

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ACUPUNCTURE

CHEN'S CHINESE MEDICINE - 888907

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2342 LOMITA ST STE C, CAMARILLO, CA 93010	(805) 389-0333	(805) 389-0309

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

LANDON,CHRIS - 280546

Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER

Language(s):

Office #	Street:	Phone:	Fax:
SPANISH OFFICE 1	300 HILLMONT AVE BLDG 340 #302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 641-4494

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PORCH-CURREN,CRISTINA - 280481

Group Affiliation: COASTAL ALLERGY CARE

Language(s):

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

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

SOVARI,ALI - 280982

Group Affiliation: CABRILLO CARDIOLOGY MEDICAL GRP

Language(s):

FARSI

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

YORUK,AYHAN - 281212

Group Affiliation: CARDIOLOGY ASSOCIATES MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 503, VENTURA, CA 93003	(805) 653-0101	(805) 641-0434
OFFICE 2	1701 SOLAR DR STE 150, OXNARD, CA 93030-0138	(805) 278-4020	(805) 278-4015

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CARDIOLOGY, INTERVENTIONAL

EYVAZIAN, VAUGHN - 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

CARDIOVASCULAR DISEASES

ABDI-MORADI, SOHAIL - 281029

Group Affiliation: CARDIOLOGY CLINIC

Language(s):

PERSIAN	Office #	Street:	Phone:	Fax:
FARSI	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-3099	(805) 652-5787	(805) 652-5983
	OFFICE 2	3801 LAS POSAS RD STE 214, CAMARILLO, CA 93010-1426	(805) 437-0900	(805) 987-2878
	OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DHARAWAT,AMITA - 281027

Group Affiliation: CARDIOLOGY CLINIC

Language(s):

	Office #	Street:	Phone:	Fax:
HINDI	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-3099	(805) 652-5787	(805) 652-5983
GUJARATI	OFFICE 2	3801 LAS POSAS RD STE 214, CAMARILLO, CA 93010-1426	(805) 437-0900	(805) 987-2878
	OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5151	(805) 981-5150

FATEMI,OMID - 281097

Group Affiliation: CARDIOLOGY ASSOCIATES MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 503, VENTURA, CA 93003-2840	(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

NITZEL,CORY - 281044

Group Affiliation: CARDIOLOGY CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-1651	(805) 652-5787	(805) 652-5983
OFFICE 2	3801 LAS POSAS RD STE 214, CAMARILLO, CA 93010-1426	(805) 437-0900	(805) 987-2878
OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

OLSON,KRISTOFF A - 281084

Group Affiliation: CARDIOLOGY CLINIC

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-1651	(805) 652-5787	(805) 652-5983
	OFFICE 2	3801 LAS POSAS RD STE 214, CAMARILLO, CA 93010-1426	(805) 437-0900	(805) 987-2878
	OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

ROTHSCHILD,RICHARD - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 400 CAMARILLO RANCH RD STE 205, CAMARILLO, CA 93012-5903 (805) 384-9313 (805) 384-9493

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

CHIROPRACTIC

AUDA,LARRY R - 280454

Group Affiliation:

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
ITALIAN	OFFICE 1	789 S VICTORIA AVE STE 206, VENTURA, CA 93003-9078	(805) 644-3629	(805) 644-8720

KRAFT,GARRY G - 301002

Group Affiliation: KRAFT CHIROPRACTIC CLINIC

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	917 W 7TH STREET, OXNARD, CA 93030-6756	(805) 483-2225	(805) 483-2220

O'NEILL,JACK E - 280478

Group Affiliation:

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	400 E ESPLANADE DR STE 103, OXNARD, CA 93036-2125	(805) 981-8575	(805) 981-8577

DERMATOLOGY

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

ELBAUM,DAVID J - 281197

Group Affiliation: CALIFORNIA SKIN INSITUTE MEDICAL GROUP

Language(s):

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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 93030-7626	(805) 201-7150	(805) 278-0137

ELERYAN,MISTY - 281201

Group Affiliation: PACIFIC CENTER FOR DERMATOLOGY

Language(s):

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

FRANCIS,SHANI - 281190

Group Affiliation: CALIFORNIA SKIN INSITUTE MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 450, OXNARD, CA 93030-7626	(805) 201-7150	(805) 278-0137
OFFICE 2	2438 N PONDEROSA DR STE C105, CAMARILLO, CA 93010	(805) 388-2068	(805) 484-7700

LARSEN,LARISSA - 281238

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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:
OFFICE 1	425 HAALAND DR STE 204, THOUSAND OAKS, CA 91361-5231	(805) 497-8080	(805) 497-8806

FARSI

ENDOCRINOLOGY

PINZONE,JOSEPH J - 280509

Group Affiliation: MAGNOLIA FAMILY MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8210	(805) 981-5161	(805) 981-5325
OFFICE 2	125 W THOUSAND OAKS BL STE 300, THOUSAND OAKS, CA 91360-4460	(805) 418-9100	(805) 670-0619
OFFICE 3	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003	(805) 652-6222	(805) 652-6221

SHAH,NISSAR - 280510

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 304 STE 502, VENTURA, CA 93065-2871	(805) 652-6222	(805) 652-6221
OFFICE 2	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 582-3380

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

GASTROENTEROLOGY

ALPERN,JOEL A - 280447

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
PORTUGUESE	OFFICE 1	168 N BRENT ST STE 404, VENTURA, CA 93003-2824	(805) 641-6525	(805) 948-1505

AMEER,ADNAN - 281232

Group Affiliation: ISLAND VIEW GASTROENTEROLOGY ASSOCIATES

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
	OFFICE 1	168 N BRENT STREET STE 404, VENTURA, CA 93003	(805) 641-6525	(805) 641-6530

