# Provider Directory

## Medi-Cal

**San Diego County | June 2025**

blue california

Promise Health Plan

blue california
Promise Health Plan

## LANGUAGE ASSISTANCE NOTICE

ATTENTION: If you need help in your language call 1-855-699-5557 (TTY: 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-855-699-5557 (TTY: 711). These services are free of charge.

**الشعار بالعربية (Arabic)** يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ 1-855-699-5557 (TTY: 711). تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة بريل والخط الكبير. اتصل بـ 1-855-699-5557 (TTY: 711). هذه الخدمات مجانية.

**Հայերեն պիտակ (Armenian)** ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Զանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Այդ ծառայություններն անվճար են:

**ឃ្លាសំគាល់ភាសាខ្មែរ (Cambodian)** ចំណាំ៖ បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរប្រៃលេ សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរពុម្ពធំៗ ក៏មានដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY: 711)។ សេវាទាំងនេះមិនគិតថ្លៃទេ។

**简体中文标语 (Chinese)** 请注意：如果您需要以您的母语提供帮助，请致电 1-855-699-5557 (TTY: 711) 。另外还提供针对残疾人士的帮助和服务，例如文盲和需要较大字体阅读，也是方便取用的。请致电 1-855-699-5557 (TTY: 711) 。这些服务都是免费的 。

**مطلب به زبان فارسی (Farsi)** توجه: اگر میخواهید به زبان خود کمک دریافت کنید، با 1-855-699-5557 (TTY: 711) تماس بگیرید. کمکها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با 1-855-699-5557 (TTY: 711) تماس بگیرید. این خدمات رایگان ارائه میشوند.

**हिन्दी टैगलाइन (Hindi)** ध्यान दें: अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो 1-855-699-5557 (TTY: 711) पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। 1-855-699-5557 (TTY: 711) पर कॉल करें। ये सेवाएं निःशुल्क हैं।

**Nge Lus Hmoob (Hmong) Cob** CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau 1-855-699-5557 (TTY: 711). Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau 1-855-699-5557 (TTY: 711). Cov kev pab cuam no yog pab dawb xwb.

**日本語表記 (Japanese)** 注意日本語での対応が必要な場合は 1-855-699-5557 (TTY: 711) へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。1-855-699-5557 (TTY: 711) へお電話ください。これらのサービスは無料で提供していますへお電話ください。これらのサービスは無料で提供しています。

**한국어 태그라인 (Korean)** 유의사항: 귀하의 언어로 도움을 받고 싶으시면 1-855-699-5557 (TTY: 711)번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-855-699-5557 (TTY: 711) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

**ແທກໄລພາສາລາວ (Laotian)** ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

**Mienh Tagline (Mien)** LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux 1-855-699-5557 (TTY: 711). Liouh lorx jauv-louc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hluo mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx 1-855-699-5557 (TTY: 711). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

**ਪੰਜਾਬੀ ਟੈਗਲਾਈਨ (Punjabi)** ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ 1-855-699-5557 (TTY: 711)। ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ 1-855-699-5557 (TTY: 711)। ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

**Русский слоган (Russian)** ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-855-699-5557 (линия TTY: 711). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-855-699-5557 (линия TTY: 711). Такие услуги предоставляются бесплатно.

**Mensaje en español (Spanish)** ATENCIÓN: Si necesita ayuda en su idioma, llame al 1-855-699-5557 (TTY: 711). Para las personas con discapacidades, también hay asistencia y servicios gratuitos disponibles, como documentos en braille y letra grande. Llame al 1-855-699-5557 (TTY: 711). Estos servicios son gratuitos.

**Tagalog Tagline** PAUNAWA: Kung kailangan ninyo ng tulong sa inyong wika, tumawag sa 1-855-699-5557 (TTY: 711). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malalaking titik. Tumawag sa 1-855-699-5557 (TTY: 711). Libre ang mga serbisyong ito.

**แท็กไลน์ภาษาไทย (Thai)** โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-855-699-5557 (TTY: 711) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-855-699-5557 (TTY: 711) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

**Примітка українською (Ukrainian)** УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-855-699-5557 (TTY: 711). Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер 1-855-699-5557 (TTY: 711). Ці послуги безкоштовні.

**Khẩu hiệu tiếng Việt (Vietnamese)** CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-855-699-5557 (TTY: 711). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số 1-855-699-5557 (TTY: 711). Các dịch vụ này đều miễn phí.

# Table of Contents


A. Introduction ..... 6
Non-Discrimination Notice ..... 9
How to File a Grievance ..... 9
Blue Shield Promise Provider Network ..... 11
Provider Directory Physical Accessibility Indicators ..... 12
Accessibility Code Explanations ..... 13
How to Read the Provider Listing ..... 14
Timely Access to Care Standards ..... 15
B. Federally Qualified Health Clinics ..... 27
C. Primary Care Directory ..... 56
D. Specialist Provider Directory ..... 755
E. Hospital Directory - General Acute Care Hospital ..... 1619
F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF) ..... 1624
G. Community-Based Adult Services (CBAS) - Adult Day Services ..... 1629
H. County In-Home Support Services (IHSS) ..... 1633
I. Mental Health Directory ..... 1634
J. Vision Provider Directory - Eye & Vision Services ..... 1724
K. Other Services Providers (Community Supports, Enhanced Care Management) ..... 1851
L. Blue Shield Promise Urgent Care Facilities ..... 1880
M. Primary Care Index ..... 1915

# A. Introduction

Thank you for choosing Blue Shield of California Promise Health Plan. This Provider Directory lists clinics, doctors, hospitals, and other types of providers that are part of Blue Shield of California Promise Health Plan.

When you join Blue Shield of California Promise Health Plan, it is important you choose a primary care physician (PCP) for each member. If you do not choose one, Blue Shield Promise will choose one for you. Your PCP will be the doctor you will go to for preventive care and when you become ill. Your PCP will send you to a specialist physician or other specialist provider when needed. The PCP is there to attend to your healthcare needs and work with members to keep them healthy.

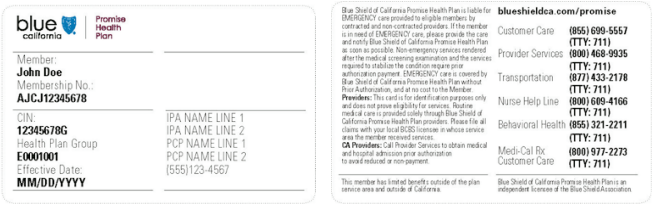
## Changing your PCP

You may change your PCP at any time by calling Blue Shield Promise Customer Care **(855) 699-5557** [TTY: **711**]. Changes will not be effective until the first of the following month. You can also visit our website at: **blueshieldca.com/promise**.

As a member of Blue Shield of California Promise Health Plan, you will receive a member ID card like the one pictured on this page. You will need to show this ID card each time you see your doctor, use the emergency room, or see your eye doctor. Keep this card with you at all times.

When you get your ID card, please make sure that it is correct. If it is not, call Blue Shield of California Promise Health Plan Customer Care at **(855) 699-5557**.

