Right Aortic Arch is diagnosed when transverse aortic arch is to right side of trachea. In embryological double aortic arch, the left aortic arch regresses between origin of left common carotid artery and left subclavian artery. The left ductus arteriosus persists and right regresses. Thus a vascular ‘U’ shaped ring is formed around trachea by Right Aorta Arch and Left Ductus Arteriosus.

21 years G2 P1 was referred for NT scan – CRL is 80 mm. Situs and 4 chamber view is normal. 3VT view revealed an abnormal ‘U’ shaped pattern instead of normal V shaped confluence. The echogenic trachea is in center of spine. Aberrant left subclavian artery is seen by its straight course from behind trachea to left shoulder.

No other cardiac or extracardiac anomaly was detected. Karyotype and screening for microdeletion of 22q 11.2 and trisomy 21 was suggested which

Conclusion
This case emphasizes the meticulous use of doppler and 3 vessel and trachea view to detect cardiac anomalies in first trimester.