A 15-year-old boy was referred for keratic precipitates (KPs) in his right eye, appearing a day after undergoing pars plana lensectomy and vitrectomy with intravitreal vancomycin and ceftazidime for posttraumatic endophthalmitis. His best-corrected visual acuity (BCVA) was counting fingers at 1 m OD. Slitlamp evaluation showed KPs arranged in an unusual serpiginous pattern. There were 2+ cells in the anterior chamber,1 and corneal sensations were intact. His aqueous tap was sterile, and the patient was advised to take topical corticosteroids every hour. The KPs resolved within 2 weeks, and the BCVA improved to 6/9 OD with aphakic correction.