Do not throw your Medi-Cal (BIC) card away. You will need to use your Medi-Cal (BIC) card to see your Medi-Cal dentist and to get other healthcare services that are not covered by Blue Shield of California Promise Health Plan.




*Blue Shield Identification Card (BIC)*

## Pharmacy Services through Medi-Cal Rx

The Department of Health Care Services (DHCS) manages pharmacy services for Medi-Cal members. For Pharmacy Services, you can call the Medi-Cal Rx Call Center Line **1-800-977-2273** twenty-four hours a day, seven days a week or 711 for TTY, Monday thru Friday, 8am to 5pm.

Most pharmacies will accept Medi-Cal Rx. You can contact the Medi-Cal Member Help Line (1-800-541-5555, TTY 1-800-430-7077) to ask if your pharmacy will accept Medi-Cal Rx. If you

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

need help finding a pharmacy, use the Medi-Cal Rx Pharmacy Locator online at: www.Medi-CalRx.dhcs.ca.gov or call the Medi-Cal Rx Call Center Line at **1-800-977-2273**.

## How to use this directory

You can use this Provider Directory to choose a Blue Shield Promise contracted PCP. The PCPs, along with specialist providers, hospitals, and other support providers, are listed alphabetically by city. In the "Blue Shield Promise provider network" section, you will find information about how to read the provider listing sections, and how to find the important information you need to know about each provider.

## Important information about the directory listings

This Provider Directory is updated according to the date listed on the front cover. Some PCPs may have been added or removed after this directory was printed. We do not guarantee that each PCP is still accepting new members. To get the most up-to- date information about PCPs in your area, you can visit **blueshieldca.com/promise** or call Blue Shield Promise Customer Care toll-free at **(855) 699-5557** (TTY: **711**). Or visit our office Monday through Friday from 8 a.m. to 6 p.m. Walk-ins are welcome. We have staff who speak your language. You can also visit our website at **blueshieldca.com/promise**.

## Other important information and disclosures

Some providers and hospitals do not offer one or more of the following services that may be covered by your health plan that you may need like family planning; birth control including emergency birth control; sterilization including tubal ligation at the time of labor and delivery; infertility treatment; or abortion.

Call Blue Shield Promise Customer Care at **(855) 699-5557** to ensure that you can get the healthcare services you need.

For more information about our providers, including their education and experience (such as medical schools they went to, residency training, and board certification status), call Blue Shield Promise Customer Care or use the provider search tool on our website at **blueshieldca.com/promise**.

Authorization or referrals may be required to access some providers. Blue Shield Promise provides full and equal access to covered services, including enrollees with disabilities. All providers are offered and have to complete cultural competency training.

## Interpreter services

To make it easier for you, Blue Shield Promise provides:

- **Bilingual** staff to help you in your language.
- **Interpreter services**, including American

Sign Language, at no cost to you for all of your healthcare needs. You don't need to ask friends or family members to interpret for you. You can get interpreter services 24 hours a day, seven days a week for:

- ✓ **Medical services:** Doctor visits, after- hours services, urgent care services, and health education classes.
- ✓ **Non-medical services:** Customer service, member complaints, and member orientation meetings.
- ✓ **Materials in other formats** such as Braille, audio, or large print.

All you need to do is call your medical group or Blue Shield Promise Customer Care. For scheduled appointments, make sure you ask for an interpreter at least ten (10) working days before your appointment.

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

blue california
Promise Health Plan

## NONDISCRIMINATION NOTICE

Discrimination is against the law. Blue Shield of California Promise Health Plan follows State and Federal civil rights laws. Blue Shield of California Promise Health Plan does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

Blue Shield of California Promise Health Plan provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as:
  - ✓ Qualified interpreters
  - ✓ Information written in other languages

If you need these services, contact Blue Shield of California Promise Health Plan between 8 a.m.to 6 p.m., Monday through Friday. Call Customer Service in your region:

**(800) 605-2556 (Los Angeles)**
**(855) 699-5557 (San Diego)**

If you cannot hear or speak well, please call **TTY: 711.** Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Blue Shield of California Promise Health Plan Customer Service
3840 Kilroy Airport Way, Long Beach, CA 90806
(800) 605-2556 (Los Angeles)
(855) 699-5557 (San Diego)
TTY: 711

## HOW TO FILE A GRIEVANCE

If you believe that Blue Shield of California Promise Health Plan has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with Blue Shield of California Promise Health Plan's Civil Rights Coordinator. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact Blue Shield of California Promise Health Plan's Civil Rights Coordinator between 8 a.m. to 6 p.m., Monday through Friday by calling (844) 883-2233. Or, if you cannot hear or speak well, please call TTY/TDD 711.

- In writing: Fill out a complaint form or write a letter and send itto:

  Blue Shield of California Promise Health Plan Civil Rights Coordinator
  3840 Kilroy Airport Way, Long Beach, CA 90806

- In person: Visit your doctor's office or Blue Shield of California Promise Health Plan and say you want to file a grievance.
- Electronically: Visit Blue Shield of California Promise Health Plan's website at **www.blueshieldca.com/promise/medi-cal**.

## OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (Telecommunications Relay Service).**
- In writing: Fill out a complaint form or send a letter to:

  **Deputy Director, Office of Civil Rights Department of Health Care Services**
  **P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413**

  Complaint forms are available at http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

- Electronically: Send an email to CivilRights@dhcs.ca.gov.

## OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call **1-800-368-1019**. If you cannot speak or hear well, please call TTY/TDD 1-800-537-7697.
- In writing: Fill out a complaint form or send a letterto

  **U.S. Department of Health and Human Services**
  **200 Independence Avenue, SW, Room 509F, HHH Building**
  **Washington, D.C. 20201**

  Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

- Electronically: Visit the Office for Civil Rights Complaint Portal at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf.

# Blue Shield Promise Provider Network

## Definitions and General Information

**Community clinic:** A nonprofit clinic that provides healthcare services to Blue Shield Promise members.

**Family and General Practice:** Doctors who treat children and adult men and women.

**Federally Qualified Health Center (FQHC):** A community-based organization that provides primary and preventive care to persons of all ages, regardless of their ability to pay or their health insurance status.

**Hospital:** Blue Shield Promise contracts with many hospitals. Check the hospital affiliation of the primary care physician you want to choose.

**Internal Medicine:** Doctors who treat adult men and women over the age 18.

**Independent Practice Association (IPA):** A healthcare model that contracts with a group of physicians to provide healthcare services.

### Provider Directory Key

Provider is not accepting new patients in this health network

Provider address

Provider phone number

Provider after-hours phone number

Language spoken at this provider office

Provider office hours

Accessibility information

Provider website

**Medical group:** A group of physicians that provides healthcare services to Blue Shield Promise members.

**Obstetrics/Gynecology:** Doctors who specialize in women's health and maternity care.

**Pediatrics:** Doctors who treat children up to age 18.

**Primary care physician (PCP):** As a Blue Shield Promise member, you must choose a PCP for your general healthcare needs. If you do not choose a PCP, we will choose one for you. All PCPs are listed by city. You can choose any of the following types of doctors:

- Family and General Practice
- Internal Medicine
- Obstetrics/Gynecology
- Pediatrics

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

# Provider Directory Physical Accessibility Indicator

Below you can find information on basic access needs for seniors and people with disabilities (SPD) when visiting a doctor's office. We know that member needs vary. Therefore, we ask members to call the doctor's office to discuss their access needs.

