A 28-year-old woman with a history of Hashimoto’s thyroiditis presented with hand motion vision of the left eye. Fundus examinationshowed unilateral frosted branch angiitis (A). Angiography revealed blockage with late vascular leakage (B). Lower extremity displayed anulcerative rash (C), with biopsy demonstrating leukocytoclastic vasculitis (D). This can occur in various autoimmune and infectiousconditions; however, systemic work-up was consistent with systemic lupus erythematosus with positive anti-nuclear, anti-Smith, and antidouble stranded DNA antibodies. Bacillary layer detachment and vitreous cell were observed on OCT, which resolved after administrationof systemic high-dose steroids and rituximab. Her vision improved to counting fingers at 1 month.