

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

ACUPUNCTURE

ACUHOPE ACUPUNCTURE - 888925

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	750 W GONZALES RD STE 260, OXNARD, CA 93036	(805) 200-2388	(866) 426-6093

ALLERGY & IMMUNOLOGY

CHOPRA,PREETI - 280561

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
PUNJABI OFFICE 1	5720 RALSTON ST STE 205, VENTURA, CA 93003-2938	(805) 658-9500	(805) 658-9501

GIANOS,MARY E - 280450

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3901 LAS POSAS RD STE 203, CAMARILLO CA, CA 93010-1505	(805) 482-5518	(805) 445-9543

PORCH-CURREN,CRISTINA NICOLE - 280481

Group Affiliation: COASTAL ALLERGY CARE

Language(s):

Office #	Street:	Phone:	Fax:
SPANISH ITALIAN OFFICE 1	2412 N PONDEROSA DR STE B111, CAMARILLO, CA 93010-2379	(805) 482-8989	(805) 987-2855

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2	430 E AVENIDA DE LOS ARBOLES STE 203, THOUSAND OAKS, CA 91360-3017	(805) 493-1537	(805) 987-2855
OFFICE 3	1687 ERRINGER RD STE 108, SIMI VALLEY, CA 93065-6509	(805) 581-6482	(805) 987-2855

VERMA, PRASHANT - 280392

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5720 RALSTON ST STE 205, VENTURA, CA 93003-2938	(805) 658-9500	(805) 658-9501

VERMA, SANJIV - 280072

Group Affiliation:

Language(s):

HINDI			
PUNJABI			
Office #	Street:	Phone:	Fax:
OFFICE 1	5720 RALSTON ST STE 205, VENTURA, CA 93003-2938	(805) 658-9500	(805) 658-9501
OFFICE 2	451 W GONZALES RD STE 150, OXNARD, CA 93030-0723	(805) 983-0771	(805) 983-6139

AUDIOLOGY

HEARX WEST - 880023

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3003 LOMA VISTA RD STE C, VENTURA, CA 93003-2935	(805) 648-1685	(805) 648-6352
OFFICE 2	1211 MARICOPA WAY STE 109, OJAI, CA 93023-3159	(805) 646-4520	(805) 648-6352
OFFICE 3	123 HODENCAMP RD STE 104, THOUSAND OAKS, CA 91360-5833	(805) 496-1474	(805) 497-0712

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NELSON AUDIOLOGY - 888908

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1320 MARICOPA HIGHWAY STE B, OJAI, CA 93023	(805) 633-9063	(805) 633-9068
OFFICE 2	2674 E MAIN ST STE I, VENTURA, CA 93003	(805) 653-7333	(805) 653-6907

WEST COAST HEARING & BALANCE CTR - 880280

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030-7657	(805) 983-4214	(805) 983-0463
OFFICE 2	2438 PONDEROSA DR STE C-110, CAMARILLO, CA 93010-2466	(805) 484-5951	(805) 484-9044
OFFICE 3	301 S MOORPARK RD, THOUSAND OAKS, CA 91361-1008	(805) 379-0824	(805) 379-0611

CARDIAC ELECTROPHYSIOLOGY
DUKES, JONATHAN W - 281313

Group Affiliation: CARDIOLOGY ASSOCIATES MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	100 N BRENT ST STE 301, VENTURA, CA 93003	(805) 653-0101	(805) 641-0434
OFFICE 2	1701 SOLAR DR STE 150, OXNARD, CA 93030	(805) 278-4020	(805) 278-4015

SOVARI, ALI ALIZADEH - 280982

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0190	(805) 983-0922	(805) 983-1997

CARDIOVASCULAR DISEASES

CASTILLO,ADRIAN R - 281312

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030	(805) 558-7137	(805) 983-1997

DAVE,KHAMAJ - 280260

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

EYVAZIAN,VAUGHN A - 281207

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030	(805) 983-0922	(805) 983-1997

FATEMI,OMID - 281097

Group Affiliation: CARDIOLOGY ASSOCIATES MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 100 N BRENT ST STE 301, VENTURA , CA 93003 (805) 653-0101 (805) 641-0434

KONG JR,THOMAS Q - 280277

Group Affiliation: DIGNITY HEALTH MED GRP-VENTURA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 350, OXNARD, CA 93030-7627	(805) 200-3225	(805) 200-3230

OBED,ESAM M - 280261

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

ROTHSCHILD,RICHARD BARRY - 280262

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

SCHMIDT,DAVID E - 280263

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SINGH, KARAN DEEP - 281258

Group Affiliation: OXNARD CARDIOVASCULAR AND MEDICAL GROUP

Language(s):

PANJABI	Office #	Street:	Phone:	Fax:
	OFFICE 1	915 W 7TH ST, OXNARD, CA 93030-6755	(805) 486-1601	(805) 487-1094

WANG, FAN-PING - 280264

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

CHINESE	Office #	Street:	Phone:	Fax:
	OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
	OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

ZAGER, SCOTT ANTHONY - 280265

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	2241 WANKEL WAY STE C, OXNARD, CA 93030-0191	(805) 983-0922	(805) 604-0372
	OFFICE 2	400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903	(805) 384-9313	(805) 384-9493

CARDIOVASCULAR SURGERY

BUSHNELL, LAMAR J - 250120

Group Affiliation: CALIF CARDIOVASCULAR & THORACIC SURGEONS

Language(s):

	Office #	Street:	Phone:	Fax:
--	-----------------	----------------	---------------	-------------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1	168 N BRENT ST STE 508, VENTURA, CA 93003-2840	(805) 643-2375	(805) 643-3511
----------	--	----------------	----------------

KOTOYAN,RAFFI A - 281261

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(818) 993-7565

SOLTERO,MICHAEL J - 281260

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(805) 993-7565

YASUDA,RODERICK K - 281259

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(818) 993-7565

DERMATOLOGY

DHARIA,RAHIL MUKESH - 281241

Group Affiliation: PACIFIC CENTER FOR DERMATOLOGY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2460 N PONDEROSA DR STE A117, CAMARILLO, CA 93010	(805) 484-2855	(805) 389-1245

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name
DU,LINGYUN - 281237

Group Affiliation: CALIFORNIA SKIN INSITUTE MEDICAL GROUP

Language(s):

JAPANESE

Office #
Street:
Phone:
Fax:

CHINESE

OFFICE 1

2438 N PONDEROSA DR STE C105, CAMARILLO, CA 93010

(805) 388-2068

(805) 484-7700

OFFICE 2

1700 N ROSE AVE STE 450, OXNARD, CA 93030-7625

(805) 201-7150

(805) 278-0137

LYNN,RIKK N - 281291

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

451 W GONZALES RD STE 150, OXNARD, CA 93030

(805) 944-1130

(805) 244-2568

REDDY,SHIVANI - 281198

Group Affiliation: CALIFORNIA SKIN INSITUTE MEDICAL GROUP

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

2438 N PONDEROSA DR STE C105, CAMARILLO, CA 93010-2465

(805) 388-2068

(805) 484-7700

OFFICE 2

1700 N ROSE AVE STE 450, OXNARD, CA 93030-7626

(805) 201-7150

(805) 278-0137

OFFICE 3

425 HAALAND DR STE 204, THOUSAND OAKS, CA 91361-5231

(805) 497-8080

(805) 497-8806

SIMONI,AZITA - 281161

Group Affiliation: CALIFORNIA SKIN INSITUTE MEDICAL GROUP

Language(s):

PERSIAN

Office #
Street:
Phone:
Fax:

FARSI

OFFICE 1

425 HAALAND DR STE 204, THOUSAND OAKS, CA 91361-5231

(805) 497-8080

(805) 497-8806

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

ENDOCRINOLOGY

LEVIN, MICHELLE - 281299

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5800 SANTA ROSA RD STE 149, CAMARILLO, CA 93012	(805) 465-8900	(805) 465-8920
OFFICE 2	2361 E VINEYARD AVE, OXNARD, CA 93036	(805) 981-3770	(805) 981-9674

NIKOOMANESH, TINA - 281300

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5800 SANTA ROSA RD STE 149, CAMARILLO, CA 93012	(805) 465-8900	(805) 465-8920
OFFICE 2	2361 E VINEYARD AVE, OXNARD, CA 93036	(805) 981-3770	(805) 981-9674
OFFICE 3	2721 E MAIN ST, VENTURA, CA 93003	(805) 667-2841	(805) 667-2846

FAMILY PLANNING

PLANNED PARENTHOOD - 880149

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5400 RALSTON ST, VENTURA, CA 93003-6002	(805) 658-3230	(805) 644-1201

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GASTROENTEROLOGY

FAN,ROBERT S - 281002

Group Affiliation: WEST GASTROENTEROLOGY MEDICAL GRP

Language(s):

CANTONESE

Office #	Street:	Phone:	Fax:
OFFICE 1	33655 ALAMO ST STE 100, SEMI VALLEY, CA 93063-2187	(805) 214-1514	(805) 499-2103

