Objective
To present the prenatal diagnosis of hemivertebra.

Methods
A 29-year-old gravida 2 para 1 woman was referred to our tertiary perinatology centre at 24 weeks gestation with the finding of distortion of spine. The past and family history of the patient were unremarkable. In the current pregnancy, she did not report any use of medication, had no history of fever or exposure to radiation. The patient mentioned that scoliosis was detected at the 20 week ultrasonographic evaluation. The triple test at 17 weeks gestation was normal.

Results
Ultrasonography during our initial examination revealed a single viable fetus compatible with 24 weeks gestation. The amniotic fluid was normal. At the thoracic part of the fetal spine, a distortion was seen. Hemivertebra between T11 and T12 segments was demonstrated (Figure 1). The overlying skin appeared intact and there were no intracranial findings suggestive of an open neural tube defect. Other abnormalities were not detected. With these findings, we considered the diagnosis of isolated hemivertebra. The family was informed about the prognosis of this defect.

Conclusion
Hemivertebra is a congenital anomaly of the spine in which only one half of the vertebral body develops. The prenatal diagnosis of hemivertebra can be made through ultrasound. Hemivertebra is commonly associated with other musculoskeletal anomalies or it may be a part of a syndrome (e.g. VACTERL) so detailed examination is important. But in this case it is isolated. The prognosis of isolated hemivertebra is usually good.