iCARDIO Alliance Guidelines on Obesity Management

PUBLIC REVIEWER REVIEW PERIOD **9 MAY 2025 TO 2 JUNE 2025**COMMENT FORM TO BE SENT TO: public.review@icardio.org

Reviewer's full name*:	
Email address*:	
Institution/practice*:	
Title/position*:	
Date*:	

* Mandatory fields

General Comments					

(Please add more rows if needed)

Please make sure you list the page, line, table number, or figure number for each comment/correction so that your contribution can be accurately assessed. Thank you!

Page #	Section #	Line #	Table #	Figure #	Specific Comments Please list the page, line, table number, or figure number for each comment/correction

Page #	Section #	Line #	Table #	Figure #	Specific Comments Please list the page, line, table number, or figure number for each comment/correction
	·				

(Please add more rows if needed)