GONDHA,CHETAN VITHAL - 280383

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 874-7911

GUAN,JAY J - 281176

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

MANDARIN

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE A, OXNARD, CA 93030	(805) 484-7921	(805) 388-5404

LYCHE,KIP D - 280375

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 874-7911
OFFICE 2	1901 SOLAR DR STE 205, OXNARD, CA 93036-0632	(805) 641-6525	(805) 948-1505

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MARASIGAN,JUSTIN MICHAEL - 281146

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2241 WANKEL WAY STE A, OXNARD, CA 93030-0191	(805) 983-0521	(805) 485-1484
OFFICE 2	4005 MISSION OAKS RD UNIT A, CAMARILLO, CA 93012-5156	(805) 983-0521	(805) 485-1484

MENZ,CHARLES L - 280380

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 874-7911
OFFICE 2	1901 SOLAR DR STE 205, OXNARD, CA 93036-0632	(805) 641-6525	(805) 948-1505

NASROLLAH,LAYA - 280551

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 874-7911

PEDRAZA,BENITO A - 280377

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 874-7911
OFFICE 2	1901 SOLAR DR STE 205, OXNARD, CA 93036-0632	(805) 641-6525	(805) 948-1505

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROJANY, MICHA S - 280064

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

	Office #	Street:	Phone:	Fax:
FRENCH	OFFICE 1	2241 WANKEL WAY STE A, OXNARD, CA 93030-0191	(805) 484-7921	(805) 388-5404
SPANISH	OFFICE 2	4005 MISSION OAKS BLVD STE A, CAMARILLO, CA 93012-5156	(805) 484-7921	(805) 983-4186
	OFFICE 3	4009 MISSION OAKS BLVD, CAMARILLO, CA 93012	(805) 484-7921	(805) 388-5404

SIMON, KAREN LEAH - 280336

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2241 WANKEL WAY STE A, OXNARD, CA 93030-0191	(805) 983-0521	(805) 485-1484
	OFFICE 2	4005 MISSION OAKS BLVD STE A, CAMARILLO, CA 93012-5156	(805) 484-7921	(805) 388-5404

GENERAL SURGERY

BABASHOFF, LISA L - 280957

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311
	OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687
	OFFICE 3	2486 N PONDEROSA DR STE D 205, CAMARILLO, CA 93010	(805) 988-7196	(805) 988-7197

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BARBARO,CASEY - 281028

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
ITALIAN	OFFICE 1	300 HILLMONT AVE BLDG 340 #401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 641-4416

BRAND,LISA ELAINE - 280562

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	4542 LAS POSAS RD STE D, CAMARILLO, CA 93010-2374	(805) 322-8490	(805) 586-8066

CARDEN,ANTHONY - 281152

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 652-6201	(805) 641-4416

DIXON,NEAL P - 280479

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2486 N PONDEROSA DR STE D-205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197
	OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687
	OFFICE 3	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311

DUNCAN,THOMAS - 281014

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
YORUBA	OFFICE 1	300 HILLMONT AVE BLDG 340 #401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 641-4416

EISNER,JOSEPH A - 280963

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
FRENCH	OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311
	OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687
	OFFICE 3	2486 N PONDEROSA DR STE D 205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197

JREIJE,KARIM MICHAEL - 281189

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
ARABIC				
	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003	(805) 652-6201	(805) 641-4416

MCCARTY,PATRICK M - 281082

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311
	OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687
	OFFICE 3	2486 N PONDEROSA DR STE D 205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

MOONEY, COLIN M. - 281310

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2486 N PONDEROSA DR STE D-205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197
OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687
OFFICE 3	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311

ROMERO, JAVIER - 281095

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 641-4416

SCHWEITZER, JEREMY - 281017

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 641-4416

SHELLITO, ADAM D - 281252

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003	(805) 652-6201	(805) 641-4416

TUAI, BRIAN CHIEN - 280959

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

	Office #	Street:	Phone:	Fax:
KOREAN	OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-3790	(805) 485-8722	(805) 485-9311
MANDAR	OFFICE 2	2486 N PONDEROSA DR STE D 205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197
	OFFICE 3	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687

VAN SANT,LAUREN - 281264

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 652-6000	(805) 648-9561

WU,SAMANTHA - 281202

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030	(805) 485-8722	(805) 485-9311
	OFFICE 2	2486 N PONDEROSA DR STE D 205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197
	OFFICE 3	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687

GYNECOLOGY-ONCOLOGY

NARASIMHULU,DEEPA MAHESWARI - 281188

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
TAMIL	OFFICE 1	2900 LOMA VISTA RD STE 205, VENTURA, CA 93003	(805) 642-4830	(805) 642-3852
HINDI				

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

HEMATOLOGY-ONCOLOGY

BANTA,WARREN P - 280362

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	1851 LOMBARD ST STE 105, OXNARD, CA 93030	(805) 707-0800	(805) 707-0808

LEE,BYUNG - 280445

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

KOREAN	Office #	Street:	Phone:	Fax:
	OFFICE 1	1851 LOMARD ST STE 105, OXNARD, CA 93030-8231	(805) 707-0800	(805) 707-0808

MA,AUSTIN JUNE - 280000

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

KOREAN	Office #	Street:	Phone:	Fax:
	OFFICE 1	1851 LOMBARD ST STE 105, OXNARD, CA 93030-8231	(805) 707-0800	(805) 707-0808

MASIELLO,DAVID P - 280363

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	1851 LOMBARD ST STE 105, OXNARD, CA 93030-8231	(805) 707-0800	(805) 707-0808

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NAIK,RAHUL RAMESH - 281170

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1851 LOMBARD ST STE 105, OXNARD, CA 93030-8231	(805) 707-0800	(805) 707-0808

PENG,WARNER - 281174

Group Affiliation: AUSTIN MA MD A PROFESSIONAL CORP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1851 LOMBARD ST STE 105, OXNARD, CA 93030	(805) 707-0800	(805) 707-0808

HOSPITAL

ST JOHN'S HOSPITAL CAMARILLO - 880087

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2309 ANTONIO AVE, CAMARILLO, CA 93010-1414	(805) 389-5800	(805) 383-7446

ST JOHN'S REGIONAL MEDICAL CENTER - 880088

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1600 N ROSE AVE, OXNARD, CA 93030-3722	(805) 988-2500	(805) 981-4418

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HYPERBARIC MEDICINE

BRAND,LISA ELAINE - 280562

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	4542 LAS POSAS RD STE D, CAMARILLO, CA 93010-2374	(805) 322-8490	(805) 586-8066

INFECTIOUS DISEASES

WOLFSOHN,JOSHUA BENJAMIN - 280443

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	4000 CALLE TECATE STE 220, CAMARILLO, CA 93012-5289	(805) 465-7388	(805) 556-4895

LABORATORY

EXACT SCIENCES LABORATORIES - 888941

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	145 BADGER RD STE 100, MADISON, WI 53713	(608) 284-5700	(608) 284-5701
OFFICE 2	650 FORWARD DR, MADISON, WI 53711	(608) 284-5700	

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

QUEST DIAGNOSTICS - 880151

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	957 FAULKNER RD STE 111, SANTA PAULA, CA 93060-9132	(805) 933-4456	(805) 525-8108
OFFICE 2	3801 LAS POSAS RD STE 208, CAMARILLO, CA 93010-1426	(805) 389-3260	(805) 987-0164
OFFICE 3	1000 NEWBURK RD STE 125, NEWBURY PARK, CA 91320-6437	(805) 480-0571	(805) 498-8642
OFFICE 4	1701 NORTH LOMBARD ST STE 106, OXNARD, CA 93030-3836	(805) 983-0558	(805) 278-0541
OFFICE 5	925 WEST 7TH ST, OXNARD, CA 93030-6757	(805) 483-8776	(805) 247-0291
OFFICE 6	2991 LOMA VISTA STE 102B, VENTURA , CA 93003-2984	(805) 648-2761	(805) 643-0348
OFFICE 7	7880 TELEGRAPH RD STE D, VENTURA, CA 93004-1571	(805) 659-1231	(805) 659-9747

MARRIAGE/FAMILY COUNSELOR
CHANNING,LILLIAN G - 281227

Group Affiliation: THE NEW BEGINNINGS CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	155 GRANADA ST STE N, CAMARILLO, CA 93010	(805) 987-3162	(805) 715-4483

RICHTER,SUSAN L - 281229

Group Affiliation: THE NEW BEGINNINGS CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	155 GRANADA ST STE N, CAMARILLO, CA 93010-7725	(805) 987-3162	(805) 715-4483

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

RUKULE,ANGELA M - 281226

Group Affiliation: THE NEW BEGINNINGS CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	155 GRANADA ST STE N, CAMARILLO, CA 93010-7725	(805) 987-3162	(805) 715-4483

MATERNAL FETAL MEDICINE

ROBILIO,PETER ANDREW - 281073

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2901 N VENTURA RD STE 110, OXNARD, CA 93036-9705	(805) 981-6163	(805) 981-6189

