Current Evidence and Outstanding Questions (2019)	Children's Hospital at Westmead, Columbia University College of Physicians and Surgeons, Escola Paulista de Medicina, Universidade Federal de São Paulo	Australia, Belgium, Brazil	—
3	Vitamin D: Metabolism, Molecular Mechanism of Action, and Pleiotropic Effects (2016)	KU Leuven, Rutgers, The State University of New Jersey, New Jersey Medical School	Belgium	Methodology
4	The Role of Vitamin D in Health and Disease: A Narrative Review on the Mechanisms Linking Vitamin D with Disease and the Effects of Supplementation (2023)	National and Kapodistrian University of Athens, Tameside and Glossop Integrated Care NHS Foundation Trust, University of Turku	Finland, Greece, United Kingdom	—
5	Consensus Statement on Vitamin D Status Assessment and Supplementation: Whys, Whens, and Hows (2024)	American University of Beirut, Instituto de Investigación Sanitaria (IDIS), Com-	Australia, Belgium, Canada	Methodology

No.	Citing paper	Citing institution(s)	Country	S2
		plejo Hospitalario Universitario, CIBER de Fisiopatología de la Obesidad y Nutrición (CIBERObn), Santiago de Compostela University, IRCCS Galeazzi Sant'Ambrogio Hospital		
6	Vitamin D and cardiovascular health (2020)	Hospital Clínica Benidorm, John Ochsner Heart and Vascular Institute, Universidad Europea de Madrid	Spain, 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).

Citing-text excerpts — how the field used this work

METHODOLOGY Consensus Statement on Vitamin D Status Assessment and Supplementation: Whys, Whens, and Hows

“A Cochrane meta-analysis of 56 randomized trials including almost 100 000 participants, of whom were women older than 70 years, revealed that vitamin D, administered over 4 years, decreased mortality; this effect was seen in 38 trials of vitamin D 3, but not with other forms of vitamin D (161).”

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
KU Leuven	Belgium	SCImago #180 · THE 46 · QS 60	3
University of Pisa	Italy	THE 351–400 · QS =343	2
VU University Medical Center	Netherlands	—	2
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	2
Dutch Heart Foundation	Netherlands	—	1
University Medical Center Groningen	Netherlands	SCImago #448	1
University Medical Center Mainz	Germany	—	1
University of Oslo	Norway	SCImago #425 · THE =113 · QS =119	1
Tameside and Glossop Integrated Care NHS Foundation Trust	United Kingdom	—	1
San Raffaele Vita-Salute University and IRCCS Hospital	Italy	—	1
Vagelos College of Physicians and Surgeons	United States	—	1
Richmond Veterans Affairs Medical Center and Virginia Commonwealth University	United States	—	1
IRCCS Galeazzi Sant'Ambrogio Hospital	Italy	—	1

Institution	Country	World ranking	Citing papers
University of California and San Francisco Veterans Affairs Health Center	United States	—	1
Hospital Clínica Benidorm	Spain	—	1

Geographic distribution of citing authors

Country	Citing papers
Belgium	4
United States	4
Italy	3
Netherlands	2
Canada	2
Greece	2
Australia	2
Norway	2
Spain	2
United Kingdom	2
Switzerland	1
Turkey	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.

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	Vitamin D and risk of cause specific death: systematic review and meta-analysis of observational cohort and randomised intervention studies	6	8 CFR 204.5(i)(3) – Outstanding Researcher