### E = Exam Room

The entrance to the exam room is accessible, with a clear path. The doors open wide enough to accommodate a wheelchair or scooter and are easy to open. The exam room has enough room for a wheelchair or scooter.

### EB = Exterior Building

Curb ramps and other ramps to the building are wide enough for a wheelchair or a scooter user. Handrails are provided on both sides of the ramp. There is an "accessible" entrance to the building. Doors open wide enough to let a wheelchair or scooter user enter, and have handles that are easy to use.

### IB = Interior Building

Doors open wide enough to let a wheelchair or scooter user enter, and have handles that are easy to use. Interior ramps are wide enough and have handrails. Stairs, if present, have handrails.
If there is an elevator, it is available for the public and patients to use at all times the building is open. The elevator has easy-to-hear sounds and Braille buttons within reach. The elevator has enough room for a wheelchair or a scooter user to turn around. If there is a platform lift, it can be used without help.

### P = Parking

Parking spaces, including van-accessible space(s), are accessible. Pathways have curb ramps between the parking lot, the office, and drop-off locations.

### R = Restroom

The restroom is accessible and the doors are easy to open and open wide enough to accommodate a wheelchair or scooter. The restroom has enough room for a wheelchair or scooter user to turn around and close the door. There are grab bars that allow easy transfer from wheelchair/scooter to toilet. The sink is easy to get to and the faucets, soap, and toilet paper are easy to reach and use.

### T = Exam Table/Scale

The exam table moves up and down, and the scale is accessible with handrails to assist people with wheelchairs and scooters. The weight scale is able to accommodate a wheelchair.

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

# Accessibility Code Explanations

| CODE | Explanation |
|---|---|
| P | **Parking** |
| EB | **Exterior Building** |
| IB | **Interior Building** |
| W | **Wheelchair** |
| R | **Restroom** |
| E | **Exam Room** |
| T | **Exam Table/Scale** |

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

# How to Read the Provider Listing

**The following information can help you choose your Primary Care Physician.**

1. Provider’s medical specialty
2. Provider’s name, License Type
3. Provider’s ID number
4. Provider’s gender
5. Provider’s license number
6. Provider’s NPI number
7. Languages spoken by the provider and staff
8. Cultural competency training
9. Hospital affiliations
10. Board Certified Specialty:
11. FQHC/Medical Group's Name
12. Provider's address
13. Provider's phone number
14. Provider's fax number
15. Provider’s website
16. Provider’s email address
17. Medi-Cal Open Panel:
18. Min/Max Age:
19. Building access for person with disabilities
20. Provider's office hours
21. Accepting New Patients

**Example:**

1. Pediatrics
2. Doe, Jane, MD
3. Provider ID: 00A2123456
4. Female
5. License number 00A123456
6. NPI: 0123456789
7. English, Spanish, Vietnamese, Farsi
8. Yes
9. Good Samaritan Hospital
10. Pediatrics
11. Northeast County Community Clinic
12. 3840 Kilroy Airport Way
    Long Beach, CA 90806
13. (855) 699-5557
14. (855) 699-5557
15. www.northeastclinic.com
16. doctordoe@gmail.com
17. Yes/No
18. 0-18
19. Limited. P, EB, IB, E
20. M-F 8AM-5PM
21. Yes

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

# Timely Access to Care Standards

| Appointment Type: | Must Get Appointment Within: |
|---|---|
| **Urgent care appointments that do not require pre-approval (prior authorization)** | **48 hours** |
| **Urgent care appointments that do require pre-approval (prior authorization)** | **96 hours** |
| **Non-urgent primary care appointments** | **10 business days** |
| **Non-urgent specialist** | **15 business days** |
| **Non-urgent mental health provider (non-physician)** | **10 business days** |
| **Non-urgent appointment for ancillary services for the diagnosis or treatment of injury, illness, or other health condition** | **15 business day** |
| **Telephone wait times during normal business hour** | **10 minutes** |
| **Triage – 24/7 services** | **24/7 services – No more than 30 minutes** |

Contact Blue Shield Promise Customer Service at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at **blueshieldca.com/promise/medi-cal**. Information in this provider directory is subject to change.

**Certified Nurse Practitioner**
**GILBERT, TARI**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* NP10378
*NPI#:* 1811248347
4168 FRONT ST FL 3
San Diego, CA 92103
(858) 657-8000

**Dermatology**
**ORTIZ, ARISA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A101163
*NPI#:* 1659556165
8899 UNIVERSITY CENTER LN STE 350
San Diego, CA 92122
(858) 657-8322

**Endocrinology Metabolism Diabetes**
**MCCOWEN, KAREN**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* C127993
*NPI#:* 1972541274
4910 DIRECTORS PL
San Diego, CA 92121
(858) 249-5400

**Endocrinology Metabolism Diabetes**
**MCCOWEN, KAREN**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* C127993
*NPI#:* 1972541274
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Endocrinology Metabolism Diabetes**
**MCCOWEN, KAREN**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* C127993
*NPI#:* 1972541274
9350 CAMPUS POINT DR
La Jolla, CA 92037
(858) 657-1636

**Endocrinology Metabolism Diabetes Internal Medicine**
**MIMOTO, MIZUHO**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A156492
*NPI#:* 1497019178
4168 FRONT ST
San Diego, CA 92103
(858) 657-1636

**Family Practice**
**Celebi, Julie**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A128154
*NPI#:* 1194080911
330 LEWIS ST
San Diego, CA 92103
(800) 926-8273

**Family Practice**
**FRASER, KEVIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A191678
*NPI#:* 1528684131
6655 ALVARADO RD
San Diego, CA 92120
(800) 926-8273

**Infectious Disease**
**Blumenthal, Jill**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A117338
*NPI#:* 1336308378
4168 FRONT ST FL 3
San Diego, CA 92103
(619) 543-3995

**Infectious Disease**
**Blumenthal, Jill**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A117338
*NPI#:* 1336308378
4168 FRONT ST
San Diego, CA 92103
(619) 543-6146

**Infectious Disease**
**WAGNER, GABRIEL**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A108967
*NPI#:* 1992962245
4168 FRONT ST
San Diego, CA 92103
(619) 543-3995

**Infectious Disease Internal Medicine**
**SITAPATI, AMY**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A70282
*NPI#:* 1730261975
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

**Infectious Disease Internal Medicine**
**SITAPATI, AMY**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A70282
*NPI#:* 1730261975
8899 UNIVERSITY CENTER LN STE 400
San Diego, CA 92122
(800) 926-8273

**Internal Medicine**
**MENDEZ, ERIC**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A159874
*NPI#:* 1528599230
330 LEWIS ST
San Diego, CA 92103
(800) 926-8283