NEPHROLOGY

CHANG,SUSAN SUJIN - 280116

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2438 PONDEROSA DR N STE C101, CAMARILLO, CA 93010-2465	(805) 383-9727	(805) 764-0176
KOREAN	OFFICE 2	1900 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 983-8049	(805) 983-8076
	OFFICE 3	2705 LOMA VISTA RD STE 101, VENTURA, CA 93003-1596	(805) 383-9727	(805) 764-0176

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CHIVANGKUL,CHONLADA - 281123

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

THAI

Office #
Street:
Phone:
Fax:

OFFICE 1

1200 W GONZALES RD STE 300, OXNARD, CA 93036-3075

(805) 983-0691

(805) 981-1643

DANA,ALI PARDIS - 280442

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

FARSI

Office #
Street:
Phone:
Fax:

OFFICE 1

1200 W GONZALES RD STE 300, OXNARD, CA 93036-3075

(805) 983-0691

(805) 983-8862

KUMAR,RAMDAS NANDA - 281305

Group Affiliation: RENAL CONSULTANTS MEDICAL

Language(s):

MALAYALAM

Office #
Street:
Phone:
Fax:

OFFICE 1

227 W JANSS RD STE 310, THOUSAND OAKS, CA 91360-1889

(805) 496-5800

(805) 834-1088

LEDESMA,STEVEN G - 280184

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

SPANISH

Office #
Street:
Phone:
Fax:

OFFICE 1

1200 W GONZALES RD STE 300, OXNARD, CA 93036-3075

(805) 983-0691

(805) 981-1643

OFFICE 2

242 E HARVARD BLVD, SANTA PAULA, CA 93060-3372

(805) 983-0691

(805) 983-8862

OFFICE 3

4567 TELEPHONE RD STE 102, VENTURA, CA 93003-5665

(805) 644-6673

(805) 644-5641

LIU,TANE - 280185

Group Affiliation: VISTA DEL MAR MEDICAL GRP

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

CHINESE	Office #	Street:	Phone:	Fax:
	OFFICE 1	1200 W GONZALES RD STE 300, OXNARD, CA 93036-3075	(805) 983-0691	(805) 983-8862
	OFFICE 2	242 E HARVARD BLVD, SANTA PAULA, CA 93060-3372	(805) 983-0691	(805) 983-8862
	OFFICE 3	4567 TELEPHONE RD STE 102, VENTURA, CA 93003-5665	(805) 644-6673	(805) 644-5641

MAPARA,HASHIM ABDUL-REHMAN - 280998

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

HINDI	Office #	Street:	Phone:	Fax:
URDU	OFFICE 1	1900 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 383-9727	(805) 983-8078

MAPARA,HASHIM ABDUL-REHMAN - 281219

Group Affiliation:

Language(s):

HINDI	Office #	Street:	Phone:	Fax:
URDU	OFFICE 1	325 ROLLING OAKS DR STE 130, THOUSAND OAKS , CA 91361	(805) 497-7775	(805) 497-7779

MORTAZAVI,KOOSHA - 280353

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

FARSI	Office #	Street:	Phone:	Fax:
	OFFICE 1	1200 W GONZALES RD STE 300, OXNARD, CA 93036-3075	(805) 983-0691	(805) 981-1643
	OFFICE 2	2412 N PONDEROSA DR STE B100, CAMARILLO, CA 93010-2380	(805) 482-5699	(805) 987-5956

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

NIRAULA,RAJENDRA P - 280485

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

NEPALI

Office #	Street:	Phone:	Fax:
OFFICE 1	1200 W GONZALES RD STE 300, OXNARD, CA 93030-3075	(805) 983-0691	(805) 983-8862

SADEGHI,HAMID - 280179

Group Affiliation: CALIFORNIA KIDNEY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2925 SYCAMORE DR UNIT 160, SIMI VALLEY, CA 93065-1210	(805) 584-0177	(805) 584-1179

SONBOL,SALAH - 281026

Group Affiliation: CALIFORNIA KIDNEY MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	227 W JANSS RD STE 100, THOUSAND OAKS, CA 91360-1854	(805) 496-1266	(805) 496-8532

VERMANI,VIMAL - 280316

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2438 PONDEROSA DR N STE C101, CAMARILLO, CA 93010-2465	(805) 383-9727	(805) 764-0176
OFFICE 2	1900 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 983-8049	(805) 983-8076

WONG,CALBERT ALVIS - 280180

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	Office #	Street:	Phone:	Fax:
CHINESE				
SPANISH	OFFICE 1	2438 PONDEROSA DR N STE C101, CAMARILLO, CA 93010-2465	(805) 383-9727	(805) 764-0176
	OFFICE 2	1900 OUTLET CENTER DR, OXNARD, CA 93036-1596	(805) 983-8049	(805) 983-8076
	OFFICE 3	2705 LOMA VISTA RD STE 101, VENTURA, CA 93003-1596	(805) 383-9727	(805) 764-0176

YAN,JIESHI - 281020

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

	Office #	Street:	Phone:	Fax:
CHINESE				
	OFFICE 1	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 582-3380

NEUROLOGY

HINER,BRADLEY COLLINS - 281112

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

LAN,ERIKA KRISTINE - 281236

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1901 OUTLET CENTER DR STE 3210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

NEZHAD,MANI K - 280559

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FARSI	Office #	Street:	Phone:	Fax:
	OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

SHEIKH,OMAIR AJMAL - 281141

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

NEUROLOGY, VASCULAR

MIREMADI,BRIAN BEHDAD - 281284

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

TAYLOR,ROBERT ANTHONY - 281168

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

NEUROPSYCHOLOGY

ROGERS,STEVEN ANDREW - 281169

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 930236	(805) 983-0425	(805) 200-4414

NEUROSURGERY

ALBERSTONE,CARY DAVID - 280196

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 250, OXNARD, CA 93030-7626	(805) 983-1700	(805) 983-7144

GOYAL,AMIT - 281235

Group Affiliation: LINK NEUROSCIENCE INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTE DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

ONI-ORISAN,AKINWUNMI ABIMBOLA - 281167

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 983-0425	(805) 200-4414

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

OBSTETRICS & GYNECOLOGY

GHIAI-FATEMI,AFSHAN - 280951

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
FARSI	OFFICE 1	2901 N VENTURA RD STE 110, OXNARD, CA 93036	(805) 981-6163	(805) 981-6189

GOULD,LINDSAY L - 281304

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
	OFFICE 1	2901 N VENTURA RD STE 110, OXNARD, CA 93036-9705	(805) 981-6163	(805) 981-6189
	OFFICE 2	2486 N PONDEROSA DR STE D205, CAMARILLO, CA 93010-2471	(805) 988-7196	(805) 988-7197

MARINE,MICHELLE A - 281249

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
	OFFICE 1	2901 N VENTURA RD STE 110, OXNARD, CA 93036	(805) 981-6163	(805) 981-6189

MIKHAIL,JENNIFER DANIELLE - 281281

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

	Office #	Street:	Phone:	Fax:
FRENCH				
ARABIC	OFFICE 1	2901 N VENTURA RD STE 110, OXNARD, CA 93036-9705	(805) 981-6163	(805) 981-6189

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OCCUPATIONAL THERAPY

CALIFORNIA HAND & PHYSICAL THERAPY - 880951 Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2001 SOLAR DR STE 150, OXNARD, CA 93036-2647	(805) 604-1924	(805) 604-0176
OFFICE 2	425 LOMBARD ST, THOUSAND OAKS, CA 91360	(805) 494-4145	(805) 494-4146

SECOND WAVE PHYSICAL THERAPY - 888920 Group Affiliation: SECOND WAVE PHYSICAL THERAPY INC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	735 W CHANNEL ISLANDS BLVD, PORT HUENEME, CA 93041	(805) 250-7505	(805) 250-7171
OFFICE 2	552 SESPE AVE, FILLMORE, CA 93015	(805) 250-7505	(805) 250-7171
OFFICE 3	801 S VICTORIA AVE, VENTURA, CA 93003	(805) 250-7505	(805) 250-7171
OFFICE 4	2367 N OXNARD BLVD, OXNARD, CA 93033	(805) 250-7505	(805) 250-7171
OFFICE 5	400 E SANTA BARBARA ST STE B, SANTA PAULA, CA 93033	(805) 250-7505	(805) 250-7171

ST JOHN'S OUTPATIENT THERAPY CENTER - 888913 Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	961 RICE AVE STE 3, OXNARD, CA 93030	(805) 988-2874	(805) 981-4452

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

**TWO TREES PHYSICAL THERAPY & WELLNESS -
880283**

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2895 LOMA VISTA RD STE H, VENTURA , CA 93003-1542	(805) 765-4773	(805) 392-9975
OFFICE 2	2100 SOLAR DR STE 204, OXNARD, CA 93003-2602	(805) 765-4773	(805) 392-9975
OFFICE 3	957 FAULKNER RD STE 105, SANTA PAULA , CA 93060-9129	(805) 765-4773	(805) 392-9975
OFFICE 4	3418 LOMA VISTA RD STE 4A, VENTURA, CA 93003-3016	(805) 765-4773	(805) 392-9975
OFFICE 5	5725 RALSTON ST STE 103, VENTURA, CA 93033-6053	(805) 765-4773	(805) 392-9975
OFFICE 6	2051 STATHAM BLVD, OXNARD, CA 93033-3901	(805) 765-4773	(805) 392-9975
OFFICE 7	4960 VERDUGO WAY, CAMARILLO, CA 93012-8632	(805) 765-4773	(805) 392-9975
OFFICE 8	24 E MAIN ST, VENTURA, CA 93001	(805) 765-4773	(805) 392-9975
OFFICE 9	2260 TAPO ST STE B117, SIMI VALLEY , CA 93063	(805) 765-4773	(805) 392-9975

