**Introduction**

Chorionicity is optimally determined before 14 weeks gestation using the T-or-lambda signs of membrane insertion. Chorionicity is essential for patient management and risk assessment. Many women in South Africa book after 14 weeks gestation, or do not have an early scan, making assessment of chorionicity challenging.

**Aims**

To assess the accuracy of the following 5 ultrasound parameters in determining chorionicity in patients presenting after 14 weeks gestation: number of placentas, fetal gender concordance, lambda or T-sign, membrane thickness, number of layers in dividing membrane.

**Methods**

Prospective study of all twin pregnancies presenting for first scan after 14 weeks gestation. The 5 ultrasound parameters were documented. Placental histology was used to define chorionicity. Sonographers and pathologists were blinded.

**Results**

85 patients enrolled. 58 had placental histology. Correlation between ultrasound parameters and placental histology shown in Figure 1.

**Conclusion**

Discordant gender confirms DC twins. Two placentas – 89% NPV for MC twins. Presence of lambda sign at any gestation confirms DC. Membrane thickness is a good accurate test not influenced by gestational age. If the membrane measures > 2 mm counting layers may be useful. A diagnostic algorithm is shown in Figure 2.