

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ALLERGY & IMMUNOLOGY

TANUS TONNY,

Group Affiliation: KERN ALLERGY MEDICAL CLINIC INC

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1921 18TH ST , BAKERSFIELD CA 93301	661-327-9693	661-327-0749
OFFICE 1	1429 MAIN ST , DELANO CA 93215	661-721-8832	

BOREN ERIC, J

Group Affiliation: KERN ALLERGY MEDICAL CLINIC INC

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	1921 18TH ST , BAKERSFIELD CA 93301	661-327-9693	661-327-0749
OFFICE 1	1429 MAIN ST , DELANO CA 93215	661-721-8832	

ANESTHESIOLOGY - PAIN MANAGEMENT

WILSON CHRISTOPHER, E

Group Affiliation: PAIN INSTITUTE OF CALIFORNIA, INC.

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	9802 STOCKDALE HWY STE 105, BAKERSFIELD CA 93311	661-665-7880	661-665-7811

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KHOURY PHILIP, G

Group Affiliation: PHILIP G. KHOURY, D.O., INC.

Language(s) SPANISH
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	3850 RIVERLAKES DRIVE STE B, BAKERSFIELD CA 93312	661-241-9338	661-402-3540

AUDIOLOGY

ANDERSEN DOUGLAS, E

Group Affiliation: DOUGLAS E. ANDERSEN

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1801 21ST ST , BAKERSFIELD CA 93301	661-324-2113	661-324-2891

WARNER WENDY, P

Group Affiliation: SATISH R. VADAPALLI, MD, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	8307 BRIMHALL RD STE 1706, BAKERSFIELD CA 93312	661-414-0270	661-362-0228

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CARD - CARDIOVASCULAR DISEASE

CHAUDHRY MUHAMMAD, A

Group Affiliation: ATUL AGGARWAL MD CARDIOLOGY CLINIC

Language(s) SPANISH, PUNJAB
PUNJABI
HINDI
URDU

Office #	Street:	Phone:	Fax:
OFFICE 1	1018 CALLOWAY DR , BAKERSFIELD CA 93312	661-664-0100	661-664-0111

BANERJEE SUPRATIM,

Group Affiliation: COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.

Language(s) SPANISH, CHINESE
BENGALI
HINDI
GUJARATI

Office #	Street:	Phone:	Fax:
OFFICE 1	432 LEXINGTON ST BLDG B, DELANO CA 93215	661-725-7818	661-725-3484

BANERJEE SUPRATIM,

Group Affiliation: COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.

Language(s) SPANISH, CHINESE
BENGALI
HINDI
GUJARATI

Office #	Street:	Phone:	Fax:
OFFICE 1	5945 TRUXTUN AVE , BAKERSFIELD CA 93309	661-631-5544	661-631-5546
OFFICE 1	432 LEXINGTON ST BLDG B, DELANO CA 93215	661-725-7818	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

THAYAPRAN NALLATHAMBY,

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s) **SPANISH**
TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	5945 TRUXTUN AVE , BAKERSFIELD CA 93309	661-323-4278	661-631-5546

BHAMBI BRIJESH, K

Group Affiliation: **CENTRIC HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2901 SILLECT AVE STE 100, BAKERSFIELD CA 93308	661-323-8384	661-323-9326
OFFICE 1	20211 W VALLEY BLVD , TEHACHAPI CA 93561	800-432-7824	

SINGH SARABJIT, K

Group Affiliation: **KERN CARDIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH, CHINESE**
PUNJABI
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	4000 PHYSICIANS BLVD STE E101, BAKERSFIELD CA 93301	661-327-0807	661-327-7593

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KHAN NASSER, U

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
	SPANISH	OFFICE 1	5945 TRUXTUN AVE , BAKERSFIELD CA 93309	661-631-5544	661-631-5546
	HINDI / PUNJABI				
	URDU				

SANDHU RASHAM, DS

Group Affiliation: **CALIFORNIA CARDIOVASCULAR INSTITUTE**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
	PUNJABI	OFFICE 1	8307 BRIMHALL RD STE 1702, BAKERSFIELD CA 93312	661-443-0088	661-443-0087

SALVO JARED, M

Group Affiliation: **JARED SALVO, D.O., A PROFESSIONAL CORPORATION**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
	SPANISH	OFFICE 1	500 OLD RIVER RD STE 260, BAKERSFIELD CA 93311	661-843-6464	611-282-8417

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HABIB MOKSEDUL,

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s)

BENGALI

Office #

OFFICE 1

Street:

5945 TRUXTUN AVE , BAKERSFIELD CA 93309

Phone:

661-631-5544

Fax:

661-631-5546

PUGA LEOPOLDO,

Group Affiliation: **CALIFORNIA CARDIOVASCULAR INSTITUTE**

Language(s) **SPANISH**

Office #

OFFICE 1

Street:

8307 BRIMHALL RD STE 1702, BAKERSFIELD CA 93312

Phone:

661-327-7842

Fax:

661-327-4757

AGGARWAL ATUL,

Group Affiliation: **ATUL AGGARWAL MD CARDIOLOGY CLINIC**

Language(s) **SPANISH**

Office #

OFFICE 1

Street:

1018 CALLOWAY DR , BAKERSFIELD CA 93312

Phone:

661-664-0100

Fax:

661-664-0111

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GONZALEZ ARMANDO,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B201, BAKERSFIELD CA
93301

661-321-3161

661-321-3166

NALOS PETER, C

Group Affiliation: **PETER NALOS, M.D.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD CA
93308

661-323-8384

661-323-9326

NAJJAR EMAD, S

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

5945 TRUXTUN AVE , BAKERSFIELD CA 93309

661-323-4278

661-631-5546

OFFICE 1

432-B LEXINGTON AVE , DELANO CA 93215

661-323-4278

OFFICE 3

20041 W VALLEY BLVD , TEHACHAPI CA 93561

661-323-4278

661-631-5546

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

NAIR SHYAM, K

Group Affiliation: **WESTERN CARDIOLOGY MEDICAL CLINIC, INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

2007 17TH ST , BAKERSFIELD CA 93301

661-633-1983

661-633-1101

DESAI KIRIT, R

Group Affiliation: **CENTRIC HEALTH**

Language(s) **SPANISH**

Office #

Street:

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Fax:

SINHALESE

OFFICE 1

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93308

661-323-8384

661-323-9326

SPANISH

OFFICE 1

3402 MT PINOS WAY , FRAZIER PARK CA 93225

661-716-4754

KYAW HTOO,

Group Affiliation: **ATUL AGGARWAL MD CARDIOLOGY CLINIC**

Language(s) **SPANISH, HINDI, P**

Office #

Street:

Phone:

Fax:

BURMESE

OFFICE 1

1018 CALLOWAY DR , BAKERSFIELD CA 93312

661-664-0100

661-664-0111

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GHANDFOROUSH ASLAN, G

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s)

Office #

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Phone:

Fax:

OFFICE 1

5945 TRUXTUN AVE , BAKERSFIELD CA 93309

661-631-5544

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MEHTA VIRAL, Y

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #

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Phone:

Fax:

HINDI

OFFICE 1

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661-631-5546

GUJARATI

OFFICE 1

432 LEXINGTON ST BLDG B, DELANO CA 93215

661-725-7818

SPANISH

LEE TOMMY, C

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

CANTONESE

OFFICE 1

3838 SAN DIMAS ST STE B201, BAKERSFIELD CA
93301

661-321-3161

661-321-3166

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KHAN NASSER, U

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

20041 W VALLEY BLVD UNIT 4, TEHACHAPI CA
93561

661-823-8604

661-823-7638

CARD - CLINICAL CARDIAC ELECTROPHYSIOLOGY

SINGH GURJIT,

Group Affiliation: **CALIFORNIA CARDIOVASCULAR INSTITUTE**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

PUNJABI

OFFICE 1

8307 BRIMHALL RD STE 1702, BAKERSFIELD CA
93312

661-443-0088

661-443-0087

CARD - INTERVENTIONAL CARDIOLOGY

HINDI

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

THOMPSON CALEB, D

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B201, BAKERSFIELD CA 93301

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BAKSH MUHAMMAD, U

Group Affiliation: **COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #

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Phone:

Fax:

URDU, HINDI

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661-631-5546

PUNJABI

OFFICE 1

432-B LEXINGTON AVE , DELANO CA 93215

661-323-4278

SPANISH

OFFICE 3

20041 W VALLEY BLVD UNIT #4, TEHACHAPI CA 93561

661-323-4278

661-631-5546

CHIROPRACTIC MEDICINE

MORRIS JON , R

Group Affiliation: **JON MORRIS CHIROPRACTIC A PROFESSIONAL CORPORATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2100 19TH ST STE C, BAKERSFIELD CA 93301

661-246-4026

661-246-4020

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SPARKS KEITH, L

Group Affiliation: **KEITH L SPARKS**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

8501 CAMINO MEDIA STE 200, BAKERSFIELD CA
93311

661-665-1800

661-665-8858

SHROPSHIRE KRISTAL, D

Group Affiliation: **SHROPSHIRE CHIROPRACTIC, INC., A PROFESSIONAL MEDICAL CORPORATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2530 F ST STE 102, BAKERSFIELD CA 93301

661-864-7999

661-864-7997

HAMILTON CAROL, V

Group Affiliation: **CAROL V HAMILTON**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

1241 7TH ST , WASCO CA 93280

661-758-3001

661-758-4492

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

REYES JOSE, S

Group Affiliation: VANGUARD MEDICAL CORPORATION

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

565 KERN ST , SHAFTER CA 93263

661-459-1000

855-200-2829

HOFFMAN GRANT, D

Group Affiliation: GRANT D. HOFFMAN D.C.