OPHTHALMOLOGY

BARIL, SAVANNAH EDEN GREYROSE - 281296

Group Affiliation: MIRAMAR EYE SPECIALISTS MEDICAL GROUP, I

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
OFFICE 2	2230 LYNN RD STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name
BEKERMAN,VLADISLAV - 281191

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

RUSSIAN

Office #	Street:	Phone:	Fax:
OFFICE 1	2045 ROYAL AVE STE 234, SIMI VALLEY, CA 93065	(805) 527-1417	(805) 584-2477
OFFICE 2	771 E DAILY DRIVE STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
OFFICE 3	1220 LA VENTA DR STE 203, WESTLAKE, CA 91361	(805) 497-8100	(805) 496-0711
OFFICE 4	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 5	2230 LYNN ROAD STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

CORWIN,JOEL M - 280031

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
OFFICE 2	751 DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
OFFICE 3	2230 LYNN RD, STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 4	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615

DAVIDSON,JOHN L - 280032

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
OFFICE 2	751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
OFFICE 3	1901 SOLAR DRIVE STE 155, OXNARD, CA 93036	(805) 278-0057	(805) 278-9925

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 4	2045 ROYAL AVE STE 234, SIMI VALLEY , CA 93065	(805) 527-1417	(805) 584-2477
OFFICE 6	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 7	3003 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 8	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
OFFICE 9	3003 LOMA VISTA RD STE E, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027

FANG,JOHN P - 280394

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

MANDARIN

CHINESE

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
OFFICE 2	751 DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
OFFICE 3	1901 SOLAR DRIVE STE 155, OXNARD , CA 93036	(805) 278-0057	(805) 278-9925
OFFICE 4	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 5	3003 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 6	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615

FANT,EMILY L - 281294

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 2	957 FAULKNER RD STE 102, SANTA PAULA, CA 93060	(805) 525-1737	(805) 525-7676
OFFICE 3	3003 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HEDAYA, JOSHUA - 281274

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
	OFFICE 2	2045 ROYAL AVE STE 234, SIMI VALLEY, CA 93065	(805) 527-1417	(805) 584-2477
	OFFICE 3	751 E DAILY DR STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765

PANG, NOELENE K - 280393

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-0000	(805) 648-3085	(805) 648-7027
	OFFICE 2	771 E DAILY DRIVE STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
	OFFICE 3	3003 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
	OFFICE 4	2230 LYNN RD STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

PARTAMIAN, LEON - 281245

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
	OFFICE 2	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
	OFFICE 3	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name
ROIZENBLATT,ROBERTO - 281193

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
PORTUGUESE	OFFICE 2	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
	OFFICE 3	751 E DAILY DR, STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765
	OFFICE 4	1901 SOLAR DR STE 155, OXNARD, CA 93030	(805) 278-0057	(805) 278-9925
	OFFICE 5	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615

TROTTER,WILLIAM L - 280039

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
	OFFICE 2	1901 SOLAR DR STE 155, OXNARD, CA 93030	(805) 278-0057	(805) 278-9925
	OFFICE 3	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
	OFFICE 4	3003 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
	OFFICE 5	771 E DAILY DR, STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615

YEE,PHILINA - 281280

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
	OFFICE 2	1901 SOLAR DR, STE 155, OXNARD, CA 93030	(805) 278-0057	(805) 278-9925

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 3	957 FAULKNER RD STE 102, SANTA PAULA, CA 93060	(805) 525-1737	(805) 525-7676
OFFICE 4	3003 LOMA VISTA RD, STE A, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 5	3085 LOMA VISTA RD, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027

OPHTHALMOLOGY, RETINAL

TEEL, KARYN ELIZABETH - 281253

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
OFFICE 2	3085 LOMA VISTA RD, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 3	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
OFFICE 4	1901 SOLAR DR STE 155, OXNARD, CA 93030	(805) 278-0057	(805) 278-9925

OPTOMETRY

BOGGS, MICHAEL BENEDICT - 280029

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BRUNETTE, MARK ALLEN - 280030

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027

CHIHA, YARA - 281273

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2045 ROYAL AVE STE 234, SIMI VALLEY, CA 93065-4600	(805) 527-1417	(805) 584-2477
OFFICE 2	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 495-9630
OFFICE 3	2230 LYNN RD, STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

LANGSFORD, STEPHEN GREENE - 281155

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
OFFICE 2	2045 ROYAL AVE STE 234, SIMI VALLEY, CA 93065	(805) 527-1417	(805) 584-2477
OFFICE 3	751 E DAILY DR STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765
OFFICE 4	1901 SOLAR DR STE 155, OXNARD, CA 93030	(805) 278-0057	(805) 278-9925
OFFICE 5	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 322-1510	(805) 482-4615
OFFICE 6	2230 LYNN RD STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 7	3003 LOMA VISTA RD STE E, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name
NGUYEN,DOANH C - 280556

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

VIETNAMESE

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA RD, VENTURA, CA 93003-2937	(805) 648-3085	(805) 648-7027
OFFICE 2	751 DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765
OFFICE 3	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630
OFFICE 4	2230 LYNN RD STE 104, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

NGUYEN, TIFFANY THI - 250924

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 SOLAR DR STE 155, OXNARD, CA 93036-2644	(805) 278-0057	(805) 278-9925
OFFICE 2	751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077	(805) 987-8705	(805) 987-7765

YU, TERRY - 280983

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	957 FAULKNER ROAD STE 102, SANTA PAULA, CA 93060	(805) 525-1737	(805) 525-7676
OFFICE 2	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027
OFFICE 3	751 E DAILY DR, STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765

ORAL MAXILLOFACIAL SURGERY

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SIAVASH,HESSAM S - 280468

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
FARSI				
FRENCH	OFFICE 1	5200 TELEGRAPH RD STE B, VENTURA, CA 93003-1557	(805) 648-5121	(805) 648-3670

ZARRINKELK,HOUMAN - 250165

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
PERSIAN				
	OFFICE 1	5200 TELEGRAPH RD STE B, VENTURA, CA 93003-4185	(805) 648-5121	(805) 648-3670

ORTHOPEDIC SURGERY

BURGE,JOHN ROSS - 281136

Group Affiliation: OCEAN ORTHOPEDIC MEDICAL GRP

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	168 N BRENT ST STE 505, VENTURA, CA 93003-2840	(805) 648-3902	(805) 648-4014
	OFFICE 2	4542 LAS POSAS ROAD STE E, CAMARILLO, CA 93010	(805) 702-2510	(805) 586-4059

CALDERONE,ROCCO RICHARD - 280497

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2486 PONDEROSA DR N STE D114, CAMARILLO, CA 93010-2469	(805) 484-2783	(805) 383-0674

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DEITEL,KEVIN M - 281101

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747
OFFICE 2	2230 LYNN RD STE 220, THOUSAND OAKS, CA 91360-1985	(805) 379-4574	(805) 379-4324

GHILARDUCCI,MARK JOHN - 281102

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747
OFFICE 2	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3165	(805) 641-6415	(805) 641-6424

GLUCK,JOSHUA SAUL - 281103

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3101	(805) 641-6415	(805) 641-6424
OFFICE 2	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747

JEFFERS,ANDREW W - 280484

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXANRD, CA 93030	(805) 981-1788	(805) 981-1774
OFFICE 2	3661 E LAS POSAS RD STE G162, CAMARILLO, CA 93010-1481	(805) 981-1788	(805) 981-1774

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MOTAMEDI,ALI R - 281105

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	3901 LAS POSAS RD STE 4, CAMARILLO, CA 93010-1502	(805) 585-5166	(805) 383-1786

PYLE,CASEY WAYNE - 281135

Group Affiliation: OCEAN ORTHOPEDIC MEDICAL GRP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 505, VENTURA, CA 93003-2840	(805) 648-3902	(805) 648-4014
OFFICE 2	4542 LAS POSAS ROAD STE E, CAMARILLO, CA 93010	(805) 702-2510	(805) 586-4059

QUINN,JOHN R - 281130

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747

SHARAREH,BEHNAM - 281209

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP

Language(s):

FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747
OFFICE 2	1145 LINDERO CANYON RD STE C1, WESTLAKE VILLAGE, CA 91362	(818) 865-9800	(818) 330-5332
OFFICE 3	3901 LAS POSAS RD STE 4, CAMARILLO, CA 93010	(805) 585-5166	(805) 380-1177
OFFICE 4	3525 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 641-6415	(805) 641-6424

