The final questionnaire was administered to 311 subjects experiencing influenza like illness, including 22% with laboratory-confirmed influenza infection, presenting to clinicians across 25 USA sites. Items and properties were collected using descriptive statistics, Item Response Theory (IRT), Confirmatory Factor Analysis (CFA), internal consistency and test-retest reliability. RESULTS: The patient generated Mapping resulted in 149 concepts which clustered into daily activities, emotions and relationships. Eleven symptoms were identified from the literature. Expert content review led to item clarification, removal (n = 2) and addition of an item. Candidate measurement properties were drafted pre-defined criteria including simplicity and brevity. Both IRT and CFA assisted with item selection. The Symptoms scale factored into a systemic and respiratory subscale (seven and three items, respectively) and the Impact scale covered impact on usual activities, emotional impact and impact on relationships (nine and four items, respectively). Most subscales displayed good internal consistency (Cronbach’s α ≥ 0.8). The 3-item Respiratory subscale was poor (α = 0.50). Test-retest indicated high reliability (intraclass correlation coefficient >0.8 for all scales). CONCLUSIONS: These analyses provide evidence for the content validity and reliability of the 24-item Flu-IQ as a measure of symptom intensity and impact of influenza.