GONDHA,CHETAN - 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) 948-1505

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUAN,JAY J - 281176

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

MANDARIN

Office #

Street:

Phone:

Fax:

SPANISH

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) 948-1505

OFFICE 2

1901 SOLAR DR STE 205, OXNARD, CA 93036-0632

(805) 641-6525

(805) 948-1505

MARASIGAN,JUSTIN - 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) 948-1505

OFFICE 2

1901 SOLAR DR STE 205, OXNARD, CA 93036-0632

(805) 641-6525

(805) 948-1505

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MILLER,DONALD - 280985

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) 485-1484

NASROLLAH,LAYA - 280551

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) 948-1505

PEDRAZA,BENITO A - 280377

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) 948-1505
OFFICE 2	1901 SOLAR DR STE 205, OXNARD, CA 93036-0632	(805) 641-6525	(805) 948-1505

ROJANY,MICHA - 280064

Group Affiliation: GENESIS HEALTHCARE PARTNERS PC

Language(s):

FRENCH

SPANISH

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SAGAR,DIPTI - 281090

Group Affiliation: MAGNOLIA FAMILY MEDICAL CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-1651	(805) 652-6222	(805) 652-6221

SIMON,KAREN - 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

UNDERWOOD,SCOTT - 281071

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-1651	(805) 652-6222	(805) 652-6221
OFFICE 2	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

GENERAL SURGERY

BABASHOFF,LISA - 280957

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA
COUNTY

Language(s):

SPANISH

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-3790	(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	117 PIRIE RD STE E, OJAI, CA 93023	(805) 485-8722	(805) 485-9311

BARBARO,CASEY - 281028

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

SPANISH

ITALIAN

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

BRAND,LISA - 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

BRYANT,TIMOTHY - 280960

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N. ROSE AVE STE 430, OXNARD, CA 93030-3790	(805) 485-8722	(805) 485-9311
OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DIXON,NEAL P - 280479

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2438 PONDEROSA DR N STE C207, CAMARILLO, CA 93010-2374	(805) 484-3513	(805) 367-4151

DUNCAN,THOMAS - 281014

Group Affiliation: VENTURA COUNTY SURGICAL ASSOCIATES

Language(s):

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

EISNER,JOSEPH - 280963

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-3790	(805) 485-8722	(805) 485-9311
OFFICE 2	168 N BRENT ST STE 506, VENTURA, CA 93003	(805) 653-6580	(805) 653-6687

JREIJE,KARIM - 281189

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LOPRESTI,JOSEPH - 280961

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-3790	(805) 485-8722	(805) 485-9311
OFFICE 2	2460 N PONDEROSA DR STE A117, CAMARILLO, CA 93010	(805) 485-8722	(805) 485-9311

MCCARTY,PATRICK - 281082

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030-7657	(805) 485-8722	(805) 485-9311

RAYHRER,CONSTANZE - 250143

Group Affiliation:

Language(s):

GERMAN	Office #	Street:	Phone:	Fax:
	OFFICE 1	2605 LOMA VISTA RD, VENTURA, CA 93003-1548	(805) 648-2227	(805) 648-6706

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SALEHPOUR, MICHAEL MOHAMMAD - 280463

Group Affiliation:

Language(s):

FARSI

Office #

Street:

Phone:

Fax:

OFFICE 1

2605 LOMA VISTA RD, VENTURA, CA 93003-1548

(805) 648-2227

(805) 648-6706

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

TUAI, BRIAN - 280959

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA COUNTY

Language(s):

KOREAN

MANDAR

Office #

Street:

Phone:

Fax:

OFFICE 1

1700 N ROSE AVE STE 430, OXNARD, CA 93030-3790

(805) 485-8722

(805) 485-9311

OFFICE 2

415 ROLLING OAKS DR STE 220, THOUSAND OAKS, CA 91361

(805) 485-8722

(805) 485-9311

OFFICE 3

168 N BRENT ST STE 506, VENTURA, CA 93003

(805) 653-6580

(805) 653-6687

WILLIAMS, MICHAEL - 281018

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

300 HILLMONT AVE BLDG 340 #401, VENTURA, CA 93003-3099

(805) 652-6201

(805) 641-4416

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WU,SAMANTHA - 281202

Group Affiliation: GENERAL SURGERY MEDICAL GROUP VTA
COUNTY

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 430, OXNARD, CA 93030	(805) 485-8722	(805) 485-9311

GYNECOLOGY-ONCOLOGY

HOGAN,W MICHAEL - 280503

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2900 LOMA VISTA RD STE 205, VENTURA, CA 93003-2909	(805) 642-4830	(805) 642-3852

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				

RODRIGUEZ,ANNE - 280504

Group Affiliation:

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2900 LOMA VISTA RD STE 205, VENTURA, CA 93003-2909	(805) 642-4830	(805) 642-3852

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HEMATOLOGY-ONCOLOGY

BANTA,WARREN - 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) 351-9506	(805) 351-9505

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) 351-9606	(805) 351-9605

MA,AUSTIN - 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) 351-9506	(805) 351-9505

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) 351-9506	(805) 351-9505

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NAIK,RAHUL - 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) 351-9506	(805) 351-9505

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) 351-9506	(805) 351-9505

HIV/AIDS SPECIALISTS

BARGER,MELISSA - 281037

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #502, VENTURA, CA 93003-1651	(805) 652-6222	(805) 652-6221

