Objective
To determine ultrasonographically the early spontaneous resolution of a case of a fetus with meconium peritonitis.

Methods
Serial imaging of the fetus. Review of literature is available.

Results
A 33 year-old pregnant woman (1 previous termination) had an ultrasound scan at 15\textsuperscript{+3} weeks of gestation which showed a fetus with moderate ascites and two hypoechoic liver cysts measuring 4mm and 17x4 mm. TORCH screen was negative. Chromosomal abnormalities (amniocentesis and genetic arrays) were ruled out. Cystic fibrosis screening was performed. One week later, ascites had completely resolved, but a liver hypoechoic cyst of 6x3 mm persisted and multiple superficial calcifications were also noted. In the 2 weekly followup ultrasound scans persistent liver calcifications with no signs of ascites were visualized. Magnetic resonance (MRI) at 32 weeks of gestation confirmed perihpatic and diaphragmatic calcifications. A healthy male infant of 3100 g was delivered at 36\textsuperscript{+6} weeks of gestation, with no complications. At 9 months of age, ultrasound and MRI postnatal scans still show hepatic calcifications without clinical significance. Ultrasound and MRI images are available for review.

Conclusion
This is a rare case of early spontaneous resolution of meconium peritonitis at 15\textsuperscript{+3} weeks of gestation without clinical consequences in the newborn.