**Internal Medicine**
**MILLEN, MARLENE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A82559
*NPI#:* 1225101355
8899 UNIVERSITY CENTER LN STE 400
San Diego, CA 92122
(800) 926-8273

**Internal Medicine**
**MILLEN, MARLENE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A82559
*NPI#:* 1225101355
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

**Licensed Clinical Social Worker**
**GALLEGOS, GUADALUPE**
A Place of Growth
Licensed Clinical Social Worker
Female
*License #:* LCS116339
*NPI#:* 1073892956
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**BELTRAN, RITA**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC141565
*NPI#:* 1033758909
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**CORTES, YESENIA**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC106084
*NPI#:* 1821355280
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**LOPEZ, CARMINA**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC115636
*NPI#:* 1639564396
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**QUINTERO, GABRIELA**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC124310
*NPI#:* 1699159764
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**RAHLFS, KATELYN**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC121283
*NPI#:* 1578926192
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**ROSAS, JESSICA**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC126541
*NPI#:* 1124533427
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Marriage Family Therapist**
**Villasenor, Vanessa**
A Place of Growth
Marriage Family Therapist
Female
*License #:* MFC85865
*NPI#:* 1699020644
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

**Obstetrics / Gynecology**
**ALVARADO, JORGE**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A139473
*NPI#:* 1538588561
4168 FRONT ST
San Diego, CA 92103
(619) 543-7878

**Obstetrics / Gynecology**
**ALVARADO, JORGE**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A139473
*NPI#:* 1538588561
8910 VILLA LA JOLLA DR STE 200
La Jolla, CA 92037
(858) 657-8745

**Obstetrics / Gynecology**
**ALVARADO, JORGE**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A139473
*NPI#:* 1538588561
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

**Obstetrics / Gynecology**
**FRUGONI, GINA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A99646
*NPI#:* 1578729315
4168 FRONT ST
San Diego, CA 92103
(619) 543-7878

**Obstetrics / Gynecology**
**FRUGONI, GINA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A99646
*NPI#:* 1578729315
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

**Obstetrics / Gynecology**
**FRUGONI, GINA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A99646
*NPI#:* 1578729315
9350 CAMPUS POINT DR STE LLC
La Jolla, CA 92037
(858) 657-8745

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
3855 HEALTH SCIENCES DR
La Jolla, CA 92093
(800) 926-8273

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
9300 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

**Otolaryngology**
**Vahabzadeh-Hagh, Andrew**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A128938
*NPI#:* 1346506920
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
9300 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Otolaryngology**
**WEISSBROD, PHILIP**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A118221
*NPI#:* 1366590853
3855 HEALTH SCIENCES DR
La Jolla, CA 92093
(800) 926-8273

**Pediatric Emergency Medicine Surgery Plastic**
**KANACK, MELISSA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A144388
*NPI#:* 1710373485
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Physicians Assistant**
**Nguyen, Khanh**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* PA22239
*NPI#:* 1427312644
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Psychiatry**
**Grelotti, David**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A133738
*NPI#:* 1619003035
200 W ARBOR DR
San Diego, CA 92103
(619) 543-6222

**Psychiatry Psychiatry Child**
**Grelotti, David**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A133738
*NPI#:* 1619003035
4168 FRONT ST FL 3
San Diego, CA 92103
(619) 543-3995

**Psychiatry Psychiatry Child**
**Grelotti, David**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A133738
*NPI#:* 1619003035
200 W ARBOR DR
San Diego, CA 92103
(619) 543-3995

**Psychiatry Psychiatry Child**
**Grelotti, David**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A133738
*NPI#:* 1619003035
4168 FRONT ST
San Diego, CA 92103
(619) 543-3995

**Speech Pathologist**
**Dockter, Andi**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* SP26061
*NPI#:* 1073150801
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

**Surgery General**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
200 W ARBOR DR
San Diego, CA 92103
(619) 543-6222

**Surgery General Surgery General Surgery Plastic Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
9300 CAMPUS POINT DR
La Jolla, CA 92037
(619) 294-3746

**Surgery General Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

**Surgery General Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
200 W ARBOR DR
San Diego, CA 92103
(858) 657-7105

**Surgery General Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

**Surgery General Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
1200 GARDEN VIEW RD STE 200
Encinitas, CA 92024
(760) 944-0223

**Surgery General Surgery Plastic**
**WALLACE, ANNE**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* G73000
*NPI#:* 1699732941
9350 CAMPUS POINT DR
La Jolla, CA 92037
(619) 543-6886

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
1200 GARDEN VIEW RD
Encinitas, CA 92024
(800) 926-8273

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
200 W ARBOR DR
San Diego, CA 92103
(858) 657-7105

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
9300 CAMPUS POINT DR
La Jolla, CA 92037
(858) 657-7000

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

**Surgery Plastic**
**GOSMAN, AMANDA**
UCSD MEDICAL GROUP
Physician Group Practice
Female
*License #:* A96153
*NPI#:* 1164436291
4520 EXECUTIVE DR STE 1
San Diego, CA 92121
(800) 926-8273

**Surgery Plastic**
**SULIMAN, AHMED**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A88033
*NPI#:* 1013169085
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

**Surgery Plastic**
**SULIMAN, AHMED**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A88033
*NPI#:* 1013169085
1200 GARDEN VIEW RD
Encinitas, CA 92024
(800) 926-8273

**Surgery Plastic**
**SULIMAN, AHMED**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A88033
*NPI#:* 1013169085
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

**Urology**
**HSIEH, TUNG CHIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A120604
*NPI#:* 1073758652
9850 GENESEE AVE STE 800
La Jolla, CA 92037
(800) 926-8273

**Urology**
**HSIEH, TUNG CHIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A120604
*NPI#:* 1073758652
9333 GENESEE AVE STE 320
San Diego, CA 92121
(858) 657-7876

**Urology**
**HSIEH, TUNG CHIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A120604
*NPI#:* 1073758652
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

**Urology**
**HSIEH, TUNG CHIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A120604
*NPI#:* 1073758652
11515 EL CAMINO REAL STE 110
San Diego, CA 92130
(800) 926-8273

**Urology**
**HSIEH, TUNG CHIN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A120604
*NPI#:* 1073758652
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

**Urology**
**PATEL, DARSHAN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A171285
*NPI#:* 1417342924
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

**Urology**
**PATEL, DARSHAN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A171285
*NPI#:* 1417342924
9333 GENESEE AVE
San Diego, CA 92121
(800) 926-8273

**Urology**
**PATEL, DARSHAN**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A171285
*NPI#:* 1417342924
9333 GENESEE AVE STE 320
San Diego, CA 92121
(800) 926-8273

**Urology**
**WOO, JASON**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A114634
*NPI#:* 1437380086
200 W ARBOR DR
San Diego, CA 92103
(619) 543-3572

**Urology**
**WOO, JASON**
UCSD MEDICAL GROUP
Physician Group Practice
Male
*License #:* A114634
*NPI#:* 1437380086
1671 W MAIN ST STE B
El Centro, CA 92243
(855) 543-0555

# B. Federally Qualified Health Clinics

## ALPINE

**SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**

*Provider ID: 517802*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*Fax: (619) 320-3347*