MUZAFFER,RIFFAT - 280511

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

HINDI

URDU

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PRICHARD,JOHN - 280512

Group Affiliation: IMMUNOLOGY CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BDLG 340 STE 502, VENTURA, CA 93003-3099	(805) 652-6524	(805) 652-5983
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 501, VENTURA , CA 93003-1651	(805) 652-6218	(805) 652-6512

HOSPITAL

SANTA PAULA HOSPITAL - 880011

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	825 N TENTH ST, SANTA PAULA, CA 93060-1309	(805) 933-8600	(805) 933-8676

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

VENTURA COUNTY MEDICAL CENTER - 880003

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE, VENTURA, CA 93003-3099	(805) 652-6000	(805) 648-9817

INFECTIOUS DISEASES

BARGER,MELISSA - 281037

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #502, VENTURA, CA 93003-1651	(805) 652-6222	(805) 652-6221

MESHKATY,NESSA - 281032

Group Affiliation: MEDICINE SPECIALTY WEST

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #502, VENTURA, CA 93003-3099	(805) 652-6222	(805) 652-6221

MUZAFFER,RIFFAT - 280511

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PRICHARD,JOHN - 280512

Group Affiliation: IMMUNOLOGY CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BDLG 340 STE 502, VENTURA, CA 93003-3099	(805) 652-6524	(805) 652-5983
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 501, VENTURA , CA 93003-1651	(805) 652-6218	(805) 652-6512

WOLFSOHN,JOSHUA - 280443

Group Affiliation:

Language(s):

SPANISH

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

LABORATORY

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LICENSED SOCIAL WORKER

RYDER,DALE L - 281228

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

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

FORREY,ALEXIS - 281224

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

RUKULE,ANGELA - 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

SPONDELLO,KELLY - 281225

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

JADALI,DARYOUSH - 280216

Group Affiliation: PERINATAL DIAGNOSTIC CENTER

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2100 LYNN RD STE 125, THOUSAND OAKS, CA 91360-8032	(805) 777-7406	(805) 494-6825
FARSI	OFFICE 2	29 N BRENT ST, VENTURA, CA 93003-2807	(805) 643-9781	(805) 494-6825

ROBILIO,PETER - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SCIBETTA,EMILY - 281089

Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S
MEDICAL

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469

NEPHROLOGY

CHANG,SUSAN - 280116

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

SPANISH

KOREAN

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
OFFICE 3	2705 LOMA VISTA RD STE 101, VENTURA, CA 93003-1596	(805) 383-9727	(805) 764-0176

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 - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GANDHI, SAUMIL M - 280434

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

	Office #	Street:	Phone:	Fax:
HINDI				
SPANISH	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 502, VENTURA, CA 93003-3099	(805) 652-6222	(805) 652-6221
	OFFICE 2	828 W VENTURA ST STE 120, FILLMORE, CA 93015	(805) 524-2000	(805) 525-8031

LEDESMA, STEVEN G - 280184

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
	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

Language(s):

	Office #	Street:	Phone:	Fax:
CHINESE				
	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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MAPARA,HASHIM - 281219

Group Affiliation:

Language(s):

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

MAPARA,HASHIM - 280998

Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY

Language(s):

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

MORTAZAVI,KOOSHA - 280353

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

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

NIRAULA,RAJENDRA P - 280485

Group Affiliation: VISTA DEL MAR MEDICAL GRP

Language(s):

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):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	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):				
ARABIC				
	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):				
HINDI				
	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 - 280180				
Group Affiliation: RENAL CONSULTANTS OF VENTURA COUNTY				
Language(s):				
CHINESE				
SPANISH				
	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 93036-1596	(805) 983-8049	(805) 983-8076
	OFFICE 3	2705 LOMA VISTA RD STE 101, VENTURA, CA 93003-1596	(805) 383-9727	(805) 764-0176

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

YAN,JIESHI - 281020

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

CHINESE

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

NEUROLOGY

AMOUSSOU,DELA - 280962

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

FRENCH

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA , CA 93001-2543	(805) 641-5600	(805) 641-5677

HINER,BRADLEY - 281112

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7659	(805) 988-2775	(805) 278-1220

LAN,ERIKA - 281236

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7659	(805) 988-2775	(805) 278-1220

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MAAMAR-TAYEB,ALI - 281042

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677

MUTHUKUMARAN,ABI - 280514

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 582-3380
OFFICE 2	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

NEZHAD,MANI K. - 280559

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7659	(805) 988-2775	(805) 278-1220

POWELL,RUSSELL T - 280568

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
OFFICE 2	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHEIKH,OMAIR - 281141

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7659	(805) 988-2775	(805) 278-1220

YOUNG,PARI - 280515

Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	125 W THOUSAND OAKS BL STE 300, THOUSAND OAKS, CA 91360-7707	(805) 418-9100	(805) 370-0619

NEUROLOGY, VASCULAR

TAYLOR (PCCHC),ROBERT - 281168

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7654	(805) 988-2775	(805) 278-1220

NEUROPSYCHOLOGY

ROGERS,STEVEN - 281169

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030	(805) 988-2775	(805) 278-1220

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NEUROSURGERY

ALBERSTONE,CARY - 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: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030	(805) 988-2775	(805) 278-1220

HERMAN,JAMES M - 280516

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-3099	(805) 648-9830	(805) 648-9833

OH,NATHAN S - 281194

Group Affiliation: ANACAPA NEUROSURGERY (AC)

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003	(805) 648-9830	(805) 648-9833
OFFICE 2	125 W THOUSAND OAKS BLVD STE 300, THOUSAND OAKS, CA 91360	(805) 418-9100	(805) 370-0619

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ONI-ORISAN (PCCHC),AKINWUNMI - 281167

