Body: Rationale: The management of IPF presents a major challenge. Patients experience debilitating symptoms which impact upon quality of life (QoL). Whilst new therapies are being explored there is, as yet, no validated systematic tool for measuring and monitoring health related QoL status in IPF. Methods: Individuals, diagnosed with IPF according to current criteria, were recruited to the PROFILE study, from new referrals to our unit. Baseline severity was assessed by FVC, DLco and 6 minute walk test. Participants completed Hospital Anxiety and Depression scale (HADs); MRC dyspnoea scale; St Georges Respiratory questionnaire (SGRQ (original)) and A Tool to Assess Quality of Life in Idiopathic Pulmonary Fibrosis (ATAQ-IPF (V2)). Results: 128 patients completed baseline questionnaires (82% males); mean age 68 (± 8.5) years and 50 patients completed questionnaires at 6 months. ATAQ scores correlate well with severity of disease and total SGRQ ($r^2$ 0.977) at baseline and at 6 months ($r^2$ 0.761). The individual well-being domain of the ATAQ correlates well with the anxiety ($r^2$ 0.552) and depression ($r^2$ 0.370) components of the HADS. The modified MRC score correlates well with FVC ($r^2$0.414) and CPI ($r^2$0.5103) but less strongly with total SGRQ scores ($r^2$0.330) and ATAQ ($r^2$0.330) at baseline. Discussion: There is still much to learn about the reliability and validity of instrument measures used IPF populations. This exploratory data suggests that the ATAQ-IPF is a reliable measure of HRQoL in an IPF cohort. However, further longitudinal evaluation needed to determine its sensitivity to change and determine how IPF patients adapt to their disease process over time.