Burkholderia cepacia complex (Bcc) species can contaminate medical devices and water-based products, resulting in outbreaks and infections. The Oregon Public Health Division investigated a cluster of 20 sinus culture positives for Bcc from two affiliated ENT clinics in Oregon, based on reporting by a laboratorian in a central laboratory.

**Objective**
- To identify the source of the Bcc outbreak and determine the risk factors associated with the Bcc outbreak.

**Methods**
- Epidemiologic investigation included review of microbiologic reports, medical device history, staff interviews, and cultures of external to the clinics.

**Results**

**Case definitions**
- Bcc was isolated from:
  - 19/20 (95%) patients (32% new vs 68% previous)
  - No infection preventionist is available on site or for consultation
  - All visits were for sinus surgeries
  - None had cystic fibrosis, sinonasal polyposis or an immunocompromising disorder

- Bcc was not isolated from:
  - None received antibiotic treatment directed at Bcc

**Characteristics of reported cluster**
- Median age was 54.5 years (IQR: 34.2-60.5; range: 10–72)
- 11 (55%) were male
- 1/5 had an immunocompromising disorder and was notified
- 2/5 had a prior ENT visit requiring endoscopy with or without L/P administration, and was notified
- First positive culture: 04/09/2018
- No infection preventionist is available on site or for consultation

**Background**
- Contaminated multidose L/P nasal spray with Bcc resulted in nosocomial transmission at these clinics.
- Contaminated multidose L/P nasal spray with Bcc resulted in nosocomial transmission at these clinics.

**Conclusions**
- There is a need to broaden injection safety training to “medication administration safety” training as One & Only Campaign could have prevented this incident.

**References**

**Financial disclosures**
This manuscript was supported by the Oregon Public Health Division's Advocacy for Infectious Diseases Epidemiology Program (ACID EP) from the Centers for Disease Control and Prevention.