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 470, OXNARD, CA 93030-7659	(805) 988-2775	(805) 278-1220

SIU,ALAN - 281041

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 648-9830	(805) 648-9833

WESTRA,DAVID L - 280379

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	168 N BRENT ST STE 408, VENTURA, CA 93003-2824	(805) 643-2179	(805) 643-0672

NURSE PRACTITIONER

PARK,ELVIN - 281200

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 220, OXNARD, CA 93030-7640	(805) 754-2811	(805) 754-2814

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OBSTETRICS & GYNECOLOGY

COLE,TERRY L - 280016

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	3418 LOMA VISTA RD STE B, VENTURA, CA 93003	(805) 639-9510	(805) 639-9515

GHIAI-FATEMI,AFSHAN - 280951

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
FARSI	OFFICE 1	2901 N VENTURA RD STE 100, OXNARD, CA 93036-1126	(805) 384-8071	(805) 981-6201

GUAN,XIN - 281142

Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
MANDARIN	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 201 202, VENTURA, CA 93003-1651	(805) 652-6100	(805) 652-3252
	OFFICE 2	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469
	OFFICE 3	845 N 10TH ST STE 3, SANTA PAULA, CA 93060-1348	(805) 525-0215	(805) 525-8031

KELLEY,FREDERICK - 280424

Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	300 HILLMONT AVE BLDG 340 #201, VENTURA, CA 93003-3099	(805) 652-6100	(805) 652-3252

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 845 N TENTH ST STE 3, SANTA PAULA , CA 93060-1348 (805) 525-0215 (805) 525-8031

LANTER,PATRICIA - 280999

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2901 N VENTURA RD STE 100, OXNARD, CA 93036-1126	(805) 981-6101	(805) 981-6201
OFFICE 2	1700 N ROSE AVE STE 350, OXNARD, CA 93030-7645	(805) 485-7877	(805) 981-4472
OFFICE 3	2486 N PONDEROSA DR STE D205, CAMARILLO, CA 93010	(805) 419-7790	(805) 487-1934

LEFKOWITZ,ROBERT - 280414

Group Affiliation: MAGNOLIA FAMILY MEDICAL CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160
OFFICE 2	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 579-6082

SILVERMAN,IRA - 280425

Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 201, VENTURA, CA 93003-3099	(805) 652-6100	(805) 652-3252
OFFICE 2	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

VEGA,JUAN - 280423

Group Affiliation: ACADEMIC FAMILY MEDICAL CENTER

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #201, VENTURA, CA 93003-3099	(805) 652-6100	(805) 652-3252
OFFICE 2	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469
OFFICE 3	2400 SOUTH C ST, OXNARD, CA 93030	(805) 240-7000	(805) 486-0396

WATABE,MINAKO - 280384

Group Affiliation: SANTA PAULA HOSPITAL CLINIC

Language(s):

JAPANESE

Office #	Street:	Phone:	Fax:
OFFICE 1	845 N TENTH ST STE 3, SANTA PAULA, CA 93060-1300	(805) 525-0215	(805) 525-8031
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 201, VENTURA, CA 93003-1651	(805) 652-6100	(805) 652-3252

YUAN,VALERIE - 281085

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 579-6082
OFFICE 2	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160
OFFICE 3	300 HILLMONT AVE BLDG 340 STE 201, VENTURA, CA 93003-1651	(805) 652-6100	(805) 652-3252

OBSTETRICS-FAMILY PRACTITIONER

FRIAS,CARLOS - 280416

Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S
MEDICAL

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469
PORTUGUESE	OFFICE 2	300 HILLMONT AVE BLDG 340 STE 201, VENTURA, CA 93003-1651	(805) 652-6100	(805) 652-3252

GOMEZ, RAMON - 280420

Group Affiliation: SANTA PAULA MEDICAL CLINIC

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	247 MARCH ST, SANTA PAULA, CA 93060	(805) 833-8383	(805) 525-2405

PAKALA, SHILPA - 280413

Group Affiliation: MAGNOLIA WEST

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	2220 E GONZALES RD STE 120A-B, OXNARD, CA 93036-3707	(805) 981-5151	(805) 981-5325

OCCUPATIONAL THERAPY

SECOND WAVE PHYSICAL THERAPY - 888920

Group Affiliation:

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

ST JOHN'S OUTPATIENT THERAPY CENTER - 888913

Group Affiliation:

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

VCMC THERAPY SERVICES (EASTMAN) - 880971

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2189 EASTMAN AVE, VENTURA , CA 93003-3099	(805) 639-2600	(805) 658-4532

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OPHTHALMOLOGY

BEKERMANN,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

CARTER,STEVEN L - 281192

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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
OFFICE 4	2045 ROYAL AVE STE 234, SIMI VALLEY , CA 93065	(805) 527-1417	(805) 584-2477

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) 987-7755
OFFICE 3	1901 SOLAR DRIVE STE 155, OXNARD , CA 93036	(805) 278-0057	(805) 278-9925

PANG,NOELEN 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) 987-8705	(805) 987-7765

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROIZENBLATT,ROBERTO - 281193

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

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

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 93036-2644	(805) 278-0057	(805) 278-9925
	OFFICE 3	3085 LOMA VISTA RD, VENTURA, CA 93003-2916	(805) 648-3085	(805) 648-7027

OPTOMETRY

BOGGS,MICHAEL - 280029

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

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

BRUNETTE,MARK - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KANG,LESA - 280977

