Stellingen behorende bij het proefschrift

**Surgical Implications of Sacrococcygeal Teratoma and Its Consequences**

1. Tumour-haemorrhage is the most common cause of neonatal death in patients with sacrococcygeal teratoma and is directly related to a larger tumour diameter (this thesis).
2. Neonates with sacrococcygeal teratoma should be routinely screened for hydronephrosis, hip dysplasia and other associated abnormalities especially in the case of an intra-abdominal positioned tumour (this thesis).
3. The current follow-up strategies of patients treated for sacrococcygeal teratoma during infancy are incomplete as they do not concern long-term functional sequelae (this thesis).
4. The long-term Quality of Life of patients treated for SCT during childhood does not differ from the Quality of Life of the general Dutch population (this thesis).
5. Caesarean section should not be performed routinely in women who were treated for sacrococcygeal teratoma during their childhood (this thesis).
7. If the patient is ill look where the surgeon has been (Colorectal Meeting, Villars 2017).
8. Just do it (Nike).
9. Today you are you, that is truer than true, there is no one alive who is youer than you. (Dr Seuss)
10. The gin and tonic has saved more Englishmen's lives and minds, than all the doctors in the Empire (Winston Churchill)

Marijke Kremer, April 2017