Language(s) SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

2140 BRUNDAGE LN , BAKERSFIELD CA 93304

661-873-4742

661-873-4734

HERRERA RUDY, B

Group Affiliation: HERRERA INTEGRATED CHIROPRACTIC CORP., PC

Language(s) SPANISH

SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

3015 CALLOWAY DR STE D6, BAKERSFIELD CA
93312

661-634-9900

661-903-8888

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HEYART GREGORY, R

Group Affiliation: **GREG HEYART D.C**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

1001 TOWER WAY STE 130, BAKERSFIELD CA
93309

661-327-2622

661-327-0614

SALYERS STEVEN, C

Group Affiliation: **STEVEN SALYERS DC**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

1001 TOWER WAY STE 130, BAKERSFIELD CA
93309

661-327-7074

661-327-0614

BRAMLETT BOBBY, J

Group Affiliation: **BOBBY J BRAMLETT**

Language(s)

SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

6001 TRUXTUN AVE STE D400, BAKERSFIELD CA
93309

661-321-3466

661-323-8472

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FLORES DAVID, C

Group Affiliation: **DAVID C. FLORES, D.C.**

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	10412 MAIN ST , LAMONT CA 93241	661-845-1188	661-845-2448

GARCIA ALICIA, E

Group Affiliation: **VANGUARD MEDICAL CORPORATION**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	845 7TH ST , WASCO CA 93280	661-459-1000	855-200-2829
OFFICE 1	565 KERN ST , SHAFTER CA 93263	661-746-4937	

DERM - DERMATOLOGY

TREANOR SHANNA, L

Group Affiliation: **JEFFREY J. CROWLEY, M.D., INC.**

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5101 COMMERCE DR STE 101, BAKERSFIELD CA 93309	661-327-3756	661-327-2332

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

TANG NIKKI, DY

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	661-427-4587
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93311	661-322-2700	
OFFICE 3	8605 CAMINO MEDIA STE 300, BAKERSFIELD CA 93311	661-322-2700	661-427-4587

ABAZA SAM,

Group Affiliation: LA LASER CENTER, PC, A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	661-427-4585
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	
OFFICE 3	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9078
OFFICE 4	1200 N CHINA LAKE BLVD STE A, RIDGECREST CA 93555	760-446-9007	760-446-6900

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

RASKIN BERNARD,

Group Affiliation: ADVANCED DERMATOLOGY & COSMETIC LASER CARE, A MEDICAL CORPORATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4100 EMPIRE DR STE 120 & 140, BAKERSFIELD CA 93309	661-254-3686	661-254-5671
OFFICE 1	28212 KELLY JOHNSON PKWY #245, VALENCIA CA 91355	661-254-3686	

DRAYER JEFFREY, A

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	8605 CAMINO MEDIA STE 300, BAKERSFIELD CA 93311	661-322-2700	661-427-4585
OFFICE 1	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	

FERNANDEZ GEOVER,

Group Affiliation: RAVI PATEL, M.D., INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-633-3669

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MEHDI RAZA,

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	661-427-4587
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	
OFFICE 3	8605 CAMINO MEDIA STE 300, BAKERSFIELD CA 93311	661-322-2700	661-427-4587
OFFICE 4	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541

TOTORAITIS KRISTIN, E

Group Affiliation: JEFFREY J. CROWLEY, M.D., INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5101 COMMERCE DR STE 101, BAKERSFIELD CA 93309	661-327-3756	661-327-2332

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

TAHERI DANIEL, P

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**
FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	661-427-4585
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	
OFFICE 3	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9078
OFFICE 4	1200 N CHINA LAKE BLVD STE A, RIDGECREST CA 93555	760-446-9007	760-446-6900

WINKELMANN RICHARD, R

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	661-427-4587
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	
OFFICE 3	8605 CAMINO MEDIA STE 300, BAKERSFIELD CA 93311	661-322-2700	661-427-4587
OFFICE 4	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

AWADALLA FARAH, C

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**
GREEK

Office #	Street:	Phone:	Fax:
OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	661-427-4587
OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	
OFFICE 3	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9078
OFFICE 4	1200 N CHINA LAKE BLVD STE A, RIDGECREST CA 93555	760-446-9007	760-446-6900

CARDENAS ANA, A

Group Affiliation: ANA CARDENAS DERMATOLOGY, A PROFESSIONAL CORPORATION

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3400 CALLOWAY DR STE 200, BAKERSFIELD CA 93312	661-410-7546	661-410-7547

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CROWLEY JEFFREY, J

Group Affiliation: JEFFREY J. CROWLEY, M.D., INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5101 COMMERCE DR STE 101, BAKERSFIELD CA 93309	661-327-3756	661-327-2332

CABRAL ERIK, S

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	276 S MILL ST STE B & C, TEHACHAPI CA 93561	661-388-5240	661-266-8751
OFFICE 1	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	
OFFICE 3	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541

SHAPIRO STEVEN,

Group Affiliation: LA LASER CENTER, PC, CALIFORNIA PROFESSIONAL MEDICAL CORPORATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541
OFFICE 1	144 SOUTH L ST , TULARE CA 93274	661-322-2700	
OFFICE 3	2323 W CALDWELL AVE , VISALIA CA 93277	559-931-0800	559-931-0801

EM - EMERGENCY MEDICINE

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

AMMARI RAZAN,

Group Affiliation: **INFUSION AND CLINICAL SERVICES, INC.**

Language(s) **SPANISH**
HINDI
PUNJABI
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	901 OLIVE DRIVE , BAKERSFIELD CA 93308	661-215-7500	661-399-4224

FM - FAMILY MEDICINE

LOPEZ SARAH, J

Group Affiliation: **KERN VALLEY HEALTHCARE DISTRICT**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4300 BIRCH AVE , LAKE ISABELLA CA 93240	760-379-1791	760-379-1793

MED - ENDOCRINOLOGY DIABETES & METABOLISM

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SINGH ATAM, B

Group Affiliation: **CENTRIC HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	3008 SILLECT AVE STE 220, BAKERSFIELD CA 93308	661-748-1999	661-748-1815
OFFICE 1	4531 BUENA VISTA RD STE 140, BAKERSFIELD CA 93311	661-748-1999	

SHAH HARSHIT, R

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	9500 STOCKDALE HWY STE 201, BAKERSFIELD CA 93311	661-327-1431	661-321-3286

ETTINGER VICTOR,

Group Affiliation: **KERN VALLEY HEALTHCARE DISTRICT**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	4300 BIRCH AVE , LAKE ISABELLA CA 93240	760-379-1791	760-379-1793

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DUGGAL JASLEEN, K

Group Affiliation: **CENTRIC HEALTH**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3008 SILLECT AVE STE 220, BAKERSFIELD CA
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661-748-1999

661-748-1815

MED - GASTROENTEROLOGY

BHOGAL NEIL,

Group Affiliation: **RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

5959 TRUXTUN AVE , BAKERSFIELD CA 93309

661-324-1203

661-321-3271

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PERUMALSAMY KUMARAVEL, S

Group Affiliation: **GASTRO CARE INSTITUTE**

Language(s) **SPANISH**
TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	1331 W AVE J STE 202, LANCASTER CA 93534	661-529-7550	661-529-7560
OFFICE 1	900 HERITAGE BLVD BLDG B, RIDGECREST CA 93555	661-529-7550	
OFFICE 3	20211 VALLEY BLVD , TEHACHAPI CA 93561	661-529-7550	661-529-7560

KALHA ISHAAN, S

Group Affiliation: **RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD**

Language(s)
PUNJABI
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	5959 TRUXTUN AVE STE 200, BAKERSFIELD CA 93309	661-324-1203	661-716-6630
OFFICE 1	1519 GARCES HWY STE 3, DELANO CA 93215	661-324-1203	

KRISHAN RAJEEV,

Group Affiliation: **RAJEEV KRISHAN, M.D. A PROFESSIONAL CORPORATION**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	9900 STOCKDALE HWY STE 208, BAKERSFIELD CA 93311	661-735-3915	661-367-9533

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BHOGAL RABINDER, S

Group Affiliation: RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD

Language(s)

HINDI
SPANISH

Office #

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661-324-3195

TYAGI VIVAIAK,

Group Affiliation: GASTRO CARE INSTITUTE

Language(s)

SPANISH
PUNJABI

Office #

OFFICE 1

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43944 15TH ST W STE 201, LANCASTER CA 93534
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OFFICE 1

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OFFICE 3

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661-529-7550

661-529-7560

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MATUK ROBIN, A

Group Affiliation: **RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD**

Language(s) **SPANISH**

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BHAIKA HARPAL, S

Group Affiliation: **RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD**

Language(s) **SPANISH**
HINDI
PUNJABI

Office #	Street:	Phone:	Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CHOWDHURY TABASSUM, A

Group Affiliation: **RABINDER S. BHOGAL, MD, HARPAL S. BHAIKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD**

Language(s) **SPANISH, PUNJAB
HINDI
SPANISH**

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661-324-3195

MANU RAJEEV, R

Group Affiliation: **RAJEEV R. MANU M.D. INC**

Language(s) **SPANISH
INDIAN
SPANISH**

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OFFICE 1

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RAVI NANDAKUMAR, B

Group Affiliation: **NANDAKUMAR RAVI, M.D., A PROFESSIONAL CORPORATION**

Language(s) **SPANISH
KANNADA**

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93312**

Phone:
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Fax:
661-588-8749

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MED - HEMATOLOGY

PATEL RAVI,

Group Affiliation: RAVI PATEL, M.D., INC.

Language(s)

Office #

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Fax:

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661-322-2206

661-633-3669

CARTMELL ALAN, D

Group Affiliation: RAVI PATEL, M.D., INC.

Language(s)

Office #

Street:

Phone:

Fax:

SPANISH

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661-322-2206

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SHAMBAUGH SHAWN, C

Group Affiliation: RAVI PATEL, M.D., INC.

Language(s) SPANISH, HINDI, P

Office #

Street:

Phone:

Fax:

OFFICE 1

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KANAMORI DAVID, E

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s)

SPANISH

Office #

OFFICE 1

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CIAROLLA ANTHONY, A

Group Affiliation: **WESTERN PACIFIC HEMATOLOGY- ONCOLOGY MEDICAL GROUP, INC.**

Language(s)

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PATIL SADANAND,

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) SPANISH

Office #

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6501 TRUXTUN AVE , BAKERSFIELD CA 93309

Phone:

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

NGUYEN VINH-LINH, B

Group Affiliation: BLOOD AND CANCER THERAPEUTICS, A MEDICAL CORPORATION

Language(s) **SPANISH, VIETNA
VIETNAMESE
FRENCH**

Office # Street:

**OFFICE 1 4500 MORNING DR STE 105, BAKERSFIELD CA
93306**

Phone:

661-491-5060

Fax:

661-379-6363

SPANISH

MED - HIV/AIDS MEDICINE

REFUGIO OLIVER,

Group Affiliation: BARTZ-ALTADONNA COMMUNITY HEALTH CENTER

Language(s) **SPANISH**

Office # Street:

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MED - HOSPICE/PALLIATIVE CARE

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HUERTA GALINDO JUAN, C

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**
SPANISH
FRENCH

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PATEL RISHI,

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) **SPANISH**

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MED - INFECTIOUS DISEASE

SENINING RANDOLPH, C

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) **FILIPINO**

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FELIZARTA FRANCO, A

Group Affiliation: **FRANCO ANTONIO BALAMBAN FELIZARTA**

Language(s) **SPANISH**
TAGALOG
SPANISH

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OFFICE 1	3535 SAN DIMAS ST STE 24, BAKERSFIELD CA 93301	661-324-3128	661-324-1129

ROSHAN BAKHT,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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AMIN NAVINCHANDRA, M

Group Affiliation: **CENTRIC HEALTH**

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MU ANANDIT,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**
HINDI

Office #
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RAMAN SHANKAR,

Group Affiliation: **SHANKAR RAMAN INC**

Language(s)

Office #
OFFICE 1

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**8200 STOCKDALE HWY STE M10-173,
BAKERSFIELD CA 93311**

Phone:
661-436-1635

Fax:
661-864-1105

KITT SEE-RUERN, S

Group Affiliation: **KERN COUNTY MEDICAL CLINIC, INC.**

Language(s) **SPANISH**
THAI

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2323 16TH ST STE 108, BAKERSFIELD CA 93301

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Fax:
661-325-7425

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HEIDARI-FOROUSHANI ARASH,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

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3838 SAN DIMAS ST STE B231, BAKERSFIELD CA
93301