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3085 LOMA VISTA ROAD, VENTURA, CA 93003	(805) 648-3085	(805) 648-7027
OFFICE 2	751 DAILY DR SUITE 110, CAMARILLO, CA 93010-6004	(805) 987-8705	(805) 987-7765
OFFICE 3	957 FAULKNER ROAD STE 102, SANTA PAULA, CA 93060	(805) 525-1737	(805) 525-7676

LANGSFORD,STEPHEN - 281155

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	2045 ROYAL AVE STE 234, SIMI VALLEY , CA 93065	(805) 527-1417	(805) 584-2477

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

NGUYEN,TIFFANY - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 751 E DAILY DR STE 110, CAMARILLO, CA 93010-6077 (805) 987-8705 (805) 987-7765

ORA,JOHN - 281184

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 E DAILY DR STE 110, CAMARILLO, CA 93010	(805) 987-8705	(805) 987-7765
OFFICE 3	1901 SOLAR DR 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	957 FAULKNER RD STE 102, SANTA PAULA , CA 93060	(805) 525-1737	(805) 525-7676

RAVEN,PEGAH A - 281221

Group Affiliation: MIRAMAR EYE SPECIALISTS

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2230 LYNN RD STE 102, THOUSAND OAKS, CA 91360	(805) 495-0458	(805) 494-9630

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

ORAL MAXILLOFACIAL SURGERY

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

BENSON,EMILY S - 280344

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

	Office #	Street:	Phone:	Fax:
SPANISH				
	OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CALDERONE,ROCCO - 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

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

FROUSIAKIS,PETROS - 281007

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) 207-2510	(805) 586-4059

GHILARDUCCI,MARK - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GLUCK,JOSHUA - 281103

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
OFFICE 2	2221 WANKEL WAY, OXNARD, CA 93030-0192	(805) 988-9366	(805) 483-3747

GOLDEN,THOMAS - 280041

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

HARGETT,DAMAYEA - 280547

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001	(805) 641-5600	(805) 641-5677

HOFER,JASON - 280492

Group Affiliation: VENUTRA 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
OFFICE 2	3901 LAS POSAS RD STE 4, CAMARILLO, CA 93010-1502	(805) 585-5166	(805) 383-1786

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

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 - 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

RAGSDALE,MARY - 280542

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

SPANISH	Office #	Street:	Phone:	Fax:
	OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
	OFFICE 2	125 W THOUSAND OAKS BL STE 300, THOUSAND OAKS, CA 91360-4460	(805) 418-9100	(805) 370-0619
	OFFICE 3	325 W CHANNEL ISLANDS BLVD, OXNARD, CA 93033-4501	(805) 204-9500	(805) 240-2128

SHARAREH,BEHNAM - 281209

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Language(s):

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

STENNETTE,DENISE - 280426

Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	325 W CHANNEL ISLANDS BLVD, OXNARD, CA 93033-4501	(805) 204-9500	(805) 240-2128

SUZUKI,KENTARO - 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):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

TAKARA,TADASHI - 280543

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
OFFICE 2	325 W CHANNEL ISLANDS BLVD, OXNARD , CA 93033-4501	(805) 204-9500	(805) 240-2128

WU,THOMAS - 280345

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

MANDARIN	Office #	Street:	Phone:	Fax:
	OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
	OFFICE 2	325 W CHANNEL ISLANDS BLVD, OXNARD, CA 93033-4501	(805) 204-9500	(805) 240-2128

ZEMAN,CRAIG - 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 - 281103

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP INC

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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
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

OTOLARYNGOLOGY

CASTELLANO,ALEXA - 281092

Group Affiliation: ANACAPA 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

CHAN,STEPHEN - 281205

Group Affiliation: WEST COAST EAR NOSE & THROAT

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030	(805) 983-0395	(805) 983-0463

KHO,TRICIA SOOCHEUN - 280471

Group Affiliation: WEST COAST EAR NOSE & THROAT

Language(s):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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: WEST COAST EAR NOSE & THROAT

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

LEE,JOSEPH - 280984

Group Affiliation: WEST COAST EAR NOSE & THROAT

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 460, OXNARD, CA 93030-7629	(805) 983-0395	(805) 983-0463

NGUYEN,CHAU - 280545

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

VIETNAMESE

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #401, VENTURA, CA 93003-3099	(805) 652-6201	(805) 648-9878

SUMIYOSHI,MIKA - 281031

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #401, VENTURA , CA 93003-9624	(805) 652-6201	(805) 641-4416

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

VAIDYA, ABHAY M - 280473

Group Affiliation: WEST COAST EAR NOSE & THROAT

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

VOORMAN, GARY S - 280474

Group Affiliation: WEST COAST EAR NOSE & THROAT

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

WAREHAM, MARTIN E - 280476

Group Affiliation: WEST COAST EAR NOSE & THROAT

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	301 S MOORPARK RD, THOUSAND OAKS, CA 91361-1008	(805) 379-9646	(805) 379-0611
OFFICE 2	2876 N SYCAMORE DR STE 303, SIMI VALLEY, CA 93065-1550	(805) 527-7320	(805) 527-2426

PAIN MANAGEMENT

BUCHANAN, PATRICK D - 280566

Group Affiliation: SPANISH HILLS PAIN SPECIALISTS

Language(s):

SPANISH

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	OFFICE 1	1100 PASEO CAMARILLO, CAMARILLO, CA 93010-6073	(805) 484-8558	(805) 484-3099
--	----------	--	----------------	----------------

CABARET,JOSEPH A - 280397

Group Affiliation:

Language(s):

SPANISH

Office #

Street:

Phone:

Fax:

