Get a **GRIP** when prescribing antibiotics to protect them for the future

**Guidelines**
Always check antibiotic route, choice, dose, frequency and duration to ensure your patient gets the most effective treatment. This may be ‘no antibiotics’ for self-limiting conditions.

**Review**
Ensure the patient and their prescription for IV antibiotics is reviewed within 24–72 hours and a management plan is documented in the notes so everyone knows what is happening.

**IVOST**
Consider IV to oral switch every day to reduce hospital length of stay, reduce risk from IV devices and reduce staff time delivering IV antibiotics. When switching to oral include days of IV therapy in the overall duration of antibiotics.

**Personalise**
Individualise patient care through de-escalation, discontinuation and referral to OPAT by reviewing microbiology results as soon as they are available.