*After Hours Phone: (619) 662-4100*

*License Number: 090000681*

*NPI: 1770124315*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Arabic, Norwegian, Spanish, Swedish*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.mtnhealth.org*

## BORREGO SPRINGS

**DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR**

*Provider ID: 703466*

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

*Phone: (760) 767-5051*

*Fax: (760) 767-4552*

*After Hours Phone: (760) 767-5051*

*License Number: 080000651*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: DAP HEALTH INC*

*Website: N/A*

## CAMPO

**SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE**

*Provider ID: 519686*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*Fax: (619) 478-9164*

*After Hours Phone: (619) 662-4100*

*License Number: 090000660*

*NPI: 1174164719*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.syhealth.org*

## CARLSBAD

**TRUECARE**

*Provider ID: 480120*

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

*Phone: (760) 736-6767*

*Fax: (760) 736-8740*

*After Hours Phone: (760) 736-6767*

*License Number: 080000630*

*NPI: 1245246917*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM SA 8AM-2PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: N/A*

# B. Federally Qualified Health Clinics

**TRUECARE**
*Provider ID: 480120*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*License Number: 550003541*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**TRUECARE**
*Provider ID: 480120*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*License Number: 080000240*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

## CHULA VISTA

**SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS**
*Provider ID: 664445*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*License Number: 550002394*
*NPI: 1184135873*
*Accepting New Patients: Yes*
*Min/Max Age: 0\21*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**CHULA VISTA FAMILY HLTH CTR**
*Provider ID: 206355*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*Fax: (619) 397-1161*
*After Hours Phone: (619) 515-2500*
*License Number: 550002061*
*NPI: 1346480837*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH CHULA VISTA**
*Provider ID: 427322*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-6941*
*After Hours Phone: (619) 662-4100*

# B. Federally Qualified Health Clinics

*License Number: 550002394*
*NPI: 1326486861*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*
- *Hours: M-F 8AM-5PM SA 8AM-4PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
- *Website: www.syhealth.org*

**FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**
*Provider ID: 417641*
- 352 L ST
  CHULA VISTA, CA 91911
- *Phone: (619) 515-2325*

*Fax: (619) 420-0660*
- *After Hours Phone: (619) 515-2325*

*License Number: 550002305*
*NPI: 1083959464*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*

*Cultural Competency: N*
- *Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
- *Website: www.fhcsd.org*

## EL CAJON

**LA MAESTRA CHC EL CAJON BROADWAY**
*Provider ID: 418501*
- 1032 BROADWAY
  EL CAJON, CA 92021
- *Phone: (619) 795-5991*

*Fax: (619) 795-5992*
- *After Hours Phone: (619) 795-5991*

*License Number: 550003567*
*NPI: 1134590086*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*

*Cultural Competency: N*
- *Hours: M-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
- *Website: www.lamaestra.org*

**LA MAESTRA CHC-REA AVE**
*Provider ID: 664824*
- 181 REA AVE
  EL CAJON, CA 92020
- *Phone: (619) 312-0347*

*Fax: (619) 510-4649*
- *After Hours Phone: (619) 312-0347*

*License Number: 090000378*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*

*Cultural Competency: N*
- *Hours: M-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
- *Website: www.lamaestra.org*

**SAN YSIDRO HEALTH EL CAJON**
*Provider ID: 569910*
- 875 EL CAJON BLVD
  EL CAJON, CA 92020
- *Phone: (619) 662-4100*

*Fax: (619) 785-3356*
- *After Hours Phone: (619) 662-4100*

*License Number: 550002514*
*NPI: 1568845741*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Arabic, Farsi, Russian, Latin*

*Cultural Competency: N*

# B. Federally Qualified Health Clinics

*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**DAP HEALTH-CENTRO MEDICO EL CAJON**
*Provider ID: 703462*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*License Number: 550000430*
*NPI: 1154480069*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: DAP HEALTH INC*
*Website: N/A*

**FAMILY HLTH CTR SAN DIEGO-EL CAJON**
*Provider ID: 418340*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*Fax: (619) 269-0191*
*After Hours Phone: (619) 515-2498*
*License Number: 550003553*
*NPI: 1932561198*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**LA MAESTRA FAMILY CLINIC INC**
*Provider ID: 185267*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*Fax: (619) 749-5480*
*After Hours Phone: (619) 312-0347*
*NPI: 1336353721*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

**CHASE AVENUE FAMILY HEALTH CTRS INC**
*Provider ID: 206354*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*Fax: (619) 593-7164*
*After Hours Phone: (619) 515-2499*
*License Number: 090000631*
*NPI: 1104861681*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

# B. Federally Qualified Health Clinics

## ESCONDIDO

**NEIGHBORHOOD HEALTHCARE ESCONDIDO**

*Provider ID: 206270*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*Fax: (360) 466-2745*

*After Hours Phone: (760) 520-8100*

*License Number: 080000397*

*NPI: 1598703647*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.ihpsocal.org*

**NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

*Provider ID: 424775*

426 N DATE ST
ESCONDIDO, CA 92025

*Phone: (760) 690-5900*

*Fax: (360) 462-2747*

*After Hours Phone: (760) 690-5900*

*License Number: 550000511*

*NPI: 1437335353*

*Accepting New Patients: Yes*

*Min/Max Age: 0\21*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: N/A*

**NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL**

*Provider ID: 206266*

425 N DATE ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8340*

*Fax: (360) 462-2752*

*After Hours Phone: (760) 520-8340*

*License Number: 080000657*

*NPI: 1265618185*

*Accepting New Patients: Yes*

*Min/Max Age: 0\21*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.ihpsocal.org*

**NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY**

*Provider ID: 206271*

728 E VALLEY PKWY
ESCONDIDO, CA 92025

*Phone: (760) 737-6900*

*Fax: (360) 462-2748*

*After Hours Phone: (760) 737-6900*

*License Number: 080000158*

*NPI: 1720264641*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: N/A*

**DAP HEALTH-CENTRO MEDICO ESCONDIDO**

*Provider ID: 703482*

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

*Phone: (760) 871-0606*

*Fax: (858) 634-6918*

*After Hours Phone: (760) 871-0606*

*License Number: 550001260*

*NPI: 1023349883*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: DAP HEALTH INC*
*Website: N/A*

**SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**
*Provider ID: 588941*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (760) 745-7847*
*After Hours Phone: (619) 662-4100*
*License Number: 550008430*
*NPI: 1801438239*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Farsi, Spanish, Tagalog*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**ESCONDIDO FAMILY HEALTH CENTER**
*Provider ID: 652372*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (619) 515-2474*
*After Hours Phone: (619) 515-2474*
*License Number: 550002865*
*NPI: 1417640491*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: N/A*

## FALLBROOK

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000002*
*NPI: 1316501562*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000745*
*NPI: 1316501562*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommu*

*nityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 550003781*
*NPI: 1316501562*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 550004110*
*NPI: 1316501562*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000002*
*NPI: 1851300123*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000745*
*NPI: 1851300123*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 550003781*
*NPI: 1851300123*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*

