**Introduction**

Biometric and Doppler parameters reference charts impact the screening, diagnosis and management of fetal growth abnormalities. In Italy there is currently no chart recommended at national level.

**Aim**

The aim of the study was to evaluate the variability in the use of biometric reference charts in clinical practice.

**Methods**

A short questionnaire was mailed to the lead of the Unit of 12 tertiary referral centres. Frequency and percentage distribution of adopted reference charts were analysed.

**Results**

The Figures 1 and 2 show wide discrepancies among centres regarding reference charts used for antenatal biometric and Doppler parameters. The variability was highest for crown-rump length (data not shown), femur length, estimated fetal weight, umbilical and middle cerebral (MCA) arteries pulsatility index (PI). Of note, due to the lack of some charts to provide reference charts for all biometric parameters implies the need to use different charts for the same patient. The most uniform application of reference charts was for ductus venosus PI and peak systolic velocity in MCA, although not without variability.

**Conclusion**

There is a wide discrepancy among Italian referral centres regarding biometric and Doppler reference charts adopted for clinical purposes. This heterogeneity provides sufficient evidence to mandate actions in order to provide a recommendation regarding the use of reference charts nationally and to homogenize their application.