661-665-0505

661-864-2190

MED - INTERNAL MEDICINE

MEMON PARVEZ, R

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

URDU

OFFICE 1

3838 SAN DIMAS ST STE B111, BAKERSFIELD CA
93301

661-616-1030

661-616-1050

OFFICE 1

9500 STOCKDALE HWY STE 203, BAKERSFIELD CA
93311

661-587-8110

OFFICE 3

3838 SAN DIMAS ST STE A200, BAKERSFIELD CA
93301

661-327-8538

661-327-5432

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BANSAL RUCHI,

Group Affiliation: **PRIME PULMONARY & SLEEP MEDICINE CENTER, INC.**

Language(s) **SPANISH**
SPANISH
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	8305 BRIMHALL RD STE 1601, BAKERSFIELD CA 93312	661-695-6777	845-853-6738
OFFICE 1	1205 GARCES HWY STE 203, DELANO CA 93215	661-725-6910	

ARENAS FRANCIS,

Group Affiliation: **INFUSION AND CLINICAL SERVICES, INC.**

Language(s) **HINDI, PUNJABI, S**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5401 WHITE LANE , BAKERSFIELD CA 93309	661-396-7100	661-399-4224
OFFICE 1	5400 ALDRIN CT , BAKERSFIELD CA 93313	661-735-8867	

MED - MEDICAL ONCOLOGY

GAITANIS ALEXANDER,

Group Affiliation: **KOMAL DESAI, M.D., INC.**

Language(s)

Office #	Street:	Phone:	Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MED - NEPHROLOGY

SAXENA NISHKARSH,

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) SPANISH
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	661-588-9999	661-588-9041
OFFICE 1	432 LEXINGTON ST STE A, DELANO CA 93215	661-588-9999	
OFFICE 3	20041 VALLEY BLVD UNIT 3, TEHACHAPI CA 93561	661-558-9999	661-588-9041
OFFICE 4	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	661-588-9999	661-588-9041

GERARDINE SUPRIYA, S

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) SPANISH, HMONG
HINDI
TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	233 E CALDWELL ST , VISALIA CA 93277	559-228-6600	559-226-3709
OFFICE 1	900 DOUTY ST STE B, HANFORD CA 93230	559-228-6600	
OFFICE 3	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709

CHEN SHAN SHAN,

Group Affiliation: CLINICA SIERRA VISTA

Language(s)
BURMESE
CHINESE

Office #	Street:	Phone:	Fax:
OFFICE 1	625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301	833-678-2781	661-368-0618

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KHANNA APURV,

Group Affiliation: **KERN NEPHROLOGY MEDICAL GROUP**

Language(s) **SPANISH**
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	5030 OFFICE PARK DR , BAKERSFIELD CA 93309	661-323-2847	661-323-2261

DHAYALAN DHAYANITHI,

Group Affiliation: **THE NEPHROLOGY GROUP, INC**

Language(s) **SPANISH**
TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	233 CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	
OFFICE 3	900 N DOUTY ST STE B, HANFORD CA 90509	559-228-6600	559-226-3709

ALI SLAMAT,

Group Affiliation: **THE NEPHROLOGY GROUP, INC**

Language(s) **SPANISH**
PUNJABI

Office #	Street:	Phone:	Fax:
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OFFICE 1	432 LEXINGTON ST STE A, DELANO CA 93215	559-228-6600	
OFFICE 3	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	559-228-6600	559-226-3709

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MUBIN TARIQ,

Group Affiliation: **KERN NEPHROLOGY MEDICAL GROUP**

Language(s) **SPANISH**
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	5030 OFFICE PARK DR , BAKERSFIELD CA 93309	661-323-2847	661-323-2261
OFFICE 1	1980 CECIL AVE , DELANO CA 93215	661-323-2847	

RAM PANKAJ, P

Group Affiliation: **THE NEPHROLOGY GROUP, INC**

Language(s) **SPANISH, PUNJAB**

Office #	Street:	Phone:	Fax:
OFFICE 1	1313 HERNDON AVE STE 106, FRESNO CA 93720	559-228-6600	559-226-3709
OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	
OFFICE 3	800 N ST , SANGER CA 93657	559-228-6600	559-226-3709
OFFICE 4	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

DUMLAO MELODY, G

Group Affiliation: **KERN NEPHROLOGY MEDICAL GROUP**

Language(s)
TAGALOG
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	443 W MORTON AVE STE A, PORTERVILLE CA 93257	559-788-6207	559-788-6344
OFFICE 1	1980 CECIL AVE , DELANO CA 93215	559-788-6207	
OFFICE 3	833 N SEQUOIA AVE , LINDSAY CA 93247	559-788-6207	559-788-6344

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MOKRI PARHAM, A

Group Affiliation: **KERN NEPHROLOGY MEDICAL GROUP**

Language(s) **SPANISH**
FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	5030 OFFICE PARK DR , BAKERSFIELD CA 93309	661-323-2847	661-323-2261

PARIMOO NAKUL,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

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OFFICE 1	625 34TH ST , BAKERSFIELD CA 93301	833-678-2781	661-368-0618

CHAPAGAIN BIKASH,

Group Affiliation: **THE NEPHROLOGY GROUP, INC**

Language(s) **SPANISH**
HINDI
NEPALI

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SOURIAL MARYANNE,

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) SPANISH
ARABIC

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OFFICE 1	900 DOUTY ST STE B, HANFORD CA 93230	559-228-6600	

JOSHI SUDHIR, S

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s)
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	661-588-9999	661-588-9041
OFFICE 1	432 LEXINGTON ST STE A, DELANO CA 93215	661-588-9999	
OFFICE 3	20041 VALLEY BLVD UNIT 3, TEHACHAPI CA 93561	661-558-9999	661-588-9041
OFFICE 4	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	661-588-9999	661-588-9041

KATIBAH IBRAHIM,

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) SPANISH
ARABIC

Office #	Street:	Phone:	Fax:
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OFFICE 1	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	
OFFICE 3	900 DOUTY ST STE B, HANFORD CA 90278	559-228-6600	559-226-3709

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KAZMI HASHIM, R

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) SPANISH, PUNJAB

Office #	Street:	Phone:	Fax:
OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	661-588-9999	661-588-9041
OFFICE 1	1205 GARCES HWY STE 101, DELANO CA 93215	559-228-6600	
OFFICE 3	20041 VALLEY BLVD UNIT 3, TEHACHAPI CA 93561	559-228-6600	559-226-3709
OFFICE 4	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	661-588-9999	661-588-9041

BHARDWAJ RAHUL,

Group Affiliation: KERN NEPHROLOGY MEDICAL GROUP

Language(s) SPANISH
HINDI
BENGALI

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WIN YIN, L

Group Affiliation: CLINICA SIERRA VISTA

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KAMATH SONIA,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

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MED - PULMONARY DISEASE

RAUF KHALED,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s)

Office # Street:

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ASHRAF-ALIM MUHAMMAD,

Group Affiliation: **MUHAMMAD ASHRAF ALIM M.D., INC.**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
	HINDI	OFFICE 1	3008 SILLECT AVE STE 140, BAKERSFIELD CA	661-377-0091	661-377-1715
	PUNJABI		93308		
	SPANISH				

VAGHASIA PRAMIL, B

Group Affiliation: **PRIME PULMONARY & SLEEP MEDICINE CENTER, INC.**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
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	GUJARATI	OFFICE 1	1205 GARCES HWY STE 203, DELANO Ca 93215	661-725-6910	

CHANDRASEKHAR JAYARAMAN,

Group Affiliation: **J CHANDRASEKHAR, INC**

Language(s)	SPANISH	Office #	Street:	Phone:	Fax:
	HINDI	OFFICE 1	6001 TRUXTUN AVE STE 120A, BAKERSFIELD CA	661-327-1352	661-704-4238
	TAMIL		93309		

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SAINI GURSHARAN,

Group Affiliation: **SAN JOAQUIN VALLEY PULMONARY MEDICAL GROUP, INC.**

Language(s) **SPANISH**
HINDI
PUNJABI

Office #	Street:	Phone:	Fax:
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OFFICE 1	109 ADKISSON WAY , TAFT CA 93268	661-327-3747	

HANSA SAHAPHUN, N

Group Affiliation: **S. NICK HANSA, M.D., INC.**

Language(s)
THAI

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301	661-323-5300	661-323-5455

AHMED MUSHTAQ,

Group Affiliation: **SAN JOAQUIN VALLEY PULMONARY MEDICAL GROUP, INC.**

Language(s) **SPANISH**
PUNJABI
HINDI
SPANISH

Office #	Street:	Phone:	Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ALAM SYED, M

Group Affiliation: **SYED ALAM PULMONOLOGY, INC.**

Language(s)

URDU
SPANISH

Office #

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93309

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661-324-7306

GOYAL RAJAN,

Group Affiliation: **RAJAN GOYAL, M.D., INC.**

Language(s) SPANISH

HINDI
PUNJABI

BENGALI

Office #

OFFICE 1

Street:

5531 BUSINESS PARK S STE 201, BAKERSFIELD CA
93309

Phone:

661-324-7300

Fax:

661-324-7306

LAUGHLIN ROBERT, L

Group Affiliation: **ROBERT L. LAUGHLIN, M.D., INC.**

Language(s)

Office #

OFFICE 1

Street:

3838 SAN DIMAS ST STE A250, BAKERSFIELD CA
93301

Phone:

661-323-5300

Fax:

661-323-5455

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MED - RHEUMATOLOGY

KOVALOW-ST JOHN KAREN, A

Group Affiliation: RHEUMATOLOGY SERVICES MEDICAL GROUP

Language(s) SPANISH, CHINESE

Office # Street:

Phone:

Fax:

OFFICE 1 8329 BRIMHALL RD STE 801, BAKERSFIELD CA
93312

661-695-8385

661-679-6801

BHINDER SUMEET, K

Group Affiliation: SUMEET BHINDER M.D. INC

Language(s) SPANISH

Office # Street:

Phone:

Fax:

INDIAN

OFFICE 1 6001 TRUXTUN AVE STE A160, BAKERSFIELD CA
93309

661-588-4001

661-588-4042

PUNJABI

SPANISH

KIM JIM, C

Group Affiliation: JIM C. KIM, M.D., INC.