# B. Federally Qualified Health Clinics

*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 550004110*
*NPI: 1851300123*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000002*
*NPI: 1649662719*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 080000745*
*NPI: 1649662719*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 624122*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*License Number: 550004110*
*NPI: 1649662719*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

# B. Federally Qualified Health Clinics

**FALLBROOK FAMILY HLTH CTR**

*Provider ID: 183910*

1328 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 451-4720*

*Fax: (760) 451-4700*

*After Hours Phone: (760) 451-4720*

*License Number: 080000150*

*NPI: 1982756086*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: N/A*

**VISTA COMMUNITY CLINIC**

*Provider ID: 624122*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*License Number: 550003781*

*NPI: 1649662719*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

## IMPERIAL BEACH

**IMPERIAL BEACH HEALTH CENTER**

*Provider ID: 179678*

949 PALM AVE
IMPERIAL BEACH, CA 91932

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*License Number: 090000119*

*NPI: 1790718351*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.ihpsocal.org*

## JULIAN

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE**

*Provider ID: 664467*

2721 WASHINGTON ST
JULIAN, CA 92036

*Phone: (619) 662-4100*

*Fax: (760) 765-1278*

*After Hours Phone: (619) 662-4100*

*License Number: 550002514*

*NPI: 1235804139*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish, Japanese*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.syhealth.org*

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE**

*Provider ID: 664467*

2721 WASHINGTON ST
JULIAN, CA 92036

*Phone: (619) 662-4100*

# B. Federally Qualified Health Clinics

*Fax: (760) 765-1278*
*After Hours Phone: (619) 662-4100*
*License Number: 550002514*
*NPI: 1235804139*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Japanese*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

## LAKESIDE

**NEIGHBORHOOD HEALTHCARE LAKESIDE**
*Provider ID: 353843*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*Fax: (360) 462-2744*
*After Hours Phone: (858) 218-3000*
*License Number: 080000483*
*NPI: 1932384120*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

## LEMON GROVE

**LEMON GROVE FAMILY HEALTH CENTER**
*Provider ID: 419139*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*Fax: (619) 825-9577*
*After Hours Phone: (619) 515-2550*
*License Number: 550001268*
*NPI: 1427282466*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: N/A*

## NATIONAL CITY

**FAMILY HEALTH CTR SD NATIONAL CITY**
*Provider ID: 418930*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2399*
*License Number: 550000465*
*NPI: 1417409228*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH PARADISE HILLS**
*Provider ID: 227418*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2811*

# B. Federally Qualified Health Clinics

*After Hours Phone: (619) 662-4100*
*License Number: 550001126*
*NPI: 1598907487*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog, Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**SAN YSIDRO HEALTH SOUTH BAY**

*Provider ID: 361428*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 434-3514*
*After Hours Phone: (619) 662-4100*
*License Number: 550003806*
*NPI: 1851757215*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185270*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*NPI: 1336353721*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: TH 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

**OPERATION SAMAHAN GRANGER SCHOOL BASED**

*Provider ID: 418302*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-8999*
*After Hours Phone: (844) 200-2426*
*License Number: 550002622*
*NPI: 1205134517*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**SAN YSIDRO HEALTH NATIONAL CITY**

*Provider ID: 227412*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 474-3722*
*After Hours Phone: (619) 662-4100*
*License Number: 090000136*
*NPI: 1003869363*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*

# B. Federally Qualified Health Clinics

*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**OPERATION SAMAHAN - NATIONAL C**
*Provider ID: 417102*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 474-3919*
*After Hours Phone: (844) 200-2426*
*License Number: 090000183*
*NPI: 1801907449*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog, Lao, Spanish*
*Cultural Competency: N*
*Hours: M-TH 8AM-6PM F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

## OCEANSIDE

**TRUECARE**
*Provider ID: 480247*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000531*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**TRUECARE**
*Provider ID: 480247*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000637*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**VISTA COMMUNITY CLINIC HORNE STREET**
*Provider ID: 402436*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000745*
*NPI: 1609094036*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC HORNE STREET**
*Provider ID: 402436*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*

# B. Federally Qualified Health Clinics

*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000745*
*NPI: 1609094036*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC PIER VIEW WAY**
*Provider ID: 402434*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000510*
*NPI: 1629357355*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC PIER VIEW WAY**
*Provider ID: 402434*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000510*
*NPI: 1629357355*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000002*
*NPI: 1316501562*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000745*
*NPI: 1316501562*
*Accepting New Patients: Yes*

*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 550003781*
*NPI: 1316501562*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 550004110*
*NPI: 1316501562*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000002*
*NPI: 1649662719*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000745*
*NPI: 1649662719*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*

# B. Federally Qualified Health Clinics

*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 550003781*
*NPI: 1649662719*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 550004110*
*NPI: 1649662719*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000002*
*NPI: 1851300123*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206341*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*License Number: 080000745*
*NPI: 1851300123*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# B. Federally Qualified Health Clinics

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**

*Provider ID: 206341*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*License Number: 550003781*

*NPI: 1851300123*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**

*Provider ID: 206341*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*License Number: 550004110*

*NPI: 1851300123*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

## POWAY

**NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER**

*Provider ID: 481187*

13010 POWAY RD
POWAY, CA 92064

*Phone: (858) 218-3000*

*Fax: (360) 462-2742*

*After Hours Phone: (858) 218-3000*

*License Number: 550004321*

*NPI: 1023518768*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: N/A*

## RAMONA

**TRUECARE**

*Provider ID: 449438*

220 ROTANZI ST
RAMONA, CA 92065

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

*After Hours Phone: (760) 736-6767*

*License Number: 080000149*

*NPI: 1245246917*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.ihpsocal.org*

# B. Federally Qualified Health Clinics

**SAN DIEGO**

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*License Number: 550002478*

*NPI: 1699216622*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*License Number: 550003857*

*NPI: 1699216622*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*License Number: 550002478*

*NPI: 1699216622*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*License Number: 550003857*

*NPI: 1699216622*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*License Number: 550003857*

*NPI: 1699216622*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM*

# B. Federally Qualified Health Clinics

*TH-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**
*Provider ID: 432308*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*Fax: (858) 536-8034*
*After Hours Phone: (844) 200-2426*
*License Number: 080000146*
*NPI: 1861933897*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**
*Provider ID: 417101*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*License Number: 080000146*
*NPI: 1871680397*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**
*Provider ID: 517403*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*Fax: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*License Number: 090000136*
*NPI: 1598308926*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER**
*Provider ID: 403583*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*License Number: 090000297*
*NPI: 1659415131*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**KING CHAVEZ HEALTH CENTER**
*Provider ID: 451167*

# B. Federally Qualified Health Clinics

950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*License Number: 090000660*
*NPI: 1538262092*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-12PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**SAN YSIDRO HEALTH CHC - OCEAN VIEW**

*Provider ID: 227409*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 232-5922*
*After Hours Phone: (619) 662-4100*
*License Number: 090000143*
*NPI: 1326225632*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: , Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 624977*
2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*Fax: (619) 232-7011*
*After Hours Phone: (619) 515-2355*
*NPI: 1447281936*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