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 5	137 E THOUSAND OAKS BLVD, THOUSAND OAKS, CA 91360	(805) 379-4574	(805) 379-4324
OFFICE 6	2525 ERRINGER RD, SIMI VALLEY, CA 93065	(805) 527-1404	(805) 527-5246

SUZUKI,KENTARO PRESSLY - 281109

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3101	(805) 641-6415	(805) 641-6424

SWEET,STEPHAN J - 280490

Group Affiliation: OCEAN ORTHOPEDIC MEDICAL GRP

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	168 N BRENT ST STE 505, VENTURA, CA 93003-2813	(805) 648-3902	(805) 648-4014
	OFFICE 2	4542 LAS POSAS RD STE E, CAMARILLO , CA 93010	(805) 702-2510	(805) 586-4059

ZEMAN,CRAIG ALAN - 281110

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747

ORTHOPEDIC SURGERY, HAND
GLUCK,JOSHUA SAUL - 281103

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
---------	-----------------	----------------	---------------	-------------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3101	(805) 641-6415	(805) 641-6424
OFFICE 2	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747

VOHRA,SAHIL - 281206

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 505, VENTURA, CA 93003	(805) 648-3902	(805) 648-4014

ORTHOPEDIC SURGERY, SPINE
AZIZ,HOSSEIN M - 281302

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3525 LOMA VISTA RD STE A, VENTURA, CA 93003	(805) 641-6415	(805) 641-6424
OFFICE 2	137 E THOUSAND OAKS BLVD, THOUSAND OAKS, CA 91360	(805) 379-4574	(805) 379-4324
OFFICE 3	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747
OFFICE 4	2525 ERRINGER RD, SIMI VALLEY, CA 93065	(805) 527-1404	(805) 527-5246
OFFICE 5	3901 LAS POSAS RD STE 4, CAMARILLO, CA 93010	(805) 585-5166	(805) 380-1177

OTOLARYNGOLOGY
CHAN,STEPHEN ALEXANDER - 281205

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030	(805) 983-0395	(805) 983-0463
OFFICE 2	2876 N SYCAMORE DR STE 303, SIMI VALLEY, CA 93065	(805) 527-7320	(805) 545-7123

GEFFEN,BRENT J - 281239

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2438 PONDEROSA DR UNIT C110, CAMARILLO, CA 93010	(805) 484-5929	(805) 484-9044
OFFICE 2	299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360	(805) 379-9646	
OFFICE 3	2876 N SYCAMORE DR STE 303, SIMI VALLEY, CA 93065	(805) 527-7320	(805) 545-7123

KHO,TRICIA TRICIA - 280471

Group Affiliation: BASS MEDICAL GROUP

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030-3790	(805) 983-0395	(805) 983-0463
OFFICE 2	2876 N SYCAMORE DR STE 303, SIMI VALLEY, CA 93065-1550	(805) 527-7320	(805) 527-2426

LEE,JAESUNG - 280472

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2438 PONDEROSA DR N STE C110, CAMARILLO, CA 93010-2466	(805) 484-5929	(805) 484-9044
OFFICE 2	301 S MOORPARK RD, THOUSAND OAKS, CA 91361-1008	(805) 379-9646	(805) 379-0611
OFFICE 3	299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360	(805) 379-9646	

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LEE,JOSEPH PAUL - 280984

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030-7629	(805) 983-0395	(805) 983-0463
OFFICE 2	299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360	(805) 379-9646	

REGHUNATHAN,SARANYA - 281303

Group Affiliation: ENT SPECIALISTS & SURGEONS OF

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3687 LAS POSAS RD BLDG H STE 187, CAMARILLO, CA 93010	(805) 309-0818	(805) 303-3915

VAIDYA,ABHAY M - 280473

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2438 PONDEROSA DR N STE C110, CAMARILLO, CA 93010-2466	(805) 484-5929	(805) 484-9044
OFFICE 2	301 S MOORPARK RD, THOUSAND OAKS, CA 91361-1008	(805) 379-9646	(805) 379-0611
OFFICE 3	299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360	(805) 379-9646	

VOORMAN,GARY S - 280474

Group Affiliation: BASS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030-3790	(805) 983-0395	(805) 983-0463
OFFICE 2	301 S MOORPARK RD, THOUSAND OAKS, CA 91361-1008	(805) 379-9646	(805) 379-0611

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 3 299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360 (805) 379-9646

WAREHAM,MARTIN E - 280476

Group Affiliation: BASS MEDICAL GROUP

Language(s):

GERMAN

Office #	Street:	Phone:	Fax:
OFFICE 1	2876 N SYCAMORE DR STE 303, SIMI VALLEY, CA 93065-1550	(805) 527-7320	(805) 527-2426
OFFICE 2	299 W HILLCREST DR STE 100, THOUSAND OAKS, CA 91360	(805) 379-9646	

PAIN MANAGEMENT
BUCHANAN,PATRICK D - 280566

Group Affiliation: SPANISH HILLS PAIN SPECIALISTS

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010-6073	(805) 484-8558	(805) 484-3099

FREY,ROBERT D - 280572

Group Affiliation: PACIFIC PAIN MANAGEMENT

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 204, VENTURA, CA 93003-6192	(805) 644-4930	(805) 654-1284

KATOUZIAN,ALIREZA - 281215

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010	(805) 484-8558	(804) 843-3099

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KIKER,DALE GREGORY - 280428

Group Affiliation: SPANISH HILLS PAIN SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010-6073	(805) 484-8558	(805) 512-8563

NGUYEN,PHILLIP THAI-HOA - 281178

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 250, VENTURA, CA 93003-6521	(805) 351-0745	(805) 288-6744
OFFICE 2	625 N A ST, OXNARD, CA 93030-4907	(805) 351-0745	(805) 288-6744

TOURJE,CAITLIN DIANE - 281213

Group Affiliation: SPANISH HILLS PAIN SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010-6073	(805) 484-8558	(805) 512-8563

PEDIATRIC CARDIOLOGY
HARAKE,BILAL - 280214

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2421 BATH ST STE B, SANTA BARBARA, CA 93105-4324	(805) 569-3146	(805) 569-0786
OFFICE 2	801 S VICTORIA AVE STE 200, VENTURA, CA 93003-5492	(805) 569-3146	(805) 569-0786

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PEDIATRIC CARDIOLOGY MED ASSOC SO CA - 281308

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	555 MARIN ST STE 220, THOUSAND OAKS, CA 91360-4230	(805) 497-7214	(805) 497-0864

PEDIATRIC OPHTHALMOLOGY

DE CASTRO-ABEGER,ALEXANDER HUGO - 281244

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2230 LYNN RD STE 104, THOUSAND OAKS, CA 91360-1959	(805) 495-0458	(805) 494-9630
OFFICE 2	751 DAILY DR STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765
OFFICE 3	771 E DAILY DR STE 245, CAMARILLO, CA 93010	(805) 332-1510	(805) 482-4615
OFFICE 4	3003 LOMA VISTA RD STE E, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027

PELVIC FLOOR THERAPY

CALIFORNIA HAND & PHYSICAL THERAPY - 880951

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2001 SOLAR DR STE 150, OXNARD, CA 93036-2647	(805) 604-1924	(805) 604-0176
OFFICE 2	425 LOMBARD ST, THOUSAND OAKS, CA 91360	(805) 494-4145	(805) 494-4146

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PHYSICAL MEDICINE & REHAB

BLOOM, MATTHEW LEE - 280992

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 250, VENTURA, CA 93003-6521	(805) 351-0745	(805) 288-6744
OFFICE 2	625 N A ST, OXNARD, CA 93030-4904	(805) 351-0745	(805) 288-6744

KIA, FARID - 280986

Group Affiliation: SPANISH HILLS PAIN SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010-6073	(805) 484-8558	(805) 484-3099

NGUYEN, PHILLIP THAI-HOA - 281178

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 250, VENTURA, CA 93003-6521	(805) 351-0745	(805) 288-6744
OFFICE 2	625 N A ST, OXNARD, CA 93030-4907	(805) 351-0745	(805) 288-6744

PIERSON, RAYMOND SOARES - 280321

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 278-0212	(805) 988-1454
OFFICE 2	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3101	(805) 278-0212	(805) 988-1454

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WEST,JESSICA E - 281315

Group Affiliation: MATTHEW L BLOOM DO

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 250, VENTURA, CA 93003	(805) 351-0745	(805) 288-1454
OFFICE 2	625 N A ST STE 300, OXNARD, CA 93030-4907	(805) 351-0745	(805) 288-6744

PHYSICAL THERAPY

CALIFORNIA HAND & PHYSICAL THERAPY - 880951 Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2001 SOLAR DR STE 150, OXNARD, CA 93036-2647	(805) 604-1924	(805) 604-0176
OFFICE 2	425 LOMBARD ST, THOUSAND OAKS, CA 91360	(805) 494-4145	(805) 494-4146

