A 29-year-old male patient experienced a 2-week fluctuating vision loss and eye strain in his right eye, with best-corrected visual acuity (BCVA) of logMAR 0.2 (20/32). The axial length of his right eye was 26.43 mm. Fundus examination showed features suggestive of an inferotemporal rhegmatogenous retinal detachment. Scanning laser ophthalmoscopy revealed an inferotemporal retinal detachment with a large retinal cystoid abnormality at the 7 o’clock position, without any detectable retinal holes or subfoveal fluid. Ultra-widefield swept- source optical coherence tomography (BM-400K BMizar [TowardPi Medical Technology]) showed the cavity of the retinal cystoid abnormality and the retinal detachment, without any detectable retinal holes. After 1 week of rest, BCVA improved to logMAR 0 (20/20).