Introduction
Ovarian pregnancies (OP) is a rare event of ectopic pregnancy with natural incidence rate of about 1/15,000 to 50,000, and account for 0.15–3% of all ectopic pregnancies. OP’s presents similar symptoms and signs as of tubal pregnancy, hence it is still a challenging preoperative diagnosis and has a hazardous outcome.

Study case
A 29 year-old generally healthy woman with a past history of a tubal pregnancy and right salpingectomy presented at 4+6 weeks’ natural gestation with low abdominal pain. TVS showed endometrial lining of 19 millimeters, a right ovary with normal structure. The Left ovary had a normal structure, containing a 19 millimeter round structure with circular blood flow- described as corpus luteum. On the lateral surface of the ovary an echogenic structure measuring 12X12 millimeter containing a yolk sac suggestive of ovarian pregnancy was demonstrated and little amount of fluid in the cul-de-sac.

Serum b-hCG level was 2170 IU/L and hemoglobin concentration was 13.2 g/dl. At laparoscopy an intact, vascularized, 1x1.5 cm left ovarian mass was identified, consistent with an ovarian pregnancy. Ovarian mass suction was performed to remove products of conception. Histologic analysis confirmed the diagnosis.

Conclusion
Ovarian ectopic pregnancy should be kept in mind as a rare possibility in females of reproductive age group presenting with acute abdomen. Early diagnosis by high resolution transvaginal ultrasound and laparoscopy may decrease the risk of rupture, secondary implantation, hemorrhagic shock and maternal mortality.