ITALIAN

OFFICE 1

601 E DAILY DR STE 228, CAMARILLO, CA 93010-6073

(805) 914-0637

(805) 693-4327

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

(805) 512-8517

IKER,DALE - 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 - 281178

Group Affiliation:

Language(s):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	1280 S VICTORIA AVE STE 250, VENTURA, CA 93003-6521	(805) 351-0745	(805) 288-6744

TOURJE,CAITLIN - 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) 512-8517

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

LEONG (VCMC),FREDERIC J - 280518

Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S MEDICAL

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469
OFFICE 2	300 HILLMONT AVE BLDG 340 #302, VENTURA, CA 93003-3001	(805) 652-6255	(805) 641-4494

PEDIATRIC DIABETIC MEDICINE

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SEVER,CATHERINE - 280570

Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	325 W CHANNEL ISLANDS BLVD, OXNARD, CA 93033-4501	(805) 204-9500	(805) 240-2128
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 652-4494

PEDIATRIC ENDOCRINOLOGY

ELCHURI,SWATI - 281034

Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 641-4494

PEDIATRIC GASTROENTEROLOGY

PATEL,MINESH - 281074

Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 302, VENTURA, CA 93003-1651	(805) 652-6255	(805) 641-4494

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PEDIATRIC OPHTHALMOLOGY

TRUMLER-SEBRING, ANYA - 280495

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 DAILY DR STE 110, CAMARILLO, CA 93010

(805) 987-8705

(805) 987-7765

PEDIATRIC ORTHOPEDIC SURGERY

MAGUIRE, MICHAEL - 280537

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

133 W SANTA CLARA ST, VENTURA, CA 93001-2543

(805) 641-5600

(805) 641-5677

PHYSICAL MEDICINE & REHAB

BLOOM, MATTHEW - 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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CHANG CHIEN,GEORGE C - 280519

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

MANDARIN

Office #

Street:

Phone:

Fax:

OFFICE 1

133 W SANTA CLARA ST, VENTURA, CA 93001-2543

(805) 641-5600

(805) 641-5677

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 - 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

PIERSON,RAYMOND - 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

SUKUMAR,JONATHAN - 281157

Group Affiliation: WEST VENTURA MEDICAL CLINIC

Language(s):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677
OFFICE 2	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065	(805) 582-4000	(805) 579-6082
OFFICE 3	2240 E GONZALES RD STE 100, OXNARD, CA 93036	(805) 981-5161	(805) 981-5160

VU,THAI - 281222

Group Affiliation: VENTURA ORTHOPEDICS MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3525 LOMA VISTA RD STE A, VENTURA, CA 93003-3165	(805) 641-6415	(805) 641-6424

PHYSICAL THERAPY

GEORGE ERB PHYSICAL THERAPY - 880974

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	231 CAMARILLO RANCH RD, CAMARILLO, CA 93012-5082	(805) 484-2026	(805) 389-1196

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	1633 PACIFIC AVE STE 142, OXNARD, CA 93030-1858	(805) 240-3373	(805) 240-3375
OFFICE 3	1901 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0663	(805) 981-9797	(805) 981-9742
OFFICE 4	101 HODENCAMP RD STE 102, THOUSAND OAKS, CA 91360-5836	(805) 496-9944	(805) 496-9945

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SECOND WAVE PHYSICAL THERAPY - 888920

Group Affiliation:

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

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:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1879 PORTOLA RD STE A2, VENTURA, CA 93003-8095	(805) 644-1273	(805) 644-4417
OFFICE 2	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):

Office #	Street:	Phone:	Fax:
OFFICE 1	2895 LOMA VISTA RD STE H, VENTURA , CA 93003-1542	(805) 765-4773	(805) 392-9975

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

VCMC THERAPY SERVICES (EASTMAN) - 880971

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2189 EASTMAN AVE, VENTURA , CA 93003-3099	(805) 639-2600	(805) 658-4532

PLASTIC AND RECONST SUR

FLYNN (VCMC),ARTHUR E - 281045

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 641-0141	(805) 641-0430

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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 - 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

STARR,WILLIAM E - 280521

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 641-0141	(805) 641-0430
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 641-4494

PLASTIC SURGERY, HAND

STARR,WILLIAM E - 280521

Group Affiliation: ANACAPA SURGICAL ASSOCIATES

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 STE 401, VENTURA, CA 93003-1651	(805) 641-0141	(805) 641-0430
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 641-4494

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PODIATRY

NGUYEN,ANH - 281138

Group Affiliation: COASTAL FOOT AND ANKLE

Language(s):

VIETNAMESE

Office #	Street:	Phone:	Fax:
OFFICE 1	711 N A ST, OXNARD, CA 93030-4309	(805) 983-0222	(805) 604-9872
OFFICE 2	134 N 10TH ST A, SANTA PAULA, CA 93060-2803	(805) 933-1313	(805) 933-9866

PEARSON,SEAN - 281231

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036-0729	(805) 485-6708	(805) 278-2299

ROBERG (VCMC),DYLAN - 281145

Group Affiliation: FILLMORE FAMILY MEDICAL GROUP

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	828 W VENTURA ST STE 120, FILLMORE, CA 93015-1877	(805) 524-2000	(805) 524-8612
OFFICE 2	133 W SANTA CLARA ST, VENTURA, CA 93001-2543	(805) 641-5600	(805) 641-5677

ROBERG,DYLAN - 281163

Group Affiliation:

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036	(805) 485-6708	(805) 278-2299

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROBERG,SCOT - 280955

Group Affiliation:

Language(s):

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

STUHR,FRANK - 280435

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3114 TELEGRAPH RD STE B, VENTURA, CA 93003-3219	(805) 643-8572	(805) 643-8667