MDRS SPINE & SPORT - 880281

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	450 ROSEWOOD AVE STE 105, CAMARILLO, CA 93010-5914	(805) 389-4781	(805) 389-4725
OFFICE 2	1651 E CHANNEL ISLAND BLVD STE 2, OXNARD, CA 93033	(805) 240-3373	(805) 240-3375
OFFICE 3	101 HODENCAMP RD STE 102, THOUSAND OAKS, CA 91360-5836	(805) 496-9944	(805) 496-9945

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SECOND WAVE PHYSICAL THERAPY - 888920

Group Affiliation: SECOND WAVE PHYSICAL THERAPY INC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	735 W CHANNEL ISLANDS BLVD, PORT HUENEME, CA 93041	(805) 250-7505	(805) 250-7171
OFFICE 2	552 SESPE AVE, FILLMORE, CA 93015	(805) 250-7505	(805) 250-7171
OFFICE 3	801 S VICTORIA AVE, VENTURA, CA 93003	(805) 250-7505	(805) 250-7171
OFFICE 4	2367 N OXNARD BLVD, OXNARD, CA 93033	(805) 250-7505	(805) 250-7171
OFFICE 5	400 E SANTA BARBARA ST STE B, SANTA PAULA, CA 93033	(805) 250-7505	(805) 250-7171

**ST JOHN'S OUTPATIENT THERAPY CENTER -
888913**

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	961 RICE AVE STE 3, OXNARD, CA 93030	(805) 988-2874	(805) 981-4452

SUNRISE PHYSICAL THERAPY SERVICES - 880282

Group Affiliation: SUNRISE PHYSICAL THERAPY SERVICES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	705 N OXNARD BLVD STE 107, OXNARD, CA 93030-4314	(805) 983-0811	(805) 983-1481

**TWO TREES PHYSICAL THERAPY & WELLNESS -
880283**

Group Affiliation:

Language(s):

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	2895 LOMA VISTA RD STE H, VENTURA , CA 93003-1542	(805) 765-4773	(805) 392-9975
OFFICE 2	2100 SOLAR DR STE 204, OXNARD, CA 93003-2602	(805) 765-4773	(805) 392-9975
OFFICE 3	957 FAULKNER RD STE 105, SANTA PAULA , CA 93060-9129	(805) 765-4773	(805) 392-9975
OFFICE 4	3418 LOMA VISTA RD STE 4A, VENTURA, CA 93003-3016	(805) 765-4773	(805) 392-9975
OFFICE 5	5725 RALSTON ST STE 103, VENTURA, CA 93033-6053	(805) 765-4773	(805) 392-9975
OFFICE 6	2051 STATHAM BLVD, OXNARD, CA 93033-3901	(805) 765-4773	(805) 392-9975
OFFICE 7	4960 VERDUGO WAY, CAMARILLO, CA 93012-8632	(805) 765-4773	(805) 392-9975
OFFICE 8	24 E MAIN ST, VENTURA, CA 93001	(805) 765-4773	(805) 392-9975
OFFICE 9	2260 TAPO ST STE B117, SIMI VALLEY , CA 93063	(805) 765-4773	(805) 392-9975

PLASTIC AND RECONST SUR

GORODISKY,YULY - 281234

Group Affiliation: WEST COAST PLASTIC SURGERY CTR

Language(s):

RUSSIAN

Office #	Street:	Phone:	Fax:
OFFICE 1	2831 N VENTURA RD, OXNARD, CA 93036	(805) 983-1999	(805) 485-9490

KOLDER,DANIEL GENE - 281233

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2460 N PONDEROSA DR STE A117, CAMARILLO, CA 93010-2468	(805) 484-2855	(805) 389-1245

PODIATRY

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name
EMIRZIAN,ANA ANAHIT - 281268

Group Affiliation: COASTAL FOOT AND ANKLE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036	(805) 983-0222	(805) 604-9872

LANGROUDI,ANDREW REZA - 281288

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2100 SOLAR DR STE 102, OXNARD, CA 93036	(805) 988-3338	(805) 830-1537
OFFICE 2	250 MILLS RD STE 101, VENTURA, CA 93003-3453	(805) 702-7028	(805) 830-1537
OFFICE 3	3180 WILLOW LN STE 108, THOUSAND OAKS, CA 91361	(805) 864-5260	(805) 830-1537
OFFICE 4	3901 LOS POSAS RD STE 204, CAMARILLO, CA 93010	(805) 988-3338	(805) 830-1537

NGUYEN,ANH MY - 281138

Group Affiliation: COASTAL FOOT AND ANKLE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036	(805) 983-0222	(805) 604-9872
OFFICE 2	134 N 10TH ST STE A, SANTA PAULA, CA 93060-2803	(805) 933-1313	(805) 933-9866

PEARSON,SEAN M - 281231

Group Affiliation: COASTAL FOOT AND ANKLE GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036-0729	(805) 983-0222	(805) 604-9872

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROBERG,DYLAN MAYTUM - 281163

Group Affiliation: COASTAL FOOT AND ANKLE GROUP

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036	(805) 983-0222	(805) 604-9872
	OFFICE 2	3160 TELEGRAPH RD STE 207, VENTURA, CA 93003	(805) 485-6708	(805) 278-2299

ROBERG,SCOT LINDSEY - 280955

Group Affiliation: COASTAL FOOT AND ANKLE GROUP

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036-9004	(805) 983-0222	(805) 604-9872
	OFFICE 2	3160 TELEGRAPH RD STE 207, VENTURA, CA 93003-3256	(805) 485-6708	(805) 278-2299

STUHR,FRANK - 280435

Group Affiliation: FRANK STUHR DPM

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2629 LOMA VISTA RD, VENTURA, CA 93003	(805) 643-8572	(805) 643-8667

VINES,STEVEN M - 280564

Group Affiliation: COASTAL FOOT AND ANKLE GROUP

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036-0729	(805) 983-0222	(805) 604-9872

WANG,OLIVER T - 281243

Group Affiliation:

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

MANDARIN

SPANISH

Office #

OFFICE 1

Street:

250 MILLS RD STE 101, VENTURA, CA 93003

Phone:

(805) 702-7028

Fax:

(805) 830-1537

PSYCHIATRY

PARK,TIMOTHY DANIEL - 281179

Group Affiliation:

Language(s):

Office #

OFFICE 1

Street:

2969 LOMA VISTA RD, VENTURA, CA 93003

Phone:

(805) 504-6814

Fax:

(805) 667-8920

THURSTON,RONALD - 280226

Group Affiliation:

Language(s):

Office #

OFFICE 1

Street:

3311 OLD CONEJO RD, NEWBURY PARK, CA 91320

Phone:

(805) 388-3337

Fax:

(805) 388-1155

PULMONARY DISEASES

ARFAEI,AMIR - 280325

 Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED
GR

Language(s):

FARSI

Office #

OFFICE 1

Street:

168 N BRENT ST STE 503, VENTURA, CA 93003-2824

Phone:

(805) 653-6371

Fax:

(805) 653-7242

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BERNSTEIN,ROBERT J - 280256

Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 503, VENTURA, CA 93003-2824	(805) 653-6371	(805) 653-7242

BHATIA,RAJAN - 280448

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CTR DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025
OFFICE 2	4000 CALLE TECATE STE 105, CAMARILLO, CA 93012-5283	(805) 485-2400	(805) 485-3025
OFFICE 3	2851 N VENTURA RD, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025

DE VERA,JEROME - 281278

Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 406, VENTURA, CA 93003-2824	(805) 653-6371	(805) 653-7242

GIL,RYAN MATTHEW - 281266

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036	(805) 485-2400	(805) 485-3025

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LAMEE, JONATHAN SCOTT - 281158

Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 503, VENTURA, CA 93003-2824	(805) 653-6371	(805) 653-7242

MAEHARA, DARREN RIKITARO - 280987

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025
OFFICE 2	4000 CALLE TECATE STE 105, CAMARILLO, CA 93012-5283	(805) 485-2400	(805) 485-3025

NELSON, GERGANA TODOROVA - 280988

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025
OFFICE 2	4000 CALLE TECATE STE 105, CAMARILLO, CA 93012-5283	(805) 485-2400	(805) 485-3025

PELEGRIN, GORDON P - 281203

Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 503, VENTURA, CA 93003	(805) 653-6371	(805) 653-7242

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SWEET,MADISON - 281277

 Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED
GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 406, VENTURA, CA 93003	(805) 653-6371	(805) 653-7242

TAICH,ZACHARY JULIAN - 281242

Group Affiliation: WEST COAST PULMONARY PHYSICIANS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025

WEYMER,ANDREW R - 250917

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025
OFFICE 2	4000 CALLE TECATE STE 105, CAMARILLO, CA 93012-5283	(805) 485-2400	(805) 485-3025

RADIATION ONCOLOGY
MONTES,HENRY Z - 280289

 Group Affiliation: VENTURA COUNTY RADIATION ONCOLOGY MED
GR

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 120, OXNARD, CA 93030-7301	(805) 988-2657	(805) 981-4456

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 5301 MISSION OAKS BLVD STE A, CAMARILLO, CA 93012-5423 (805) 484-1919 (805) 987-3977

