Introduction:
This is the only case in the literature, to our knowledge, as a heterotopic pregnancy with two ectopic pregnancies, one with Caesarean scar pregnancy and the other one is a tubal ectopic pregnancy occurring simultaneously.

Case: A 35 years, Para 3+0, H/O of 3 X LSCS, her last LSCS was complicated with placenta accreta, was referred from private on 30/3/2019 as Caesarean scar pregnancy at 5 weeks and 3 days.

TVUS: Single gestation sac attached to the previous CS scar site, GA: 5 wk+5 days & No FHS (a), in addition to a complex mass at right adnexa measuring 2.55 x 2.22 x 1.47 cm with a bagel sign and yolk sac (b). MRI Confirmed the USS findings of two ectopic pregnancies (c).

Management:
Counselling for laparoscopic right salpingectomy of the ectopic pregnancy and placement of a cervical occlusion stitch followed by suction evacuation under USS guidance for the management of Caesarean scar ectopic pregnancy.

• Both procedures were uneventful. She was discharged home on Day 2, follow up at OPD with no complaints, counselled about increased risk of ectopics and contraception. Mirena was inserted 6 weeks later.

Conclusion:
This case highlights the importance of the systematic approach while scanning patients. When there is a diagnosis of an intrauterine gestational sac the same methodical approach should be continued to look for adnexal masses in order to avoid rare situations like this case.