## **Full Revision**



Manuscript number: RC-xx-xx

Corresponding author(s): First name, Last name

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## 1. General Statements [optional]

This section is optional. Insert here any general statements you wish to make about the goal of the study or about the reviews.

## 2. Point-by-point description of the revisions

This section is mandatory. Please insert a point-by-point reply describing the revisions that were <u>already carried out and included</u> in the transferred manuscript.