Abstract
Acute pancreatitis is a disease with a broad spectrum of clinical presentation. It varies in severity from mild edematous pancreatitis with mostly uneventful recovery to severe necrotizing forms associated with significant morbidity and mortality. Various severity scoring systems are used for assessing the prognosis of acute pancreatitis. These include the clinical scoring scales as Ranson criteria, Glasgow scales, simplified acute physiology (SAP) score and acute physiology and chronic health evaluation II (APACHE II) score. The CT severity index (CTSI) derived by Balthazar grading of pancreatitis and the extent of pancreatic necrosis is now widely used in describing CT findings of acute pancreatitis and serves as the radiological scoring system. The purpose of this review is to analyze the correlation of clinical and radiological scoring scales with patient outcome and assess their role as objective prognosticators of acute pancreatitis patients.

Keywords
Pancreatitis, CT Scan, Clinical Features, Scoring