Language(s) SPANISH, CHINESE

Office # Street:

Phone:

Fax:

KOREAN

OFFICE 1 2203 17TH ST , BAKERSFIELD CA 93301

661-716-0333

661-716-1288

CHINESE

TAGALOG

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BACON JEFFREY, K

Group Affiliation: RHEUMATOLOGY SERVICES MEDICAL GROUP

Language(s) SPANISH, CHINESE
SPANISH

Office #
OFFICE 1

Street:
8329 BRIMHALL RD STE 801, BAKERSFIELD CA
93312

Phone:
661-695-8385

Fax:
661-679-6801

LI YI,

Group Affiliation: RHEUMATOLOGY SERVICES MEDICAL GROUP

Language(s) SPANISH
CHINESE

Office #
OFFICE 1

Street:
8329 BRIMHALL RD STE 801, BAKERSFIELD CA
93312

Phone:
661-695-8385

Fax:
661-679-6801

MED - SLEEP MEDICINE

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SANDHU AHANA,

Group Affiliation: **PRIME PULMONARY & SLEEP MEDICINE CENTER, INC.**

Language(s) **SPANISH**
PUNJABI
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	8305 BRIMHALL RD STE 1601, BAKERSFIELD CA 93312	661-516-2471	661-695-6767
OFFICE 1	1205 GARCES HWY STE 203, DELANO CA 93215	661-395-6777	

NATUROPATHY

GADDAM KALYAN,

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) **TELUGU**
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-633-3669

NEURO - NEUROLOGICAL SURGERY

ROSENTHAL PHILIP ,

Group Affiliation: **PHILIP ROSENTHAL MD PC**

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2323 16TH ST STE 407, BAKERSFIELD CA 93301	661-741-0924	661-741-0930

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

LERAMO OLUSEGUN, B

Group Affiliation: **MAJID RAHIMIFAR, M.D., INC.**

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 2601 OSWELL ST STE 101, BAKERSFIELD CA 93306 661-872-9999 661-872-9988

ABUMERI IMAD,

Group Affiliation: **IMAD ABUMERI, M.D., INC,**

Language(s) **TAGALOG**
LEBENESE

Office # Street:

Phone:

Fax:

OFFICE 1 2001 F ST , BAKERSFIELD CA 93301 661-404-4731 661-404-4732

RAHIMIFAR MAJID,

Group Affiliation: **MAJID RAHIMIFAR, M.D., INC.**

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 2601 OSWELL ST STE 101, BAKERSFIELD CA 93306 661-872-9999 661-872-9988

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SERXNER BENJAMIN, J

Group Affiliation: **BENJAMIN SERXNER, M.D., INC.**

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301

661-632-7126

661-324-3606

ECKERMANN JAN, M

Group Affiliation: **KERN NEUROSURGICAL INSTITUTE, INC.**

Language(s) **SPANISH**
GERMAN

Office # Street:

Phone:

Fax:

OFFICE 1 2323 16TH ST STE 407, BAKERSFIELD CA 93301

661-843-7800

661-843-7882

NEURO - NEUROLOGY

LIN JIAN, C

Group Affiliation: **KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.**

Language(s)

CANTONESE

Office # Street:

Phone:

Fax:

OFFICE 1 1705 28TH ST , BAKERSFIELD CA 93301

661-322-3008

661-322-5507

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

POPA THEODORE, O

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE 140, BAKERSFIELD CA
93301

661-632-7126

661-324-3606

THOMAS KIRON,

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE A140, BAKERSFIELD CA
93301

661-632-7126

661-324-3606

OFFICE 1

3838 SAN DIMAS ST STE A250, BAKERSFIELD CA
93301

661-324-0500

LABIB SAMEH, S

Group Affiliation: **KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.**

Language(s) **SPANISH, ARABIC**
ARABIC

Office #

Street:

Phone:

Fax:

OFFICE 1

1705 28TH ST , BAKERSFIELD CA 93301

661-322-3008

661-322-5507

OFFICE 1

1711 28TH ST STE A, BAKERSFIELD CA 93301

661-322-3008

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PEDOUIM FARZIN, B

Group Affiliation: **KERN VALLEY HEALTHCARE DISTRICT**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

4300 BIRCH AVE , LAKE ISABELLA CA 93240

760-379-1791

760-379-1793

KUNHI VEEDU HARI PRASAD,

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

Office #

Street:

Phone:

Fax:

MALAYALAM

OFFICE 1

3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301

661-632-7126

661-324-3606

OFFICE 1

2323 16TH ST STE 400, BAKERSFIELD CA 93301

661-324-0500

NATALI LUIS, C

Group Affiliation: **MAHEEP SINGH BIRDI, M.D.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

8311 BRIMHALL RD STE 1903, BAKERSFIELD CA 93312

661-432-7851

661-432-7852

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

JANAKIRAMAN VENKATESH,

Group Affiliation: JEY NEURO CENTER, INC

Language(s) **SPANISH**
TAMIL
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	3400 CALLOWAY DR STE 100, BAKERSFIELD CA 93312	661-776-3876	661-766-3876

WILLIAMS JERI, Y

Group Affiliation: JERI YVONNE MOVEMENT DISORDERS NEUROLOGY, INC

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	8327 BRIMHALL RD STE 703, BAKERSFIELD CA 93312	661-679-3590	661-695-6900

SAREMI KAVEH,

Group Affiliation: MAJID RAHIMIFAR, M.D., INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2601 OSWELL ST STE 101, BAKERSFIELD CA 93306	661-872-9999	661-872-9988

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DANDAMUDI VENKATA, S

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301	661-632-7126	661-324-3606
OFFICE 1	3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301	661-324-0500	

ALEXAN-SHIRABAD RICHARD,

Group Affiliation: **RICHARD ALEXAN, M.D., INC.**

Language(s) **SPANISH**
FRENCH
ARMENIAN

TURKISH

Office #	Street:	Phone:	Fax:
OFFICE 1	4900 COMMERCE DR STE A, BAKERSFIELD CA 93309	661-395-0900	661-395-0700

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GAJJAR ASHISH, A

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301	661-632-7126	661-324-3606
OFFICE 1	3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301	661-324-0500	

BIRDI MAHEEP, S

Group Affiliation: **MAHEEP SINGH BIRDI, M.D.**

Language(s) **SPANISH, TAGALO
PUNJABI
HINDI**

Office #	Street:	Phone:	Fax:
OFFICE 1	8307 BRIMHALL RD STE 1702, BAKERSFIELD CA 93312	661-432-7851	661-432-7852

ZHANG LING,

Group Affiliation: **KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.**

Language(s) **SPANISH, TAGALO
CANTONESE**

Office #	Street:	Phone:	Fax:
OFFICE 1	1705 28TH ST , BAKERSFIELD CA 93301	661-322-3008	661-322-5507
OFFICE 1	1711 28TH ST , BAKERSFIELD CA 93301	661-322-3008	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CHAHIL BOOTA, S

Group Affiliation: **BOOTA S CHAHIL**

Language(s)

HINDI

Office #

Street:

Phone:

Fax:

OFFICE 1 432 LEXINGTON ST STE C, DELANO CA 93215

559-625-0202

661-206-4081

OFFICE 1 117 N AKERS ST STE A, VISALIA CA 93291

559-625-0202

WANG YAWEN,

Group Affiliation: **KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1 1711 28TH ST , BAKERSFIELD CA 93301

661-322-3008

661-322-5507

OFFICE 1 1711 28TH ST STE A, BAKERSFIELD CA 93301

661-322-3008

ROSENGART AXEL,

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

GERMAN

Office #

Street:

Phone:

Fax:

OFFICE 1 3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301

661-632-7126

661-324-3606

OFFICE 1 3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301

661-324-0500

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

RAVI VINUTHA, N

Group Affiliation: JEY NEURO CENTER, INC

Language(s) SPANISH
TAGALOG
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	3400 CALLOWAY DR STE 100, BAKERSFIELD CA 93312	661-776-3876	661-766-3876

SABETIAN KATAYOUN,

Group Affiliation: KATAYOUN SABETIAN MD INC

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2323 16TH ST STE 206, BAKERSFIELD CA 93301	661-322-4601	661-322-6049

RAGOONANAN LAURA,

Group Affiliation: UNITED NEUROSCIENCE, INC

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A140, BAKERSFIELD CA 93301	661-632-7126	661-324-3606
OFFICE 1	3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301	661-324-0500	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

NEURO - NEUROLOGY/PEDIATRIC

DAVID RAYMUND, R

Group Affiliation: CHILD NEUROLOGY CENTER OF BAKERSFIELD INC.

Language(s) SPANISH, TAGALO
SPANISH
TAGALOG

Office #	Street:	Phone:	Fax:
OFFICE 1	5701 YOUNG STREET BLDG C-203, BAKERSFIELD CA 93311	661-885-7008	888-977-3751

NEURO - VASCULAR NEUROLOGY

HONARI SARA,

Group Affiliation: HAO D. BUI, M.D., INC

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4901 CENTENNIAL PLAZA WAY , BAKERSFIELD CA 93312	661-387-8333	661-241-4052
OFFICE 1	4825 COFFEE RD , BAKERSFIELD CA 93308	661-387-8333	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BUI HAO, D

Group Affiliation: HAO D. BUI, M.D., INC

Language(s)

VIETNAMESE

Office #

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Street:

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Phone:

661-387-8333

661-387-8333

Fax:

661-241-4052

NGUYEN TIEN, H

Group Affiliation: HAO D. BUI, M.D., INC

Language(s)

VIETNAMESE

Office #

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OFFICE 1

Street:

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4825 COFFEE RD , BAKERSFIELD CA 93308

Phone:

661-387-8333

661-387-8333

Fax:

661-241-4052

NUC - NUCLEAR MEDICINE

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GOULD-SIMON ARON, J

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

OB - GYNECOLOGIC ONCOLOGY

TAMMELA JONATHAN, E

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	500 OLD RIVER RD STE 200, BAKERSFIELD CA 93311	661-663-6429	661-663-6041

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MANRRIQUEZ ERICA, N

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s)

SPANISH

Office #

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Phone:

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Fax:

661-663-6041

OB - MATERNAL AND FETAL MEDICINE

SAMADI RAMIN,

Group Affiliation: **RAMIN SAMADI M.D., INC.**

Language(s) SPANISH

FARSI

Office #

OFFICE 1

Street:

2501 H ST STE B, BAKERSFIELD CA 93301

Phone:

661-259-5617

Fax:

661-259-9986

OB - OBSTETRICS & GYNECOLOGY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ALLEN EDWARD, C

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A200, BAKERSFIELD CA 93301	661-654-0200	661-326-1633

GHAI SONIA,

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301	833-678-2781	661-368-0618

MERVIN ADDIAS, C

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301	833-678-2781	661-368-0618

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GARCIA ANTONIO, L

Group Affiliation: **KERN WOMEN'S HEALTH GROUP, INC.**

Language(s) **SPANISH**
SPANISH

Office #
OFFICE 1

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**2700 F ST STE 300 2ND FLR, BAKERSFIELD CA
93301**

Phone:
661-322-4902

Fax:
661-322-4904

AYYAGARI RAMCHANDRA, R

Group Affiliation: **RAMCHANDRA AYYAGARI MD**

Language(s)
HINDI
SPANISH

Office #
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93301**

Phone:
661-323-3266

Fax:
661-323-8130

VARNES KENNETH, J

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #
OFFICE 1

Street:
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93301**

Phone:
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Fax:
661-368-0618

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MCDERMOTT ROXANNE, M

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**
SPANISH

Office # **OFFICE 1** Street: **625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301**

Phone: **833-678-2781**

Fax: **661-368-0618**

LASCANO MIGUEL, L

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**
TAGALOG

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OFFICE 1 2300 7TH ST , WASCO CA 93280

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661-758-4184

Fax: **661-721-0738**

ANUCHA CHIBUIKE, E

Group Affiliation: **CHIBUIKE ENYEREIBE ANUCHA MD, PC.**

Language(s) **SPANISH**
IGBO

Office # **OFFICE 1** Street: **3941 SAN DIMAS ST STE 104, BAKERSFIELD CA 93301**

Phone: **661-637-1006**

Fax: **661-637-1020**

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MANGAT CHARNPAL, S

Group Affiliation: **CHARNPAL MANGAT, M.D. INC**

Language(s) **SPANISH**
PUNJABI
HINDI

Office # **OFFICE 1** Street: **2700 F ST STE 300 2ND FLR, BAKERSFIELD CA 93301**