VINES,STEVEN M - 280564

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	451 W GONZALES RD STE 260, OXNARD, CA 93036-0729	(805) 485-3151	(805) 983-8013

PSYCHIATRY

PARK,TIMOTHY - 281179

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2969 LOMA VISTA RD, VENTURA, CA 93003	(805) 504-6814	(805) 667-8920

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

THURSTON, RONALD - 280226

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3311 OLD CONEJO RD, NEWBURY PARK, CA 91320	(805) 388-3337	(805) 388-1155

PSYCHOLOGY

BERNAL-WARD, ISABEL - 281216

Group Affiliation:

Language(s):

SPANISH				
Office #	Street:	Phone:	Fax:	
OFFICE 1	3625 E THOUSAND OAKS BLVD STE 158, THOUSAND OAKS, CA 91362	(805) 983-6787	(805) 370-5575	

PULMONARY DISEASES

ARFAEI, AMIR - 280325

Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR

Language(s):

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

BAJWA, RAVINDER S - 281025

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

HINDI				
PUNJABI				
Office #	Street:	Phone:	Fax:	
OFFICE 1	300 HILLMONT AVE BLDG 340 #502, VENTURA, CA 93003-0000	(805) 652-6222	(805) 652-6221	

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	OFFICE 2	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160
BERNSTEIN,ROBERT J - 280256				
Language(s):		Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR		
	Office #	Street:	Phone:	Fax:
	OFFICE 1	168 N BRENT ST STE 406, VENTURA, CA 93003-2824	(805) 653-6371	(805) 653-7242
BHATIA,RAJAN - 280448				
Language(s):		Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS		
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
HANDLEY,JOHN A - 280258				
Language(s):		Group Affiliation: VENTURA PULMONARY & CRITICAL CARE MED GR		
	Office #	Street:	Phone:	Fax:
	OFFICE 1	168 N BRENT ST STE 406, VENTURA, CA 93003-2824	(805) 653-6371	(805) 653-7242
HAYRABEDIAN,MOVSES - 281210				
Language(s):		Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS		
ARABIC	Office #	Street:	Phone:	Fax:
ARMENIAN	OFFICE 1	1910 OUTLET CENTER DR, OXNARD, CA 93036-0677	(805) 485-2400	(805) 485-3025

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LAMEE,JONATHAN - 281158

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

LANDON,CHRIS - 280546

Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 641-4494

LIPPER,BENNET - 281040

Group Affiliation: LAS POSAS FAMILY MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	3801 LAS POSAS RD STE 214, CAMARILLO, CA 93010-1426	(805) 437-0900	(805) 987-2878
OFFICE 2	2240 E GONZALES RD STE 100, OXNARD, CA 93036-8212	(805) 981-5161	(805) 981-5160
OFFICE 3	828 W VENTURA ST STE 100, FILLMORE, CA 93015	(805) 524-2000	(805) 525-8031
OFFICE 4	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065-2871	(805) 582-4000	(805) 582-3380

MAEHARA,DARREN - 280987

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

SPANISH

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

	OFFICE 2	4000 CALLE TECATE STE 105, CAMARILLO, CA 93012-5283	(805) 485-2400	(805) 485-3025
--	----------	---	----------------	----------------

NELSON,GERGANA - 280988

Group Affiliation: WEST COAST CRITICAL CARE PHYSICIANS

Language(s):

BULGARIAN

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

OBILOR,OSEZEMEGHONGHON - 280970

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

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 406, VENTURA, CA 93003	(805) 653-6371	(805) 653-7242

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

YU,GEORGE - 280231

Group Affiliation:

Language(s):

CHINESE

Office #

Street:

Phone:

Fax:

MANDARIN

OFFICE 1

3661 E LAS POSAS RD STE G-162, CAMARILLO, CA 93010-1430

(805) 389-5132

(805) 409-4643

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BICKFORD,JESSICA - 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

CREGUT,KELSEA - 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

HINOJOSA,CHANEL - 888816

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

MOORE,HANNAH - 888915

Group Affiliation:

Language(s):

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 2605 LOMA VISTA RD, VENTURA, CA 93003 (805) 826-1381 (805) 648-6706

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

NEMO,BROOKE L - 888817

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

PENROSE,CHRISTINE - 888916

Group Affiliation:

Language(s):

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

VEDDER,TATUM - 888914

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

REPRODUCTIVE ENDO/INFERTILITY

BUYALOS,RICHARD P - 280233

Group Affiliation: FERTILITY & SURGICAL ASSOCIATES OF SO CA

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	325 ROLLING OAKS DR STE 110, THOUSAND OAKS, CA 91361-1299	(805) 778-1122	(805) 778-1199

SHAMONKI,MOUSA - 281006

Group Affiliation: FERTILITY & SURGICAL ASSOCIATES OF SO CA

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	325 ROLLING OAKS DR STE 110, THOUSAND OAKS, CA 91361-1201	(805) 778-1122	(805) 778-1199

RHEUMATOLOGY

FATEMI,GITA - 280558

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	64 EAST DAILY DR, CAMARILLO, CA 93010-5803	(805) 384-8071	(805) 482-2482

GREGER,STEPHANIE C - 280525

Group Affiliation: MEDICINE SPECIALTY CENTER WEST

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #502, VENTURA, CA 93003-3099	(805) 652-6222	(805) 652-6221
OFFICE 2	845 N TENTH ST STE 3, SANTA PAULA, CA 93060-1347	(805) 525-0215	(805) 525-8031

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MORY,RACHEL P - 281185

Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC

Language(s):

SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1227 E LOS ANGELES AVE, SIMI VALLEY, CA 93065	(805) 582-4000	(805) 579-6082