O'CONNOR,TIMOTHY A - 280288

Group Affiliation: VENTURA COUNTY RADIATION ONCOLOGY MED GR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N. ROSE AVE STE 120, OXNARD, CA 93030-7631	(805) 988-2657	(805) 981-4456
OFFICE 2	5301 MISSION OAKS BLVD STE A, CAMARILLO, CA 93012-5423	(805) 484-1919	(805) 987-3977

RADIOLOGY

ROLLING OAKS IMAGING CENTER - 880253

Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	415 ROLLING OAKS DR STE 125, THOUSAND OAKS, CA 91361-1038	(805) 357-0067	(805) 778-1116
OFFICE 2	415 ROLLING OAKS DR STE 160, THOUSAND OAKS, CA 91361-1038	(805) 778-1513	(805) 778-1116

ROLLING OAKS RADIOLOGY - ST. JOHN'S - 888814

Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 110, OXNARD, CA 93030-7630	(805) 357-0067	(805) 778-1116

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROLLING OAKS RADIOLOGY CAMARILLO - 880016

Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3801 LAS POSAS RD STE 111, CAMARILLO, CA 93010-1505	(805) 357-0067	(805) 778-1116

ROLLING OAKS RADIOLOGY OXNARD - 880015

Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 N RICE AVE STE 140 & 155, OXNARD, CA 93030-7912	(805) 357-0067	(805) 778-1116

ROLLING OAKS RADIOLOGY OXNARD (GONZALES) - 888930

Group Affiliation: ROLLING OAKS RADIOLOGY-OXNARD (GONZALES)

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2151 EAST GONZALES RD STE 101, OXNARD, CA 93036	(805) 988-0616	(805) 604-1722

ROLLING OAKS RADIOLOGY OXNARD (OUTLET CE - 888937

Group Affiliation: ROLLING OAKS RADIOLOGY-OXNARD(OUTLET CE)

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 120 & 250, OXNARD, CA 93036-0664	(805) 357-0067	(805) 778-1116

ROLLING OAKS RADIOLOGY OXNARD (SOLAR) - 888928

Group Affiliation: ROLLING OAKS RADIOLOGY OXNARD (SOLAR)

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2001 NORTH SOLAR DR STE 135, OXNARD, CA 93036	(805) 988-0616	(805) 604-1722

ROLLING OAKS RADIOLOGY SIMI VALLEY - 888918 Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2950 N SYCAMORE DR STE 102, SIMI VALLEY, CA 93065-1210	(805) 357-0067	(805) 778-1116

ROLLING OAKS RADIOLOGY VENTURA - 880014 Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	4516 MARKET ST, VENTURA, CA 93003-8087	(805) 357-0067	(805) 778-1116

ROLLING OAKS RADIOLOGY VENTURA (LOMA VIS - 888927) Group Affiliation: ROLLING OAKS RADIOLOGY VENTURA

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2705 LOMA VISTA RD STE 100, VENTURA, CA 93003	(805) 988-0616	(805) 604-1722

ROLLING OAKS RADIOLOGY VENTURA CANCER CE - 888929 Group Affiliation: ROLLING OAKS RADIOLOGY VENTURA CANCER CE

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1	2900 LOMA VISTA RD STE 101, VENTURA, CA 93003	(805) 988-0616	(805) 604-1722
----------	---	----------------	----------------

THOUSAND OAKS MDI - 880017

Group Affiliation: BEVERLY RADIOLOGY MEDICAL GRP / RADNET

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 LOMBARD ST, THOUSAND OAKS, CA 91360-7484	(805) 357-0067	(805) 778-1116
OFFICE 2	110 JENSEN CT STE 1A, THOUSAND OAKS, CA 91360-5808	(805) 370-8111	(805) 370-8118

REGISTERED DIETICIAN
BENSON,JENNIFER - 880908

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010	(805) 738-5700	(805) 738-5701

BICKFORD,JESSICA SPRINKLE - 880973

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2605 LOMA VISTA RD, VENTURA, CA 93003-1548	(805) 826-1381	(805) 648-6706

CARDENAS,ERIKA - 888936

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6376	(805) 738-5700	(805) 738-5701

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CREGUT,KELSEA JOHANNA - 880972

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6338	(805) 738-5700	(805) 738-5701

FOWLER,BRITTANY - 880907

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6376	(805) 738-5700	(805) 738-5701

HOFFMAN,ELIZABETH - 888931

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6376	(805) 738-5700	(805) 738-5701

NAZZARO,ALEXIS - 888917

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010	(805) 738-5700	(805) 738-5701

RIETKERK,LINNEA - 888923

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6376 (805) 738-5700 (805) 738-5701

SAROKA,HANNAH - 888926

Group Affiliation: 360 NUTRITION CONSULTING

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	400 MOBIL AVE STE D9, CAMARILLO, CA 93010-6376	(805) 738-5700	(805) 738-5701

REPRODUCTIVE ENDO/INFERTILITY

BUYALOS,RICHARD P - 280233

Group Affiliation: FERTILITY & SURGICAL ASSOCIATES OF SO CA

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	225 W HILLCREST DR STE 201, THOUSAND OAKS, CA 91360	(805) 778-1122	(805) 778-1199
OFFICE 2	2428 SANTA MONICA BLVD STE 301, SANTA MONICA, CA 90404	(310) 453-8500	(310) 453-8559
OFFICE 3	5400 BALBOA BLVD STE 312, ENCINO, CA 91316	(818) 461-1610	(818) 461-1917

SHAMONKI,MOUSA - 281006

Group Affiliation: FERTILITY & SURGICAL ASSOCIATES OF SO CA

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5400 BALBOA BLVD STE 312, ENCINO, CA 91316	(818) 461-1610	(818) 461-1917
OFFICE 2	225 W HILLCREST DR STE 201, THOUSAND OAKS, CA 91360	(805) 778-1122	(805) 778-1199
OFFICE 3	2428 SANTA MONICA BLVD STE 301, SANTA MONICA, CA 90404	(310) 453-8500	(310) 453-8559

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

RHEUMATOLOGY

ROMANO, THOMAS J - 281307

Group Affiliation: CALIFORNIA RHEUMATOLOGY INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1500 PALMA DR STE 187, VENTURA, CA 93003	(888) 367-1850	(805) 222-0323
OFFICE 2	1300 N VENTURA RD STE 2, OXNARD, CA 93030	(888) 367-1850	(805) 222-0323
OFFICE 3	145 PARK LN STE 200, MOORPARK, CA 93021	(888) 367-1850	(805) 222-0323
OFFICE 4	3095 OLD CONEJO RD STE 200, NEWBURY PARK, CA 91320	(888) 367-1850	(805) 222-0323

SHEPARD, ANGELICA N - 281297

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	5800 SANTA ROSA RD STE 149, CAMARILLO, CA 93012	(805) 465-8900	(805) 465-8920
OFFICE 2	2361 E VINEYARD AVE, OXNARD, CA 93036	(805) 981-3770	(805) 981-9674

SIEVERS, TAMMY P - 281298

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	120 N ASHWOOD AVE, VENTURA, CA 93003	(805) 658-5800	(805) 948-1928
OFFICE 2	422 ARNEILL RD STE B, CAMARILLO, CA 93010	(805) 482-1282	(805) 383-4511

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SPIEGEL,TIMOTHY M - 280236

Group Affiliation:

Language(s):

GERMAN	Office #	Street:	Phone:	Fax:
	OFFICE 1	1919 STATE ST STE 306, SANTA BARBARA, CA 93101-8448	(805) 682-5752	(805) 682-8434

SLEEP STUDIES

PREMIER DIAGNOSTICS - 880084

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1851 HOLSTER WALK STE 210, OXNARD, CA 93036-2626	(805) 485-2633	(805) 485-6650

SUNSET SLEEP DISORDER CENTER OF OXNARD - 880278

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 582-0999	(805) 582-0919

SPEECH THERAPY

SECOND WAVE PHYSICAL THERAPY - 888920

Group Affiliation: SECOND WAVE PHYSICAL THERAPY INC

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	735 W CHANNEL ISLANDS BLVD, PORT HUENEME, CA 93041	(805) 250-7505	(805) 250-7171

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2	552 SESPE AVE, FILLMORE, CA 93015	(805) 250-7505	(805) 250-7171
OFFICE 3	801 S VICTORIA AVE, VENTURA, CA 93003	(805) 250-7505	(805) 250-7171
OFFICE 4	2367 N OXNARD BLVD, OXNARD, CA 93033	(805) 250-7505	(805) 250-7171
OFFICE 5	400 E SANTA BARBARA ST STE B, SANTA PAULA, CA 93033	(805) 250-7505	(805) 250-7171

**ST JOHN'S OUTPATIENT THERAPY CENTER -
888913**

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	961 RICE AVE STE 3, OXNARD, CA 93030	(805) 988-2874	(805) 981-4452