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Fax: **661-322-4904**

YU HANS, C

Group Affiliation: **HANS C. YU, DO**

Language(s) **SPANISH**
MADARIN
TAIWANESE
SPANISH

Office # **OFFICE 1** Street: **9730 BRIMHALL RD STE 1, BAKERSFIELD CA 93312**

Phone: **661-663-0818**

Fax: **661-663-0516**

DENNIS-JOHNSON DEBBIE, A

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**
SPANISH
FRENCH
HINDI

Office # **OFFICE 1** Street: **1201 JEFFERSON ST, DELANO CA 93215**
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661-758-4184

Fax: **661-721-0738**

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MANGAT RAMNEET, K

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **HINDI, PUNJABI**
SPANISH

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MELENDEZ PHILIPP, R

Group Affiliation: **PHILIPP RAMON MELENDEZ, MD**

Language(s) **SPANISH**
SPANISH

Office #
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661-325-7103

Fax:
661-325-7132

BALDONADO JESUS, P

Group Affiliation: **NORTH KERN-SOUTH TULARE HOSPITAL DISTRICT**

Language(s) **SPANISH**

Office #
OFFICE 1

Street:
1500 6TH AVE , DELANO CA 93215

Phone:
661-725-1010

Fax:
661-725-1117

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DELMUNDO NOEL, G

Group Affiliation: **GREGORY R KLIS MD INC**

Language(s) **SPANISH**
SPANISH
TAGALOG

Office #	Street:	Phone:	Fax:
OFFICE 1	8339 BRIMHALL RD STE 1303, BAKERSFIELD CA 93312	661-829-0026	661-829-0027

SRINIVAS VASANTHI,

Group Affiliation: **KERN WOMEN'S HEALTH GROUP, INC.**

Language(s) **SPANISH**
HINDI
TAMIL
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2005 17TH ST , BAKERSFIELD CA 93301	661-322-6700	661-322-6707

HASHEMI EMAD, A

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301	833-678-2781	661-368-0618

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DATTA BABITA,

Group Affiliation: INFUSION AND CLINICAL SERVICES, INC.

Language(s) **SPANISH**
SPANISH
HINDI
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	5401 WHITE LANE , BAKERSFIELD CA 93309	661-396-7100	661-399-4224

DATTA TOCK,

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s) **SPANISH**
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	1201 JEFFERSON ST , DELANO CA 93215	661-721-0737	661-721-0738
OFFICE 1	2300 7TH ST , WASCO CA 93280	661-758-4184	

SHARMA RAHUL,

Group Affiliation: RAHUL SHARMA MD., INC.

Language(s) **SPANISH**
HINDI
PUNJABI
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	323 LEXINGTON ST , DELANO CA 93215	661-725-2512	661-725-2586
OFFICE 1	1217 7TH ST , WASCO CA 93280	661-758-5500	
OFFICE 3	432 LEXINGTON ST , DELANO CA 93215	661-725-2512	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ROBINSON RHONDA, L

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

425 DEL SOL PKWY , DELANO CA 93215

661-720-4011

661-720-4012

PEREZ LEONARD,

Group Affiliation: **KERN WOMEN'S HEALTH GROUP, INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

2005 17TH ST , BAKERSFIELD CA 93301

661-322-6700

661-322-6707

PEREZ LEONARD,

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

1201 JEFFERSON ST , DELANO CA 93215

661-721-0737

661-721-0738

OFFICE 1

2300 7TH ST , WASCO CA 93280

661-758-4184

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SHARMA RAHUL,

Group Affiliation: RAHUL SHARMA MD., INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	9610 STOCKDALE HWY STE B, BAKERSFIELD CA 93311	661-664-0314	661-664-0997
HINDI	OFFICE 1	1217 7TH ST , WASCO CA 93280	661-758-5500	
PUNJABI	OFFICE 3	432 LEXINGTON ST , DELANO CA 93215	661-725-2512	
SPANISH				

IQBAL SAYEED,

Group Affiliation: BARTZ-ALTADONNA COMMUNITY HEALTH CENTER

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	9300 N LOOP BLVD STE C, CALIFORNIA CITY CA 93505	661-874-4050	866-572-7851

SRINIVAS VASANTHI,

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1201 JEFFERSON ST , DELANO CA 93215	661-721-0737	661-721-0738
HINDI	OFFICE 1	2300 7TH ST , WASCO CA 93280	661-758-4184	
TAMIL				
SPANISH				

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KLIS GREGORY, R

Group Affiliation: **GREGORY R KLIS MD INC**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	8339 BRIMHALL RD STE 1303, BAKERSFIELD CA 93312	661-829-0026	661-829-0027

SHAKESPEARE CARY, S

Group Affiliation: **GOOD SAMARITAN HOSPITAL, A CALIFORNIA LIMITED PARTNERSHIP**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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OWENS JOHN, R

Group Affiliation: **JOHN R OWENS MD**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	4000 PHYSICIANS BLVD STE E211, BAKERSFIELD CA 93301	661-401-2000	661-401-2015

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

STEWART DEBRA, L

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #

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OFFICE 1

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833-678-2781

661-368-0618

DATTA BABITA,

Group Affiliation: **GOOD SAMARITAN HOSPITAL, A CALIFORNIA LIMITED PARTNERSHIP**

Language(s) **SPANISH**

Office #

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Fax:

SPANISH

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661-758-5500

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HINDI

PUNJABI

KOCSIS TAMAS, S

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**

Office #

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Fax:

HUNGARIAN

OFFICE 1

8787 HALL RD , LAMONT CA 93241

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SPANISH

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SANYA RAHIMA, H

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s) **SPANISH**
SWAHILI

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SCHLAERTH JOHN, B

Group Affiliation: **PACIFIC GYNECOLOGIC SPECIALISTS**

Language(s)

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HALL LYNOUS, W

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	625 34TH ST STE 100 & 200, BAKERSFIELD CA 93301	833-678-2781	661-368-0618
OFFICE 1	425 DEL SOL PKWY , DELANO CA 93215	661-720-4011	

OB - REPRODUCTIVE ENDOCRINOLOGY/INFERTILITY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

AYYAGARI RAMCHANDRA, R

Group Affiliation: **RAMCHANDRA AYYAGARI MD**

Language(s)

HINDI
SPANISH

Office #

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OB - UROGYNECOLOGY

LEE JUSTIN, T

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s)

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Phone:

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661-663-6041

ORTHO - ORTHOPAEDIC SURGERY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SCHAMBLIN MARK, L

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

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HAMILTON CHRISTOPHER, D

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573

MERRIMAN JARRAD,

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BALCH KARL, R

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573

MALERICH MATTHEW, M

Group Affiliation: **MATTHEW M. MALERICH, M.D., INCORPORATED**

Language(s) **SPANISH**

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FERKEL ERIC, I

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

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OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573
OFFICE 1	6815 NOBLE AVE , VAN NUYS CA 91405	818-901-6600	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

UNAL BERKAY,

Group Affiliation: **BERKAY UNAL MD PC**

Language(s) **SPANISH, TURKIS
TURKISH**

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WAHBA GEORGE, M

Group Affiliation: **GEORGE M. WAHBA, M.D., INC.**

Language(s) **SPANISH
ARABIC**

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COPPOLA ALFRED, J

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s) **SPANISH**

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Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SRIVASTAVA PRAMOD, K

Group Affiliation: **PRAMOD K. SRIVASTAVA**

Language(s) **SPANISH, TAGALO
HINDI**

Office #	Street:	Phone:	Fax:
OFFICE 1	432 LEXINGTON ST STE C, DELANO CA 93215	661-725-0713	661-721-2629
OFFICE 1	110 N D ST , PORTERVILLE CA 93257	559-782-5177	

WAHBA GEORGE, M

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s) **SPANISH
ARABIC**

Office #	Street:	Phone:	Fax:
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SHAPIRO TODD,

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SRIVASTAVA PRAMOD, K

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	590 W PUTNAM AVE , PORTERVILLE CA 93257	559-781-3700	559-781-4131

GUANCHE CARLOS, A

Group Affiliation: REGENTS OF THE UNIVERSITY OF CALIFORNIA

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573
OFFICE 1	6815 NOBLE AVE , VAN NUYS CA 91405	818-901-6600	

HERNANDEZ JAIME, D

Group Affiliation: REGENTS OF THE UNIVERSITY OF CALIFORNIA

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
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OFFICE 1	6815 NOBLE AVE , VAN NUYS CA 91405	818-901-6600	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

JAIN NICKUL, S

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**
HINDI
SPANISH

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SCHOPLER STEVEN, A

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Language(s) **SPANISH**

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SAIED FADI, S

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s) **SPANISH**

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OFFICE 1	5201 TRUXTUN AVE , BAKERSFIELD CA 93309	661-328-5565	661-328-5573

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

COPPOLA ALFRED, J

Group Affiliation: **ALFRED J. COPPOLA, JR. M.D., INC.**

Language(s) **SPANISH**

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SRIVASTAVA KARAN,

Group Affiliation: **KARAN SRIVASTAVA**

Language(s) **SPANISH, TAGALO**
SPANISH
HINDI

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OFFICE 1	3008 SILLECT AVE STE 120, BAKERSFIELD CA 93308	661-544-3352	
OFFICE 3	432 LEXINGTON ST STE C, DELANO CA 93215	661-544-3352	661-544-3432
OFFICE 4	110 N D ST , PORTERVILLE CA 93257	661-544-3352	661-725-5030

OLUYEDE OLUWADAMILOLA,

Group Affiliation: **REGENTS OF THE UNIVERSITY OF CALIFORNIA**

Language(s)

Office #	Street:	Phone:	Fax:
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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

OTO - OTOLARYNGOLOGY HEAD AND NECK SURGERY

SHETE MONA,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

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661-864-2190

ZERLIN GARY, K

Group Affiliation: **GARY K ZERLIN MD**

Language(s)

Office #

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Phone:

Fax:

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2103 18TH ST , BAKERSFIELD CA 93301

661-327-3449

661-327-4549

VADAPALLI SATISH, R

Group Affiliation: **SATISH R. VADAPALLI, MD, INC.**

Language(s) **SPANISH**

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Street:

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Fax:

OFFICE 1

8307 BRIMHALL RD STE 1706, BAKERSFIELD CA
93312

661-855-7447

661-215-1891

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ARYA SATYA, P

Group Affiliation: SATYA PAL ARYA, M.D.

Language(s) **SPANISH**
SPANISH
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	2011 TRUXTUN AVE , BAKERSFIELD CA 93301	661-327-0300	661-327-0897

PED - CARDIOLOGY

BANKS AARON, E

Group Affiliation: PEDIATRIC HEART CENTER, INC.

