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**Educational Abstract**

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## Polysplenia Syndrome With Congenital Short Pancreas and Preduodenal Portal Vein: A Case Report and Literature Review

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Polysplenia syndrome is a rare congenital disorder of abnormal positioning of the visceral organs and vessels in the chest and abdomen, with incidence of 1 per 250.000 and predominated in females. Polysplenia syndrome presents with a wide range of anomalies with no pathognomonic findings. The range of anomalies include multiple spleens, visceral heterotaxy, right-sided stomach, a left-sided or large midline liver, malrotation of the intestine, a short pancreas, preduodenal portal vein and inferior vena cava anomalies. We reported a case of polysplenia syndrome in child presenting with high fever since 4 days before hospital admission and obstructive jaundice owing to suspected biliary stasis, possibly as a result of compression of the common bile duct by the preduodenal portal vein. Abdominal ultrasound revealed polysplenia and hepatomegaly. Contrast-enhanced abdominal CT revealed multiple left-sided accessory spleens, midline liver, preduodenal portal vein, and short pancreas. Diagnosis of heterotaxy syndrome with polysplenia was established. Good appreciation of the spectrum of situs anomalies and anatomic manifestations can greatly impact the treatment of primary and secondary sequelae of this syndrome. Therefore, radiologists should become familiar with these rare and peculiar anomalies of this syndrome and present valuable report to aid surgeons deciding optimal treatment for the patient.