**TWO TREES PHYSICAL THERAPY & WELLNESS -
880283**

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2895 LOMA VISTA RD STE H, VENTURA , CA 93003-1542	(805) 765-4773	(805) 392-9975
OFFICE 2	2100 SOLAR DR STE 204, OXNARD, CA 93003-2602	(805) 765-4773	(805) 392-9975
OFFICE 3	957 FAULKNER RD STE 105, SANTA PAULA , CA 93060-9129	(805) 765-4773	(805) 392-9975
OFFICE 4	3418 LOMA VISTA RD STE 4A, VENTURA, CA 93003-3016	(805) 765-4773	(805) 392-9975
OFFICE 5	5725 RALSTON ST STE 103, VENTURA, CA 93033-6053	(805) 765-4773	(805) 392-9975
OFFICE 6	2051 STATHAM BLVD, OXNARD, CA 93033-3901	(805) 765-4773	(805) 392-9975
OFFICE 7	4960 VERDUGO WAY, CAMARILLO, CA 93012-8632	(805) 765-4773	(805) 392-9975
OFFICE 8	24 E MAIN ST, VENTURA, CA 93001	(805) 765-4773	(805) 392-9975
OFFICE 9	2260 TAPO ST STE B117, SIMI VALLEY , CA 93063	(805) 765-4773	(805) 392-9975

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

SURGICAL ONCOLOGY

STEEN,SHAWN T - 280569

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 641-4416

THORACIC SURGERY

ATIYA,AZMI WASEF - 281262

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030-7301	(818) 993-4471	(818) 993-7565

BUSHNELL,LAMAR J - 281148

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 652-6201	(805) 641-4416

BUSHNELL,LAMAR J - 250120

Group Affiliation: CALIF CARDIOVASCULAR & THORACIC SURGEONS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 508, VENTURA, CA 93003-2840	(805) 643-2375	(805) 643-3511

DHMNV - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

HARO,GREG J - 281263

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030-7301	(818) 993-4471	(818) 993-7565

KOTOYAN,RAFFI A - 281261

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(818) 993-7565

SOLTERO,MICHAEL J - 281260

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(805) 993-7565

VELA,RYAN J - 281314

Group Affiliation: CALIFORNIA CARDIOVASCULAR AND THORACIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 508, VENTURA, CA 93003	(805) 643-2375	(805) 643-3511

WAN,JENNIFER J - 281147

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651 (805) 652-6201 (805) 641-4416

WAN,JENNIFER J - 281083

Group Affiliation: CALIF CARDIOVASCULAR & THORACIC SURGEONS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 508, VENTURA, CA 93003-2840	(805) 643-2375	(805) 643-3511

YASUDA,RODERICK K - 281259

Group Affiliation: SOLTERO & YASUDA ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 135, OXNARD, CA 93030	(818) 993-4471	(818) 993-7565

TRAUMATIC SURGERY

VAN SANT,LAUREN - 281264

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 652-6000	(805) 648-9561

URGENT CARE

CFH SANTA PAULA URGENT CARE - 880006

Group Affiliation: CMH CENTERS FOR FAMILY HEALTH

Language(s):

Office #	Street:	Phone:	Fax:
----------	---------	--------	------

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	OFFICE 1	242 E HARVARD BLVD STE C M-SU 9AM-8PM, SANTA PAULA, CA 93060-3372	(805) 525-9595	(805) 525-6667
--	----------	---	----------------	----------------

SOLAR URGENT CARE - 888911

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2100 SOLAR DR STE 100, OXNARD, CA 93036	(805) 988-9000	(805) 988-9089

VENTURA URGENT CARE CENTER - 888912

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	5725 RALSTON ST STE 101, VENTURA, CA 93003	(805) 658-2273	(805) 639-9446

UROLOGY

ABOSEIF,SHERIF RAOUF GUIND - 280496

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
ARABIC	OFFICE 1	1901 HOLSER WALK STE 310, OXNARD, CA 93036-2633	(805) 973-5902	(805) 973-5905
	OFFICE 2	2486 N PONDEROSA D BLDG D STE 202, CAMARILLO, CA 93010	(805) 973-5902	(805) 973-5905

BEAGHLER (CMH),MARC A - 250907

Group Affiliation: SAN BUENAVENTURA UROLOGY CENTER

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2705 LOMA VISTA RD STE 206, VENTURA, CA 93003-1584	(805) 643-4067	(805) 648-5612

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KHODDAMI (CMH),SEYED M - 280399

Group Affiliation: SAN BUENAVENTURA UROLOGY CENTER

Language(s):

PERSIAN	Office #	Street:	Phone:	Fax:
FARSI	OFFICE 1	2705 LOMA VISTA RD STE 206, VENTURA, CA 93003-1584	(805) 643-4067	(805) 648-5612

LEE,KEVIN K - 281175

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 HOLSER WALK STE 310, OXNARD, CA 93036	(805) 973-5902	(805) 973-5905

POON,MICHAEL W - 281139

Group Affiliation: SAN BUENAVENTURA UROLOGY CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2705 LOMA VISTA RD STE 206, VENTURA, CA 93003-1584	(805) 643-4067	(805) 648-5612
OFFICE 2	5800 SANTA ROSA RD STE 149, CAMARILLO, CA 93012-7061	(805) 465-8900	(805) 465-8920

WONG,KELVIN S - 280505

Group Affiliation:

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	1901 HOLSER WALK STE 310, OXNARD, CA 93036-2633	(805) 973-5902	(805) 973-5905

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

VASCULAR SURGERY

ALBAUGH,GREGORY KEITH - 280971

Group Affiliation: COASTAL VASCULAR CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2841 N VENTURA RD STE 200, OXNARD, CA 93036-2213	(805) 983-6233	(805) 983-2459

BABER JR,JOHN TYLER - 281113

Group Affiliation: COASTAL VASCULAR CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2841 N VENTURA RD STE 200, OXNARD, CA 93036-2213	(805) 983-6233	(805) 983-2459

BLITZER,DAVID NATHANIEL - 281247

Group Affiliation: PACIFIC CARDIOVASCULAR & VEIN INSTITUTE

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2000 OUTLET CTR DR STE 225, OXNARD, CA 93036-0605	(805) 643-3330	(805) 643-3331
OFFICE 2	100 N BRENT ST STE 201, VENTURA, CA 93003	(805) 643-3330	(805) 643-3331
OFFICE 3	3901 LAS POSAS RD STE 17, CAMARILLO, CA 93010	(805) 643-3330	(805) 643-3331

GUO,SYDNEY SHUO-YI - 281187

Group Affiliation:

Language(s):

MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	2051 SOLAR DR STE 150, OXNARD, CA 93035	(805) 456-8890	(805) 456-8894
OFFICE 2	2605 LOMA VISTA RD, VENTURA, CA 93003	(805) 456-8890	(805) 456-8894

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KONG,LI SHENG - 280314

Group Affiliation: PACIFIC CARDIOVASCULAR & VEIN INSTITUTE

Language(s):

MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	100 N BRENT ST STE 201, VENTURA, CA 93003-2836	(805) 643-3330	(805) 643-3331
OFFICE 2	2000 OUTLET CENTER DR STE 225, OXNARD, CA 93036-0612	(805) 643-3330	(805) 643-3331
OFFICE 3	3901 LAS POSAS RD STE 17, CAMARILLO, CA 93010	(805) 643-3330	(805) 643-3331

MATHENY,HEATHER ELIZABETH - 281311

Group Affiliation: COASTAL VASCULAR CENTER PC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2841 N VENTURA RD STE 200, OXNARD, CA 93036	(805) 983-6233	(805) 983-2459
OFFICE 2	1189 SWALLOW LANE STE 201, SIMI VALLEY, CA 93065	(805) 416-8585	(805) 484-7788
OFFICE 3	3901 LAS POSAS RD, CAMARILLO, CA 93010	(805) 484-6900	(805) 484-7788
OFFICE 4	77 ROLLING OAKS DR STE 202, THOUSAND OAKS, CA 91361-1018		

QUIRK,KAREN KIM - 280483

Group Affiliation: COASTAL VASCULAR CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2841 N VENTURA RD STE 200, OXNARD, CA 93036-2213	(805) 983-6233	(805) 983-2459

SKILLERN,C SHAWN - 281196

Group Affiliation: PACIFIC CARDIOVASCULAR & VEIN INSTITUTE

Language(s):

DHMNV - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	100 N BRENT ST STE 201, VENTURA, CA 93003-2822	(805) 643-3330	(805) 643-3331
OFFICE 2	2000 OUTLET CENTER DR STE 225, CAMARILLO, CA 93003	(805) 643-3330	(805) 643-3331
OFFICE 3	3901 LAS POSAS RD STE 17, CAMARILLO, CA 93010	(805) 643-3330	(805) 643-3331

VELA,RYAN J - 281314

Group Affiliation: CALIFORNIA CARDIOVASCULAR AND THORACIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 508, VENTURA, CA 93003	(805) 643-2375	(805) 643-3511

WOUND CARE

BRAND,LISA ELAINE - 280562

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	4542 LAS POSAS RD STE D, CAMARILLO, CA 93010-2374	(805) 322-8490	(805) 586-8066

EL FATMI,MOUNIR - 281250

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2309 ANTONIO AVE, CAMARILLO, CA 93010	(805) 389-5944	(805) 383-7462