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	500 OLD RIVER RD STE 105, BAKERSFIELD CA 93311	661-664-0808	800-691-2492

PED - ENDOCRINOLOGY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CHING JOHN, S

Group Affiliation: **PEDIATRIC ENDOCRINOLOGY & DIABETES CONSULTANTS, INC.**

Language(s) **SPANISH**
SPANISH
CHINESE

Office #	Street:	Phone:	Fax:
OFFICE 1	6001 TRUXTUN AVE STE A130, BAKERSFIELD CA 93309	661-836-7799	661-840-5934

PED - GASTROENTEROLOGY

AMENT MARVIN, E

Group Affiliation: **SPECIALTY MEDICAL GROUP CENTRAL CALIFORNIA INC**

Language(s) **SPANISH**

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PED - NEONATAL/PERINATAL MEDICINE

BHOGAL MADHU, R

Group Affiliation: **BHOGAL MEDICAL CORPORATION**

Language(s)
HINDI
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	420 34TH ST , BAKERSFIELD CA 93301	661-541-0739	661-325-0614

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PED - PEDIATRICS

YOUNG MATT, N

Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)

Office #

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420 34TH ST , BAKERSFIELD CA 93301

661-633-2876

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PHYS MED - PAIN MEDICINE

ROSHAN DANIEL,

Group Affiliation: HULLANDER AND MOZINGO LP

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93308

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805-563-0364

BRAZILL JOHN, L

Group Affiliation: KEVIN D. TRINH, M.D. AND JOHN L. BRAZILL, M.D. A MEDICAL CORPORATION

Language(s) SPANISH

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661-395-1335

661-395-1322

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PALENCIA ARTURO, E

Group Affiliation: PAIN INSTITUTE OF CALIFORNIA, INC.

Language(s) SPANISH
SPANISH

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PARMAR ASHOK, M

Group Affiliation: UNIVERSAL HEALTHCARE SERVICES, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	8303 BRIMHALL RD BLDG 1500, BAKERSFIELD CA 93312	661-587-2468	661-587-6401
OFFICE 1	8325 BRIMHALL RD STE 101, BAKERSFIELD CA 93312	661-587-6992	
OFFICE 3	3550 Q ST STE 201 & 202, BAKERSFIELD CA 93301	661-558-1620	661-558-1621

HULLANDER ROBERT, M

Group Affiliation: HULLANDER AND MOZINGO LP

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KUCHAKULLA RAGHUNATH, R

Group Affiliation: **UNIVERSAL HEALTHCARE SERVICES, INC.**

Language(s) **SPANISH**

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PIRES DAVID, C

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MUNGALPARA VINOD, N

Group Affiliation: **UNIVERSAL HEALTHCARE SERVICES, INC.**

Language(s) **SPANISH**

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MOZINGO RALPH, D

Group Affiliation: **HULLANDER AND MOZINGO LP**

Language(s)

Office #

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PHYS MED - PHYSICAL MEDICINE AND REHABILITATION

ANDERSON BRADFORD, A

Group Affiliation: **BRADFORD ANDERSON, MD, INC., A PROFESSIONAL CORPORATION**

Language(s) **SPANISH**

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Fax:

SPANISH

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661-616-5726

661-873-4664

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

YOON CHRIS, S

Group Affiliation: CHRIS YOON, M.D., INC.

Language(s)

SPANISH

KOREAN

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LIMJOCO BETTINA, T

Group Affiliation: MAJID RAHIMIFAR, M.D., INC.

Language(s) SPANISH

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YOO JAY, H

Group Affiliation: MUSKOGEE REHABILITATION CLINIC, INC

Language(s) SPANISH

KOREAN

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Fax:

661-336-0200

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DIMMITT EVAN, T

Group Affiliation: **EVAN DIMMITT**

Language(s)

Office #

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CULL DEEPHI,

Group Affiliation: **DEEPHI CULL MD PC**

Language(s)

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Group Affiliation: **LANGLOIS MEDICAL CORPORATION**

Language(s) **SPANISH**

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93309

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661-473-1539

PODIATRIC MEDICINE

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KIM PAUL, M

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) **SPANISH**
KOREAN

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KIM SOLOMON,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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HUBER KYLE,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) **SPANISH**

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OFFICE 1	8307 BRIMHALL RD STE 1704, BAKERSFIELD CA 93312	661-832-1667	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HENTO HEATHER, A

Group Affiliation: **FOOT & ANKLE INSTITUTE**

Language(s) **SPANISH**

Office #

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Fax:

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661-663-3095

LIN TZU LU,

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Language(s) **SPANISH**

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MANDARIN

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JEX CRAIG, T

Group Affiliation: **FOOT & ANKLE INSTITUTE**

Language(s) **SPANISH**

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Fax:

DUTCH

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661-663-3095

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CHUANG SOHRABI CATHY, T

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) SPANISH
CHINESE

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PASABOC LIVIU, G

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	1519 GARCES HWY STE 107, DELANO CA 93215	661-725-1664	
OFFICE 3	8307 BRIMHALL RD STE 1704, BAKERSFIELD CA 93312	661-832-1667	661-832-7145

ZIMMERMAN JOHN, C

Group Affiliation: FOOT & ANKLE INSTITUTE

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	9300 STOCKDALE HWY STE 400, BAKERSFIELD CA 93311	661-663-8483	661-663-3095

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DAVIS SCOTT, R

Group Affiliation: **FOOT & ANKLE INSTITUTE**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	9300 STOCKDALE HWY STE 400, BAKERSFIELD CA 93311	661-663-8483	661-663-3095

SPANISH

FLORES MICHAEL, A

Group Affiliation: **STOCKDALE PODIATRY GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	1519 GARCES HWY STE 107, DELANO CA 93215	661-725-1664	
OFFICE 3	8307 BRIMHALL RD STE 1704, BAKERSFIELD CA 93312	661-832-1667	661-832-7145

SHIEH MARSHALL, J

Group Affiliation: **HAO D. BUI, M.D., INC**

Language(s) **SPANISH, VIETNA**

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OFFICE 1	4825 COFFEE RD , BAKERSFIELD CA 93308	661-387-8333	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SPOHN-GROSS HOLLY, A

Group Affiliation: **HOLLY A.SPOHN-GROSS, DPM**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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SPOHN-GROSS HOLLY, A

Group Affiliation: **KERN VALLEY HEALTHCARE DISTRICT**

Language(s)

Office #	Street:	Phone:	Fax:
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NELSON THOMAS, D

Group Affiliation: **STOCKDALE PODIATRY GROUP, INC.**

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1701 27TH ST , BAKERSFIELD CA 93301	661-322-2895	661-322-2897
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	
OFFICE 3	1519 GARCES HWY STE 107, DELANO CA 93215	661-725-1664	661-725-2786
OFFICE 4	8307 BRIMHALL RD STE 1704, BAKERSFIELD CA 93312	661-832-1667	661-832-7145

PSY - CHILD & ADOLESCENT PSYCHIATRY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MA ALBERT, Y

Group Affiliation: **ARISE PSYCHIATRIC MEDICAL GROUP INC.**

Language(s) **SPANISH**
MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD CA 93311	661-735-3887	661-836-5545

LUI KINGWAI,

Group Affiliation: **ARISE PSYCHIATRIC MEDICAL GROUP INC.**

Language(s) **SPANISH**
CANTONESE

Office #	Street:	Phone:	Fax:
OFFICE 1	1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD CA 93311	661-735-3887	661-836-5545

PSY - PSYCHIATRY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SONG SEO FRANCO,

Group Affiliation: KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	8329 BRIMHALL RD STE 804, BAKERSFIELD CA 93312	661-323-6410	661-323-7631
OFFICE 1	6313 SCHIRRA CT STE 1, BAKERSFIELD CA 93313		

DODDAKASHI VEENA, R

Group Affiliation: KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	8329 BRIMHALL RD BLDG 800 STE 804, BAKERSFIELD CA 93312	661-431-1555	661-633-3944

ESLAMI SETARE,

Group Affiliation: ARISE PSYCHIATRIC MEDICAL GROUP INC.

Language(s) **SPANISH**
FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD CA 93311	661-735-3887	661-836-5545

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GOKLANEY RAVI, K

Group Affiliation: **ADVANCED MEDICAL PSYCHIATRIC SERVICES, INC., A PROFESSIONAL MEDICAL CORPORATION**

Language(s)

HINDI
PUNJABI

GUJARATI

Office #

OFFICE 1

Street:

3409 CALLOWAY DR STE 601, BAKERSFIELD CA
93312

Phone:

661-589-1200

Fax:

661-589-7200

KAMEL KAMEL, L

Group Affiliation: **KAMEL LOUIS KAMEL, M.D. INC.**

Language(s)

Office #

OFFICE 1

Street:

4199 CAMPUS DR STE 550, IRVINE CA 92612

Phone:

949-293-3440

Fax:

949-679-2047

KARAMAT MEHR,

Group Affiliation: **KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.**

Language(s) SPANISH

Office #

OFFICE 1

Street:

8329 BRIMHALL RD STE 804, BAKERSFIELD CA
93312

Phone:

661-431-1555

Fax:

661-633-3944

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FERNANDO GERARD, I

Group Affiliation: **KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	6313 SCHIRRA CT STE 1, BAKERSFIELD CA 93313	661-323-6410	661-323-7631
OFFICE 1	8329 BRIMHALL RD BLDG 800 STE 804, BAKERSFIELD CA 93312	661-431-1555	

BHURGRI ASHHAR,

Group Affiliation: **KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.**

Language(s) **SPANISH**

URDU

HINDI

PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	8329 BRIMHALL RD STE 804, BAKERSFIELD CA 93312	661-431-1555	661-381-7670

MALINI IYENGAR,

Group Affiliation: **KERN PSYCHIATRIC HEALTH AND WELLNESS CENTER, INC.**

Language(s) **SPANISH**

HINDI

KANNADA

TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	6313 SCHIRRA CT STE 1, BAKERSFIELD CA 93313	661-323-6410	661-633-3944
OFFICE 1	8329 BRIMHALL RD BLDG 800 STE 804, BAKERSFIELD CA 93312	661-431-1555	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MENDOZA RAUL, Y

Group Affiliation: **RAUL Y. MENDOZA, M.D., INC.**

Language(s)

FILIPINO

Office #

OFFICE 1

Street:

5500 MING AVE STE 210, BAKERSFIELD CA 93309

Phone:

661-834-8341

Fax:

661-834-6095

PSYCHIATRY

SOSA JUAN, R

Group Affiliation: **GOOD SAMARITAN HOSPITAL, A CALIFORNIA LIMITED PARTNERSHIP**

Language(s) SPANISH

Office #

OFFICE 1

Street:

1217 7TH ST , WASCO CA 93308

Phone:

661-758-5500

Fax:

661-758-5511

RAD - DIAGNOSTIC RADIOLOGY

BHAVSAR RAJESH, A

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #

OFFICE 1

Street:

2301 BAHAMAS DR , BAKERSFIELD CA 93309

Phone:

858-546-3800

Fax:

661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BENDER GREGORY, N

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

HAMMERMAN CURTIS,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

BLUME DOUGLAS, N

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787
	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	
	OFFICE 3	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-1787
	OFFICE 4	400 W MINERAL KING AVE , VISALIA CA 93291	559-734-5674	559-734-1787

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BOST NEAL, W

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

BOUIT TROY, K

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

ARIGO RICHARD, C

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HO RALPH, T

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

AMIRHAMZEH DANIEL,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

HIGHTOWER DANIEL, J

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH
GERMAN

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ANAND NEIL,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

APPLEGATE GREGORY, R

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

APPLEGATE LAURA, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BERKEY AARON, J

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

CARMODY TIMOTHY,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

BERNARD MARK, S

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ARTAL DALIA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	66-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	6613247000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

HERMANN MATTHEW, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

BANTA BRADY, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BENEDICT MATHEW, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

HAGOPIAN TARA, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

BERMAN JACK, L

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93311		

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HECHT STEPHEN, T

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
SPANISH				
GERMAN	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	