*Provider ID: 664747*
2114 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2406*
*After Hours Phone: (619) 515-2406*
*License Number: 550003556*
*NPI: 1336525906*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 501-0627*
*After Hours Phone: (619) 515-2424*
*License Number: 090000469*
*NPI: 1700821303*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL):*

# B. Federally Qualified Health Clinics

*N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

*Website: www.fhcsd.org*

**SAN DIEGO AMERICAN INDIAN HEALTH CENTER**

*Provider ID: 207382*

2630 1ST AVE
SAN DIEGO, CA 92103

*Phone: (619) 234-2158*

*Fax: (619) 234-0206*

*After Hours Phone: (619) 234-2158*

*License Number: 090000168*

*NPI: 1003902917*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Korean, Spanish, Hindi*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: WWW.SDAIHC.ORG*

*Indian Health Services: Y*

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

*Provider ID: 418142*

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

*Phone: (619) 515-2454*

*Fax: (619) 794-2696*

*After Hours Phone: (619) 515-2454*

*License Number: 550003556*

*NPI: 1336525906*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

*Website: www.fhcsd.org*

**FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE**

*Provider ID: 417429*

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

*Phone: (619) 515-2525*

*Fax: (619) 501-5814*

*After Hours Phone: (619) 515-2525*

*License Number: 550002865*

*NPI: 1356750376*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

*Website: www.fhcsd.org*

**DOWNTOWN FAMILY CTR AT CONNECTIONS**

*Provider ID: 417782*

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

*Phone: (619) 515-2430*

*Fax: (619) 578-2410*

*After Hours Phone: (619) 515-2430*

*License Number: 550002251*

*NPI: 1588901045*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN*

# B. Federally Qualified Health Clinics

*DIEGO*
*Website: www.fhcsd.org*

**LA MAESTRA FAMILY CLINIC INC**
*Provider ID: 185268*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*Fax: (619) 795-9849*
*After Hours Phone: (619) 255-9155*
*NPI: 1336353721*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

**LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT**
*Provider ID: 708497*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*Fax: (619) 510-4649*
*After Hours Phone: (619) 312-0347*
*License Number: 090000378*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: N/A*

**FAMILY HLTH CTR SD HILLCREST**
*Provider ID: 417937*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*License Number: 550003099*
*NPI: 1629456900*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-TH 8AM-9PM F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HEALTH CTR OF SD-ELM ST**
*Provider ID: 419167*
140 ELM ST
SAN DIEGO, CA 92101
*Phone: (619) 515-2520*
*Fax: (619) 231-0431*
*After Hours Phone: (619) 515-2520*
*License Number: 550002061*
*NPI: 1316419070*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*Fax: (619) 263-2499*
*After Hours Phone: (619) 515-2560*
*License Number: 550000465*
*NPI: 1982747671*

# B. Federally Qualified Health Clinics

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL**
*Provider ID: 419529*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2422*
*License Number: 550003113*
*NPI: 1235521782*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SHERMAN HEIGHTS FAMILY HLTH CTRS INC**
*Provider ID: 356145*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*Fax: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*License Number: 090000565*
*NPI: 1174549232*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: N/A*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 501-0627*
*After Hours Phone: (619) 515-2424*
*License Number: 090000469*
*NPI: 1184169963*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 416831*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 683-7586*
*After Hours Phone: (619) 515-2424*
*License Number: 090000469*
*NPI: 1700821303*
*Accepting New Patients: Yes*
*Min/Max Age: 0\18*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-TH 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

# B. Federally Qualified Health Clinics

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**
*Provider ID: 402851*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*Fax: (858) 488-1394*
*After Hours Phone: (619) 515-2444*
*License Number: 080000115*
*NPI: 1386689701*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED**
*Provider ID: 517998*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*Fax: (619) 824-9076*
*After Hours Phone: (619) 662-4100*
*License Number: 550003882*
*NPI: 1205477841*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**FAMILY HEALTH CTR IBARRA**
*Provider ID: 417987*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*Fax: (619) 255-8002*
*After Hours Phone: (619) 515-2426*
*License Number: 550003108*
*NPI: 1477953933*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**MID-CITY COMMUNITY CLINIC**
*Provider ID: 233597*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*NPI: 1962483040*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*Provider ID: 233532*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619)*

# B. Federally Qualified Health Clinics

*280-2058*
*NPI: 1962483040*
*Accepting New Patients: Yes*
*Min/Max Age: 0\22*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.sdfamilycare.org*

**LINDA VISTA HEALTH CARE CTR**

*Provider ID: 206046*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*License Number: 080000069*
*NPI: 1609905215*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.sdfamilycare.org*

**LINDA VISTA HEALTH CARE CTR**

*Provider ID: 206046*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*License Number: 080000069*
*NPI: 1780665877*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.sdfamilycare.org*

**SAN DIEGO FAMILY CARE**

*Provider ID: 482070*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*License Number: 550003427*
*NPI: 1457724858*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese*
*Cultural Competency: N*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.sdfamilycare.org*

**LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 234-2447*
*After Hours Phone: (619)*

*515-2300*
*NPI: 1447281936*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH PRECISION PARK**
*Provider ID: 631494*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*
*License Number: 550007737*
*NPI: 1124782685*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.syhealth.org*

**NESTOR COMMUNITY HEALTH CENTER**
*Provider ID: 214492*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*License Number: 550001474*
*NPI: 1215246996*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M 8:30AM-5PM*
*TU-TH 8:30AM-8PM*
*F 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ibclinic.org*

## SAN MARCOS

**TRUECARE**
*Provider ID: 206426*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1811617939*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 206426*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1598484255*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 206426*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 614511*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1245246917*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 614511*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1598484255*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 614511*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*License Number: 080000167*
*NPI: 1811617939*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: www.ihpsocal.org*

## SAN YSIDRO

**SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**
*Provider ID: 227469*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*

# B. Federally Qualified Health Clinics

*License Number: 550002823*
*NPI: 1801438239*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: , Spanish*

*Cultural Competency: N*
- *Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
- *Website: www.syhealth.org*

**SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**
*Provider ID: 206292*
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

*Fax: (619) 205-6341*
- *After Hours Phone: (619) 662-4100*

*NPI: 1952364747*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

*Cultural Competency: N*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
- *Website: www.syhealth.org*

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**
*Provider ID: 227411*
- 4050 BEYER BLVD
  SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

*Fax: (619) 205-1967*
- *After Hours Phone: (619) 662-4100*

*License Number: 550004555*
*NPI: 1558852947*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*
- *Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
- *Website: www.syhealth.org*

## SANTEE

**SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE**
*Provider ID: 520609*
- 120 TOWN CENTER PKWY
  SANTEE, CA 92071
- *Phone: (619) 662-4100*

*Fax: (619) 873-3476*
- *After Hours Phone: (619) 662-4100*

*License Number: 550003575*
*NPI: 1376184911*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Arabic, Spanish*

*Cultural Competency: N*
- *Hours: M-F 8AM-5PM*

*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
- *Website: www.syhealth.org*