SPIEGEL,TIMOTHY - 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

WEISS,MARTIN - 280527

Group Affiliation: MAGNOLIA FAMILY MEDICAL CENTER

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2240 E GONZALES RD STE 100, OXNARD, CA 93036-3707	(805) 981-5161	(805) 981-5160
OFFICE 2	125 W THOUSAND OAKS BLVD STE 300, THOUSAND OAKS, CA 91360-4460	(805) 418-9100	(805) 370-0619

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
OFFICE 2	3450 LOMA VISTA RD, VENTURA, CA 93003-3026	(805) 339-0602	(805) 425-6650

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 3 1000 NEWBURY RD STE 165, NEWBURY PARK, CA 91320-6435 (805) 499-1908 (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

FLETCHER,E CHERYL - 880970

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	150 VALLEY VISTA DR, CAMARILLO, CA 93010-1725	(805) 484-1671	(805) 987-0667

SECOND WAVE PHYSICAL THERAPY - 888920

Group Affiliation:

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

ST JOHN'S OUTPATIENT THERAPY CENTER - 888913

Group Affiliation:

Language(s):

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

THORACIC SURGERY

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

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

WAN,JENNIFER J - 281147

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

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

URGENT CARE

ACADEMIC FAMILY MED CTR URGENT CARE - 880262

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #101 M - F 9AM-6PM, SA 9AM-4PM, VENTURA, CA 93003-3099	(805) 652-6500	(805) 652-3344

CFH SANTA PAULA URGENT CARE - 880006

Group Affiliation: CMH CENTERS FOR FAMILY HEALTH

Language(s):

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

CONEJO VALLEY URGENT CARE - 888812

Group Affiliation:

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	125 W THOUSAND OAKS BL STE 200 M-SAT 9AM-5PM / SUN CLOSED, THOUSAND OAKS, CA 91360-4412	(805) 418-9105	(805) 418-9114

LAS ISLAS URGENT CARE - 880260

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	325 W CHANNEL ISLANDS BLVD M-SU 8AM-5PM, OXNARD, CA 93033-4501	(805) 204-9500	(805) 483-4379

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MAGNOLIA URGENT CARE - 880259

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	2240 E GONZALES RD M-F 9AM-7PM, SA/SU 9AM-5PM, OXNARD, CA 93036-8210	(805) 981-5181	(805) 981-5188

SIERRA VISTA URGENT CARE - 880261

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	1227 E LOS ANGELES AVE M-F 9AM-630PM, SA-SUN 8AM-4:30PM, SIMI VALLEY, CA 93065-2871	(805) 582-4050	(805) 579-0210

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
OFFICE 2	250 S MILLS RD STE 100, VENTURA, CA 93003	(805) 988-9001	(805) 666-0995

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

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WEST VENTURA URGENT CARE - 850270

Group Affiliation: VENTURA COUNTY MEDICAL CTR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	133 W SANTA CLARA ST MONDAY-FRIDAY, 8AM-6PM, VENTURA, CA 93001-2543	(805) 641-5620	(805) 641-5621

UROLOGY

ABOSEIF,SHERIF - 280496

Group Affiliation:

Language(s):

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

BEAGHLER (CMH),MARC A - 250907

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

BOWMAN,RYAN - 280528

Group Affiliation: VCMC UROLOGY CLINIC

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	300 HILLMONT AVE BLDG 340 #402, VENTURA, CA 93003-3099	(805) 652-6210	(805) 652-6299
OFFICE 2	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469

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

SILVERMAN,PAUL - 280530

Group Affiliation: VCMC UROLOGY CLINIC

Language(s):

	Office #	Street:	Phone:	Fax:
	OFFICE 1	300 HILLMONT AVE BLDG 340 STE 402, VENTURA, CA 93003-3099	(805) 652-6210	(805) 652-6299
	OFFICE 2	2000 OUTLET CENTER DR STE 110, OXNARD, CA 93036-0608	(805) 604-4588	(805) 604-7469

WONG,KELVIN S - 280505

Group Affiliation:

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

SPANISH

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

VASCULAR SURGERY

ALBAUGH,GREGORY - 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 - 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

GUO,SYDNEY - 281187

Group Affiliation:

Language(s):

MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	1901 OUTLET CENTER DR STE 210, OXNARD, CA 93036	(805) 456-8890	(805) 456-8894
OFFICE 2	2605 LOMA VISTA RD, VENTURA, CA 93003	(805) 456-8890	(805) 456-8894

KONG,LI SHENG - 280314

Group Affiliation: WEST COAST VASCULAR

Language(s):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

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

MAJOR,KEVIN - 280350

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
OFFICE 2	3901 LAS POSAS RD STE 16, CAMARILLO, CA 93010-1504	(805) 484-6900	(805) 484-7788

QUIRK,KAREN - 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: WEST COAST VASCULAR

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	100 N BRENT ST STE 201, VENTURA, CA 93003-2822	(805) 643-3330	(805) 643-3331

WOUND CARE

PARK,ELVIN - 281200

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO

Language(s):

Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 N ROSE AVE STE 220, OXNARD, CA 93030-7640	(805) 754-2811	(805) 754-2814

SEVER,CATHERINE - 280570

Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP

Language(s):

Office #	Street:	Phone:	Fax:
OFFICE 1	325 W CHANNEL ISLANDS BLVD, OXNARD, CA 93033-4501	(805) 204-9500	(805) 240-2128
OFFICE 2	300 HILLMONT AVE BLDG 340 STE 302, VENTURA, CA 93003-3099	(805) 652-6255	(805) 652-4494