ARAFAT OMAR, S

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

FISHER JASON, E

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DHIR VASHITA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DIANAT SAEED,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FAN JOHN, W

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

GHASEMIZADEH DARA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	

FATEMI NASTARAN,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

CHANG GERALDINE,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

FENNELL VINCENT, R

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DENARO STEPHEN, A

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

500 OLD RIVER RD STE 200, BAKERSFIELD CA
93311

661-663-6429

661-663-6041

FLANNIGAN BONNIE,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

661-326-9600

661-334-3065

OFFICE 1

3838 SAN DIMAS ST STE A120, BAKERSFIELD CA
93301

661-326-9600

OFFICE 3

9330 STOCKDALE HWY STE 100, BAKERSFIELD CA
93311

661-326-9600

661-334-3065

FREDERICKSEN RYAN, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

858-546-3800

661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FRENCHER JAMES, T

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

858-546-3800

661-316-3219

FRIEDLANDER JOSHUA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

661-324-7000

661-324-3164

OFFICE 1

3838 SAN DIMAS ST STE A120, BAKERSFIELD CA
93301

661-326-9600

OFFICE 3

9330 STOCKDALE HWY STE 100, BAKERSFIELD CA
93311

661-326-9600

661-334-3065

FURUBAYASHI JILL, K

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

858-546-3800

661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GALDINO GREGORY, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

GERO BERNARD, T

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

CRNKOVICH FRANCIS, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BROWN DOUGLAS, H

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

BROWNING PATRICK, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

BURNS JASON, W

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BURTON ELIJAH, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

CRUM CHARLES, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

HA TUAN, X

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
VIETNAMESE	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
	OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
	OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GOMES DANILO, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

GUNDZIK JOHN, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DENNIS JOLANTA, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

LUDWIG BENJAMIN, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93306	661-324-7000	
	OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DALLE JOHN,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DAMBACH HEIDI, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DARDASHTI SIAMAK,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

DENARO STEPHEN, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-328-6445	888-972-8079
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

BROCK RACHEL, E

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

COLL JONATHAN,

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

REINER DAVID, P

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

OYOLA TORRES EDUARDO,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93306	661-324-7000	
OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

POLLOCK MAX, R

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

PRINCENTHAL ROBERT, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

QAISI WALEED, G

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

RAM SUNIL, K

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

ROYSTON ERIC, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

RAPHAEL YANIV, R

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

ONG LEONARD, T

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

RIAD SHAREEF, M

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ROEDER ZACHARY, S

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93303

858-546-3800

661-316-3219

ROEFS JOHN, A

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

2301 BAHAMAS DR , BAKERSFIELD CA 93309

661-326-9600

661-334-3065

OFFICE 1

3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301

661-326-9600

OFFICE 3

9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311

661-326-9600

661-334-3065

ROEFS JOHN, A

Group Affiliation: **TRUXTUN RADIOLOGY MEDICAL GROUP LP**

Language(s)

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

1817 TRUXTUN AVE , BAKERSFIELD CA 93301

661-325-6800

661-325-1342

OFFICE 1

9900 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311

661-616-1201

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ROPER GLADE, E

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-6932
SPANISH	OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
	OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-6932

MORAN ANGEL,

Group Affiliation: RAVI PATEL, M.D., INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-327-7027

RAPER PAUL,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ABE BENNETT, K

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE C, VISALIA CA 93277	559-734-3258	559-734-9258
OFFICE 1	119 S LOCUST ST , VISALIA CA 93291	559-734-3258	
OFFICE 3	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787

MORENO HEATHER,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

MORNEAU LEONARD, T

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MORTEZAIE ALAN, R

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	

MOURADI BARA,

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MUIR SUSIE, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

MURPHY JAMES, S

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

OTTO RONALD,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

ABADIE BRIANNA, G M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

LOTAN ROI, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

AGUET JAIME, C

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

AHARONIAN ARTIN,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

ALORE PATRICK, L

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

NGUYEN DANH TIEN,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

HOBART EDWARD, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

SCHALE DAVID, P

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

NALLS GAIL, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

WILSON ANNA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

VALLES FRANCISCO, E

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	
OFFICE 3	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-6932

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

VARAPRASATHAN GITA, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

WAGMAN ALLAN,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

WAGNER ELLIOTT, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

WEDEEN GLENN, P

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ROY ANJALI,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

WILLIAMS MARK,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

TIRMAN PHILLIP,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

WORTMAN WILLIAM,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

YAMAMOTO SHOTA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

YANG MICHAEL, C

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

YUAN DAVID, D

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

YUH THERESA, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ZARE MEGAN, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

WIEDMAN MARTHA, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

SOSNOWSKI RAFAL, L

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SCHARNWEBER TRAVIS, S

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

SHAHKARAMI ASHKAN,

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
	OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
	OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

SHAHROKNI SEYED, H

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SHELAT ASHUTOSH,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

SHIN MICHAEL, J

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-6932
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

SIDDIQUI ARSALAN, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
OFFICE 1	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	
OFFICE 3	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

URDANETA FELIPE,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

SOMMERVILLE BRITT, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

TURNER ROBERT, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93301	661-324-7000	661-334-3164
OFFICE 1	9300 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-334-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

STEVENS, JR SYDNEY, L

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

SYED JAVED,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	

SYMKO SOPHIA, C

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

TALEBI LIASI AMIR,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

TAYLOR BRANDON, C

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-334-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

OBEMBE OLUFOLAJIMI, O

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SIMON ROBERT, D

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

LE THU, T

Group Affiliation: **MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-6932
VIETNAMESE	OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	
	OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-6932

MANSFIELD WILLIAM, P

Group Affiliation: **WAJIH AL-SHEIKH, M.D., INC.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH, ARABIC	OFFICE 1	1311 JEFFERSON ST , DELANO CA 93215	661-721-3510	661-721-0562

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MANSFIELD WILLIAM, P

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164
	OFFICE 1	9900 STOCKDALE HWY STE 109, BAKERSFIELD CA 93309	661-616-1488	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93309	661-215-8223	

LUCCHESI ARCHANA, C

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

KELLY WILLIAM, M

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

LIU JOSEPH, P

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

LIU JOHNS,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

LESAR BENJAMIN, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

LEE ROBERT, K

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

IZADI KAMRON,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MARISTANY BERNARD, G

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

JAVERI KHALID,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MACDONALD CHRISTOPHER, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

JORDAN TAYLOR, R

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

LATTIN GRANT,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KRASNY ROBERT, M

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
	OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

KARLIN DAVID, S

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

KASHEFI AMIR,

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KATO KAMBRIE, Y

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

KAVALI ASHA, K

Group Affiliation: **MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-1787
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787

KLEIN MICHAEL, V

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KISLER TANYA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164

KHANNA ROHIT,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DR STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

LEE BRIAN, H

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MCCULLY JR FRANCIS, R

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	
OFFICE 3	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-1787

HWANG JANICE, J

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	858-546-3800	661-316-3219

MIKHCHI AMIR, H

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MASSEE DONALD, R

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

MENDOZA JORGE, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
SPANISH	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

MISCHIU OANA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MC FARLAND KIMBERLY, C

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

MCDANIEL BROCK, G

Group Affiliation: **KERN RADIOLOGY MEDICAL GROUP, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164

MERCER NANJI,

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	500 OLD RIVER RD STE 200, BAKERSFIELD CA 93311	661-663-6429	661-663-6041

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HWA LINDA,

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787
MANDARIN	OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	
	OFFICE 3	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-1787

MERCER NANCI,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
	OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
	OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

HOLLIS RICHARD, K

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MAXEY ROBERT, A

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93303	858-546-3800	661-316-3219

MCALLISTER DEREK, G

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

MOELLEKEN SONJA,

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-324-7000	661-324-3164
OFFICE 1	9300 STOCKDALE HWY STE 100 & 109, BAKERSFIELD CA 93311	661-324-7000	
OFFICE 3	4500 MORNING DRIVE STE 202, BAKERSFIELD CA 93306	661-324-7000	661-324-3164

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

RAD - INTERVENTIONAL/DIAGNOSTIC RADIOLOGY

PHAN TRENT, V

Group Affiliation: KERN RADIOLOGY MEDICAL GROUP, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2301 BAHAMAS DR , BAKERSFIELD CA 93309	661-326-9600	661-334-3065
OFFICE 1	3838 SAN DIMAS ST STE A120, BAKERSFIELD CA 93301	661-326-9600	
OFFICE 3	9330 STOCKDALE HWY STE 100, BAKERSFIELD CA 93311	661-326-9600	661-334-3065

MOSHFEGH AMIEL, P

Group Affiliation: SOUTHERN CALIFORNIA VASCULAR INSTITUTE, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	323-347-1002	323-433-9177

RAD - RADIATION ONCOLOGY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DESAI AJAY, S

Group Affiliation: **KOMAL DESAI, M.D., INC.**

Language(s)

HINDI

Office #

OFFICE 1

Street:

4500 MORNING DR STE 105, BAKERSFIELD CA
93306

Phone:

661-491-5060

Fax:

661-871-3479

GORLA GIRIDHAR, G

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) SPANISH

HINDI

Office #

OFFICE 1

Street:

6501 TRUXTUN AVE , BAKERSFIELD CA 93309

Phone:

661-322-2206

Fax:

661-322-7027

SURG - BARIATRIC SURGERY

IRANI HORMUZ,

Group Affiliation: **ADVANCED BARIATRICS A MEDICAL CORPORATION**

Language(s) SPANISH

HINDI

SPANISH

GUJARATI

Office #

OFFICE 1

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93312

Phone:

661-638-0601

Fax:

661-638-0605

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SURG - CARDIOVASCULAR/THORACIC SURGERY

PUREWAL SARABJIT, S

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**
INDIAN

Office # Street:

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**3838 SAN DIMAS ST STE A100, BAKERSFIELD CA
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Phone:

661-327-8538

Fax:

661-327-5432

PECK ERIC, A

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**

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Fax:

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PAW PATRICK, T

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**
THAI
CHINESE

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE A100, BAKERSFIELD CA 93301	661-327-8538	661-327-5432

SURG - COLON/RECTAL SURGERY

MALELLARI LORENC,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE B231, BAKERSFIELD CA 93301	661-665-0505	661-864-2190

SURG - COMPLEX GENERAL SURGICAL ONCOLOGY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FOULAD DAVID,

Group Affiliation: **RAVI PATEL, M.D., INC.**

Language(s) **SPANISH**

Office #

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Phone:

Fax:

OFFICE 1

6501 TRUXTUN AVE , BAKERSFIELD CA 93309

661-322-2206

661-327-7027

SURG - GENERAL SURGERY

KAPADIA RAVI,

Group Affiliation: **GOOD SAMARITAN HOSPITAL, A CALIFORNIA LIMITED PARTNERSHIP**

Language(s) **SPANISH**

Office #

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Phone:

Fax:

OFFICE 1

1217 7TH ST , WASCO CA 93280

661-758-5500

661-758-5511

KAY SELWYN,

Group Affiliation: **SELWYN KAY MD, F.A.C.S.**

Language(s) **SPANISH**

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Phone:

Fax:

OFFICE 1

2521 G ST , BAKERSFIELD CA 93301

661-327-2544

661-327-0555

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ENRIQUEZ-DIAZ JORGE, A

Group Affiliation: JORGE ENRIQUEZ MD F.A.C.S., INC.

