American College of Radiology ACR Appropriateness Criteria®

Chronic Pancreatitis

Variant 1: Adult. Suspected chronic pancreatitis or complications associated with chronic pancreatitis. Initial imaging

	Appropriateness			T			Final Tabulations											
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6		8	9			
CT abdomen and pelvis with IV contrast	Usually appropriate	Strong	��� 1-10 mSv	���� 3- 10 mSv [ped]	8	8	0	0	0	0	1	0	2	5	1			
		References		Study	Quality													
		51 (30955070)			2													
		52 (29231795)			4													
		50 (30325281)			4													
		53 (29975348)			4													
		61 (31630919)			2													
		38 (31933064)			4													
		35 (33939668)			4													
		48 (31428813)			4													
		55 (31511956)			4													
		26 (28130609)			Good													
		39 (32285180)			2													
		56 (36138242)			4													
MRI abdomen without and with IV contrast with MRCP	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	1	0	3	4	1			
		References		Study	Quality					•	•		•					
		42 (33819364)		·	3													
		52 (29231795)			4													

		73 (32371200))		4										
		50 (30325281))		4										
		22 (30376981))		0										
		38 (31933064))		4										
		46 (33861154))		4										
		41 (37436452))		2										
		26 (28130609))		Good										
		39 (32285180)			2										
		47 (35857066))		1										
		44 (35915988))	4 4											
		40 (32740862))												
		43 (34524501))												
		48 (31428813))		4										
		55 (31511956)			4										
CT abdomen and pelvis without and with IV contrast	Usually appropriate	Moderate	���� 10-30 mSv	⊕⊕⊕⊕⊕ 10-30 mSv [ped]	7	7	0	0	0	0	1	3	6	0	0
		References		Study	Quality										
		51 (30955070))												
		52 (29231795))	4											
		35 (33939668))		4										
		26 (28130609))	C	Good										
		53 (29975348))												
		61 (31630919))		2										
		55 (31511956))	4											
		39 (32285180)			2			-		1					
US abdomen endoscopic	May be appropriate	Strong	O 0 mSv	O 0 mSv [ped]	5	5	1	0	1	2	3	2	0	0	0
		References		Study	Quality										
		75 (27076756))		4										

							ı								
		74 (28108042)			3										
		13 (28207747)			0										
		65 (32631791)			4										
		63 (36308059)			3										
		64 (26952577)		2 4											
		71 (35926493)													
MRI abdomen without IV contrast with MRCP	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	4	4	0	2	1	2	3	0	1	0	0
		References		Study	y Quality										
		42 (33819364)			3										
		73 (32371200)			4										
		41 (37436452)			2										
		26 (28130609)		(Good										
		22 (30376981)			0										
		44 (35915988)			4										
		55 (31511956)			4										
		46 (33861154)			4										
		39 (32285180)			2										
		47 (35857066)			1										
		43 (34524501)			3			1		1				-	
CT abdomen and pelvis without IV contrast	Usually not appropriate	Limited	��� 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	3	3	1	1	3	3	0	1	0	0	0
		References		Study	y Quality										
		51 (30955070)			2										
		52 (29231795)		4											
		35 (33939668)		4											
		26 (28130609)		(Good										
		53 (29975348)			4										
		61 (31630919)			2										
		55 (31511956)			4										

US abdomen	Usuall approp	Moderate	O 0 mSv	O 0 mSv [ped]	3	3	0	2	5	3	0	0	0	0	0
		References			Study Quality										
		75 (27076756)													
		74 (28108042)		3											
		26 (28130609)	Good												
		70 (32511808)			3										

Variant 2: Adult. Chronic pancreatitis. Suspect superimposed acute pancreatitis. Initial Imaging

Procedure	Appropriateness	SOE	Adults RRI	Doda DDI	Deting	Madian	Final Tabulations					ns	,			
Procedure	Category	SOE Adults F		Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9	
CT abdomen and pelvis with IV contrast	Usually appropriate	Limited	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	8	8	0	0	0	0	1	0	0	5	3	
MRI abdomen without and with IV contrast with MRCP	May be appropriate	Limited	Limited O 0 mSv		6	6	0	0	1	0	3	1	1	2	1	
		References		Study	Quality											
		49 (36477631)			3											
CT abdomen and pelvis without and with IV contrast	May be appropriate (Disagreement)	Expert Opinion	���� 10-3 mSv	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	5	5	0	1	1	1	3	2	2	0	0	
MRI abdomen without IV contrast with MRCP	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	4	4	1	0	2	2	3	0	1	0	0	
CT abdomen and pelvis without IV contrast	Usually not appropriate	Limited	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	3	3	1	2	3	1	1	0	0	1	0	
US abdomen	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	1	1	4	1	1	0	0	1	0	
US abdomen endoscopic	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	0	3	5	0	0	1	0	0	0	

Appendix Key

A more complete discussion of the items presented below can be found by accessing the supporting documents at the designated hyperlinks.

Appropriateness Category: The panel's recommendation for a procedure based on the assessment of the risks and benefits of performing the procedure for the specified clinical scenario.

SOE: Strength of Evidence. The assessment of the amount and quality of evidence found in the peer reviewed medical literature for an appropriateness recommendation.

- **References:** The citation number and PMID for the reference(s) associated with the recommendation.
- Study Quality: The assessment of the quality of an individual reference based on the number of study quality elements described in the reference.

RRL: Relative Radiation Level. A population based assessment of the amount of radiation a typical patient may be exposed to during the specified procedure.

Rating: The final rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

Median: The median rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

Final tabulations: A histogram showing the number of panel members who rated the procedure as noted in the column heading (ie, 1, 2, 3, etc.).

Additional supporting documents about the AC methodology and processes can be found at www.acr.org/ac.