A 7 days old baby was referred to MRI in view of interhemispheric cystic lesion in brain diagnosed during routine antenatal obstetric scan of patient. Baby was delivered, cried immediately after birth and accepting feeds well.

A cavum velum interpositum (CVI) is a normal variation where there is a dilated CSF space involving the velum interpositum. When larger than 1cm in axial transverse measurement, with outwardly bowed margins and positive mass effect, the term cyst of the velum interpositum or cavum velum interpositum cyst should be used [2]. Although moderate cystic dilatation of the CVI may sometimes be observed, a true large cyst is extremely rare with only a handful of reported cases, mostly in children and adolescents. [1]

Other differentials considered are arachnoid cyst /pineal gland cystic lesions and complications are obstructive hydrocephalus. Our case is unique as patient was 7 days old baby.

**CONFLICT OF INTEREST**
The authors declared no conflict of interest.

**FUNDING:** None.

**REFERENCES**
Figure 1:
App 26 x 24 mm sized triangular CSF signal intensity lesion located behind the foramen of monro, beneath the fornices of bilateral lateral ventricles and above the tela choroidea of III ventricle (depicted by arrow).

Figure 2:
The tip of the triangle is pointing towards foramen of monro and base posteriorly displacing the splenium of corpus callosum.

Figure 3:
This cystic lesion is causing elevation, splaying of fornices, posterior displacement of splenium of corpus callosum and inferior displacement of internal cerebral veins – suggestive of Cavum velum interpositum cyst. Differential Diagnosis- Arachnoid cyst.