Language(s) **SPANISH**
SPANISH

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661-864-7131

KWOCK CHRISTINA, L

Group Affiliation: PORTERVILLE COMMUNITY PHYSICIANS, INC.

Language(s) **SPANISH**

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559-791-3909

BISHOP KELLY, T

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s) **SPANISH**

Office #
OFFICE 1

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1201 JEFFERSON ST , DELANO CA 93215

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

THOMAS DEBI,

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1201 JEFFERSON ST , DELANO CA 93215	661-721-0737	661-721-0738

SINGH GURMANT, P

Group Affiliation: **GURMANT P. SINGH, MD, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	8307 BRIMHALL RD STE 1706, BAKERSFIELD CA 93312	661-467-1477	661-467-1480
OFFICE 1	1205 GARCES HWY STE 303, DELANO CA 93215	661-725-4847	

MOON CYRUS, R

Group Affiliation: **MOON MD INCORPORATED**

Language(s)

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OFFICE 1	8311 BRIMHALL RD STE 1901, BAKERSFIELD CA 93312	661-638-0601	661-638-0605

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

IRANI HORMUZ,

Group Affiliation: **HORMUZ IRANI M.D., INC.**

Language(s) **SPANISH**

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Fax:

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OFFICE 1 8311 BRIMHALL RD STE 1901, BAKERSFIELD CA

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GUJARATI

LEE CHIH CHENG,

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**

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FAWIBE OLUWATOSIN,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

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Phone:

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93301**

661-665-0505

661-864-2190

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PATEL ARPIT, B

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s) **SPANISH**
GUJARATI

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OFFICE 1	9500 STOCKDALE HWY STE 201, BAKERSFIELD CA 93311	661-327-1431	

BUXTON JOHN, A

Group Affiliation: **JOHN A. BUXTON M.D.**

Language(s) **SPANISH**

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OFFICE 1	3838 SAN DIMAS ST BLDG B, BAKERSFIELD CA 93301	661-327-2544	

BUXTON JOHN, A

Group Affiliation: **KERN VALLEY HEALTHCARE DISTRICT**

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

PORTUGAL DENISE,

Group Affiliation: DENISE PORTUGAL

Language(s) SPANISH
SPANISH

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WILLIAMS RACHAEL, Y

Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)

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PUGALENTHI AMUDHAN,

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

RODRIGUEZ ROLAND,

Group Affiliation: **ROLAND RODRIGUEZ, M.D.**

Language(s)

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NISIM ABRAHAM, A

Group Affiliation: **NISIM SURGICAL**

Language(s) **SPANISH, HEBRE**

SPANISH

HEBREW

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661-479-5063

SURG - OPHTHALMOLOGY

BAGHERI NIKA,

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s) **SPANISH**

PERSIAN

SPANISH

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661-322-8489

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HAIR DAVID, B

Group Affiliation: **BAKERSFIELD EYE INSTITUTE, INC.**

Language(s)

Office #

Street:

Phone:

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OFFICE 1

7508 MEANY AVE , BAKERSFIELD CA 93308

661-589-9400

661-589-9499

WU CHRIS, Y

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s)

SPANISH

Office #

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SPANISH

OFFICE 1

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MANDARIN

SEIN JULIA,

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s)

SPANISH

Office #

Street:

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BURMESE

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

ARTYMOWICZ ANNA,

Group Affiliation: SANDEEP S. WALIA, M.D. A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH**
SPANISH
POLISH

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OFFICE 1	215 CHINA GRADE LOOP , BAKERSFIELD CA 93308	661-393-2331	661-393-2684
OFFICE 1	11901 BOLTHOUSE DR STE 300, BAKERSFIELD CA 93311	661-393-2331	

YAPLEE STEVEN, M

Group Affiliation: GEORGE YAPLEE MEDICAL CENTER, INC., A PROFESSIONAL CORPORATION

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	9700 BRIMHALL RD , BAKERSFIELD CA 93312	661-631-2020	661-829-8657
OFFICE 1	1519 GARCES HWY STE 101, DELANO CA 93215	661-721-2020	

WALIA SANDEEP, B

Group Affiliation: SANDEEP S. WALIA, M.D. A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH, PUNJAB**
PUNJABI
SPANISH

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OFFICE 1	215 CHINA GRADE LOOP , BAKERSFIELD CA 93308	661-393-2331	661-393-6284
OFFICE 1	11901 BOLTHOUSE DR STE 300-400, BAKERSFIELD CA 93311	661-393-2331	

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

WONG KAI, W

Group Affiliation: **KAI W. WONG**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2323 16TH ST STE 501, BAKERSFIELD CA 93301	661-327-4484	661-327-7071

YANG DONG, D

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s) **SPANISH**

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YAPLEE STEVEN, M

Group Affiliation: **GEORGE YAPLEE MEDICAL CENTER, INC., A PROFESSIONAL CORPORATION**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	1519 GARCES HWY STE 101, DELANO CA 93215	661-721-2020	661-721-2401

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KOUCHOUK AMR, M

Group Affiliation: **HOLLYWOOD EYE ASSOCIATES**

Language(s)

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3801 SAN DIMAS ST BLDG A, BAKERSFIELD CA
93301

661-460-7640

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KIM RICHARD, D J

Group Affiliation: **RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP, A MEDICAL PARTNERSHIP**

Language(s)

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KOREAN

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2323 16TH ST STE 400, BAKERSFIELD CA 93301

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844-897-3788

LING RICHARD, T

Group Affiliation: **RICHARD LING, M.D., INC.**

Language(s)

Office #

Street:

Phone:

Fax:

SPANISH

CANTONESE

MANDARIN

SPANISH

OFFICE 1

2325 17TH ST , BAKERSFIELD CA 93301

661-321-6333

661-631-8888

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

DHOOT DILSHER, S

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) SPANISH

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CHAWLA ANUJ,

Group Affiliation: RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP, A MEDICAL PARTNERSHIP

Language(s) SPANISH

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OFFICE 1	137 S ASPEN CT STE C, VISALIA CA 93291	559-733-7024	
OFFICE 3	2323 16TH ST STE 400, BAKERSFIELD CA 93301	661-479-0757	661-634-8044

STEINLE NATHAN, C

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) SPANISH
SPANISH

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

KOHN ROGER, A

Group Affiliation: **ROGER KOHN, M.D.**

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Language(s) SPANISH

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Fax:

661-322-8489

ALEXANDRAKIS GEORGE,

Group Affiliation: **GEORGE ALEXANDRAKIS, MD, INC.**

Language(s)

GREEK
SPANISH

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Fax:

661-215-1857

SURG - PLASTIC SURGERY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

FREEMAN M. BRANDON,

Group Affiliation: **M. BRANDON FREEMAN, MD, PHD, PC**

Language(s) **SPANISH**

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93301**

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661-438-0358

BAUGHMAN ETHAN, J

Group Affiliation: **GROSSMAN MEDICAL GROUP, INC.**

Language(s) **SPANISH**

Office #

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Fax:

SPANISH

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420 34TH ST , BAKERSFIELD CA 93301

661-633-2876

661-327-0576

SAHAR DAVID, E

Group Affiliation: **CALIFORNIA INSTITUTE OF COSMETIC & RECONSTRUCTIVE SURGERY, A
MEDICAL CORPORATION**

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

MAJIDIAN ALEXANDER, M

Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)

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DEV VIPUL, R

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HINDI

SPANISH

ERFANIAN KAMIL,

Group Affiliation: REGENTS OF THE UNIVERSITY OF CALIFORNIA

Language(s)

SPANISH

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Phone:

Fax:

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5201 TRUXTUN AVE , BAKERSFIELD CA 93309

661-328-5565

661-328-5573

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

GROSSMAN PETER, H

Group Affiliation: **GROSSMAN MEDICAL GROUP, INC.**

Language(s)

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661-327-0576

MITTS GORDON, M

Group Affiliation: **G. M. MITTS, M.D., INC.**

Language(s) **SPANISH**

Office #

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Phone:

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OFFICE 1

2525 H ST , BAKERSFIELD CA 93301

661-324-7208

661-324-3403

EVANS BRIAN, N

Group Affiliation: **GROSSMAN MEDICAL GROUP, INC.**

Language(s)

Office #

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SURG - SURGERY OF THE HAND

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

WONG CHARLES, D

Group Affiliation: CHARLES D. WONG, D.O., MEDICAL CORPORATION

Language(s)

Office #

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Fax:

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661-664-2300

661-663-6711

BOWEN DAVID, T

Group Affiliation: DESERT HAND AND PLASTIC SURGERY PC

Language(s)

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Fax:

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661-664-2202

WONG CHARLES, D

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

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DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

SURG - UROLOGY

OEFELEIN MICHAEL, G

Group Affiliation: MICHAEL G OEFELEIN MD INC.

Language(s)

Office #

Street:

Phone:

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OFFICE 1

3941 SAN DIMAS ST STE 103A, BAKERSFIELD CA
93301

661-520-5010

661-520-5020

SHAKIR SHABBIR, A

Group Affiliation: SHABBIR SHAKIR, M.D.

Language(s) SPANISH

Office #

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Fax:

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OFFICE 1

2808 F ST STE E, BAKERSFIELD CA 93301

661-395-0688

661-395-3082

ARABIC

SPANISH

SNYDER ORRENZO, B

Group Affiliation: ORRENZO SNYDER, M.D., MEDICAL CORPORATION

Language(s)

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Street:

Phone:

Fax:

OFFICE 1

263 N PEARSON DR STE 100, PORTERVILLE CA
93257

559-772-4301

559-772-4302

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

WAGUESPACK ROBERT, L

Group Affiliation: **ROBERT L. WAGUESPACK, M.D., A PROFESSIONAL CORPORATION**

Language(s)

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Street:

Phone:

Fax:

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2530 F ST STE B, BAKERSFIELD CA 93301

661-321-3303

661-321-3308

YOUNGSTROM EDWIN, A

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

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661-665-0505

661-864-2190

OFFICE 1

3838 SAN DIMAS ST STE A200, BAKERSFIELD CA 93301

661-654-0200

STONE BRUCE, C

Group Affiliation: **BRUCE C. STONE**

Language(s)

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661-664-4458

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

HOROVITZ DAVID,

Group Affiliation: **DAVID HOROVITZ, MD INC**

Language(s)

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STONE BRUCE, C

Group Affiliation: **PACIFIC CENTRAL COAST HEALTH CENTERS**

Language(s)

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Phone:

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661-664-4458

SURG - UROLOGY/FEMALE PELVIC MED AND RECONSTRUCTIVE SURGERY

DHMN-CC Specialty Ancillary Provider Roster

Provider Specialty / Provider Name

LEE JUSTIN, T

Group Affiliation: JUSTIN THIEN LEE, MD INC

Language(s)

VIETNAMESE

Office #

OFFICE 1

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93311

Phone:

661-663-6429

Fax:

661-663-6041

SURG - VASCULAR SURGERY

CAPOTE ALLAN, L

Group Affiliation: HAO D. BUI, M.D., INC

Language(s)

VIETNAMESE

SPANISH

Office #

OFFICE 1

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93312

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661-241-4052