Introduction
Double Outlet Left Ventricle (DOLV) is an exceedingly rare congenital cardiac anomaly. Its prenatal diagnosis and precise anatomical definition are challenging. DOLV is a type of ventriculo arterial connection deformity in which both great vessels arise either entirely or predominantly from left ventricle. DOLV occurs most commonly in the form of atrial solitus situs with atrio ventricular concordance. The birth prevalence of DORV is less than 1 in 2 million live births.

Embryologically DOLV could result from excessive left ward shift of the embryonic conotruncus, anomalous differential absorption of sub pulmonic and sub aortic conus or anomalous differential conal growth. DOLV is classified into two subtypes depending on the location of VSD and position of great arteries:

(1) DOLV with normal great arteries with sub pulmonary or doubly committed sub arterial VSD and levo position of anterior pulmonary artery

(2) DOLV with TGA with sub aortic or doubly committed sub arterial VSD and levo position of anterior aorta. Cyanosis is more prominent in this type of DOLV.

Case Report
Primi aged 19 years (with first grade consanguinity) at 22 weeks gestation was referred for second trimester anomaly scan. With high suspicion of cardiac anomaly, we further evaluated with detailed fetal ECHO.

Fetal ECHO:
- 4 chamber view findings: – asymmetry in cardiac chambers with hypoplastic right atrium and right ventricle, mildly dilated left ventricle sub aortic VSD
- Oblique views for outflow tracts reveal – absence of RV Out flow tract Sub aortic type of VSD two outflow tracts seen arising from left ventricle and coursing parallel to each other  Aorta seen lying in right anterior position relative to pulmonary artery

Discussion:
Associated cardiac anomalies are VSD, ASD, PS, RV Hypoplasia, PDA & Tricuspid Atresia
D.D includes – TGA and DORV

Treatment:
- Biventricular repair
- Pulmonary root translocation from LV to RV

CONCLUSION
Detailed fetal cardiac examination performed by expert physician on high end USG equipment can serve as an effective tool to intuitively demonstrate the detailed anatomic features in a complex cardiac anomaly like DOLV. Pre natal diagnosis of such a complicated and rare cardiac anomaly in early mid trimester will be helpful to the parents and the obstetrician for decision making.