

Cases of ehrlichiosis have been rapidly increasing in the United States. While serological testing has historically been the mainstay of laboratory diagnosis, this approach is fraught with pitfalls. Detection of *Ehrlichia* DNA via PCR has become more widely available, but often only through commercial laboratories. Therefore, we sought to (i) assess diagnostic testing practices, (ii) quantify the proportion of samples eligible for PCR testing, and (iii) estimate the potential impact of implementing PCR at an academic center in a high-incidence area. Overall, we found that the vast majority of patients did not undergo PCR testing, even as rates of serodiagnostic algorithm completion (i.e., testing of acute and convalescent samples) were low (18.4%). These findings show that there is a need to educate providers on the availability and the advantage of PCR testing. Furthermore, the relatively low proportion of individuals with fever supports recent changes to the clinical criteria used for surveillance.