A 40 year old premenopausal female presented with right lower quadrant abdominal pain of 2 days duration. She denied any recent history of pregnancy, abdominal wall surgeries or use of oral contraceptive pills. She has no personal or family history of hematological conditions. On physical examination, tenderness of right lower quadrant was noted. She was afebrile. Results of laboratory studies were unremarkable except for mildly elevated white blood cell count of 12,300 cells/mm3. She underwent computed tomography to rule out appendicitis which revealed right ovarian vein thrombosis. (Figure 1) shows axial section with arrow pointing to thrombosed vein, (Figure 2) shows coronal section. Hypercoagulable work up was negative. She has no known risk factors for thromboembolism and can be termed as idiopathic ovarian vein thrombosis. She is currently on anticoagulation. To date, only nine cases of idiopathic ovarian vein thrombosis have been reported.