## SPRING VALLEY

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
*Provider ID: 206361*
- 8788 JAMACHA RD
  SPRING VALLEY, CA 91977
- *Phone: (619) 515-2555*

*Fax: (619) 462-5584*
- *After Hours Phone: (619) 515-2555*

*License Number: 090000593*
*NPI: 1508801069*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

# B. Federally Qualified Health Clinics

*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**VALLEY CENTER**

**NEIGHBORHOOD HEALTHCARE**
*Provider ID: 519918*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*License Number: 080000397*
*NPI: 1437335148*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**NEIGHBORHOOD HEALTHCARE**
*Provider ID: 519918*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*License Number: 080000483*
*NPI: 1437335148*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**NEIGHBORHOOD HEALTHCARE**
*Provider ID: 519918*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*License Number: 080000483*
*NPI: 1437335148*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

**NEIGHBORHOOD HEALTHCARE**
*Provider ID: 519918*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*License Number: 080000397*
*NPI: 1437335148*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hours: M-F 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*
*Website: N/A*

# B. Federally Qualified Health Clinics

## VISTA

**VCC DURIAN**

*Provider ID: 411518*

105 DURIAN ST STE A
VISTA, CA 92083

*Phone: (844) 308-5003*

*Fax: (760) 414-3892*

*After Hours Phone: (844) 308-5003*

*License Number: 080000328*

*NPI: 1851300123*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5PM*
*TH-F 8:30AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

**VCC DURIAN**

*Provider ID: 411518*

105 DURIAN ST STE A
VISTA, CA 92083

*Phone: (844) 308-5003*

*Fax: (760) 414-3892*

*After Hours Phone: (844) 308-5003*

*License Number: 1851300123*

*NPI: 1851300123*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M-TU 8:30AM-5PM*
*TH-F 8:30AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC GRAPEVINE**

*Provider ID: 400339*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*License Number: 080000328*

*NPI: 1851300123*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CAL-PHP*

*Website: www.vistacommunityclinic.org*

# C. Primary Care Directory

## ALPINE

### CERTIFIED NURSE PRACTITIONER

**KAHL, NICHOLAS**

*License Type: NP*
*Provider Gender: Male*
*License Number: NP95006360*
*NPI: 1821306598*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE PRACTITIONER

**KAHL, NICHOLAS**

*License Type: NP*
*Provider Gender: Male*
*License Number: NP95006360*
*NPI: 1821306598*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE PRACTITIONER

**SANDERS, JESSICA**

*License Type: NP*
*Provider Gender: Female*
*License Number: NP23004*
*NPI: 1760765333*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE PRACTITIONER

**SANDERS, JESSICA**

*License Type: NP*
*Provider Gender: Female*
*License Number: NP23004*
*NPI: 1760765333*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE

# C. Primary Care Directory

**PRACTITIONER**

**TODD, MIKAYLA**

*License Type: NP*

*Provider Gender: Female*

*License Number: NP95005999*

*NPI: 1316478092*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**

*License Type: NP*

*Provider Gender: Female*

*License Number: NP95005999*

*NPI: 1316478092*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ABDULRAHIM, AHMED**

*License Type: DC*

*Provider Gender: Male*

*License Number: DC28335*

*NPI: 1619040292*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*Fax: (619) 205-6305*

*After Hours Phone: (619) 662-4100*

*Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ABDULRAHIM, AHMED**

*License Type: DC*

*Provider Gender: Male*

*License Number: DC28335*

*NPI: 1619040292*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*Fax: (619) 205-6305*

*After Hours Phone: (619) 662-4100*

*Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**KELCHNER, MATTHEW**

*License Type: DC*

*Provider Gender: Male*
*License Number: DC22733*
*NPI: 1174656755*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**KELCHNER, MATTHEW**
*License Type: DC*
*Provider Gender: Male*
*License Number: DC22733*
*NPI: 1174656755*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**BAUTISTA, LUIS**
*License Type: MD*
*Provider Gender: Male*
*License Number: A97270*
*NPI: 1295712206*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAUTISTA, LUIS**
*License Type: MD*
*Provider Gender: Male*
*License Number: A97270*
*NPI: 1295712206*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DUBE, BIANCA**
*License Type: MD*
*Provider Gender: Female*

*License Number: C172036*
*NPI: 1740535152*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DUBE, BIANCA**
*License Type: MD*
*Provider Gender: Female*
*License Number: C172036*
*NPI: 1740535152*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VAN HOLLEBEKE, RACHEL**
*License Type: MD*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: A177337*
*NPI: 1497217756*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VAN HOLLEBEKE, RACHEL**
*License Type: MD*
*Provider Gender: Female*
*License Number: A177337*
*NPI: 1497217756*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WYLIE, BLAKE**
*License Type: DO*
*Provider Gender: Male*
*License Number: 20A11088*
*NPI: 1922314145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WYLIE, BLAKE**
*License Type: DO*
*Provider Gender: Male*
*License Number: 20A11088*
*NPI: 1922314145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WYLIE, BLAKE**
*License Type: DO*
*Provider Gender: Male*
*License Number: 20A11088*
*NPI: 1922314145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**SAN YSIDRO HEALTH ALPINE**

# C. Primary Care Directory

**FAMILY MEDICINE,**
*NPI: 1770124315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 320-3347*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,**
*NPI: 1770124315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 320-3347*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**STENSMAN, LARS**
*License Type: MD*
*Provider Gender: Male*
*License Number: A158569*
*NPI: 1659638062*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**STENSMAN, LARS**
*License Type: MD*
*Provider Gender: Male*
*License Number: A158569*
*NPI: 1659638062*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BAISLEY, SHAWN**
*License Type: PA*
*Provider Gender: Male*
*License Number: PA52347*
*NPI: 1376936120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BAISLEY, SHAWN**
*License Type: PA*
*Provider Gender: Male*
*License Number: PA52347*
*NPI: 1376936120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## BORREGO SPRINGS

**DERMATOLOGY**

**ZELAC, DANIEL**
*License Type: MD*
*Provider ID: 313070*
*Provider Gender: Male*
*License Number: G85319*
*NPI: 1891709903*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*DAP HEALTH INC*
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
*Phone: (760) 767-5051*
*Fax: (760) 767-4552*
*After Hours Phone: (760) 767-5051*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**DERMATOLOGY**

**ZELAC, DANIEL**
*License Type: MD*
*Provider ID: 313070*
*Provider Gender: Male*
*License Number: G85319*
*NPI: 1891709903*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*DAP HEALTH INC*
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
*Phone: (760) 767-5051*
*Fax: (760) 767-4552*
*After Hours Phone: (760) 767-5051*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GHAFARI, DAUOD**
*License Type: MD*
*Provider ID: 313070*
*Provider Gender: Male*
*License Number: A98486*
*NPI: 1053417691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
*Phone: (760) 767-5051*
*Fax: (760) 767-4552*
*After Hours Phone: (760) 767-5051*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GHAFARI, DAUOD**
*License Type: MD*
*Provider ID: 313070*
*Provider Gender: Male*
*License Number: A98486*
*NPI: 1053417691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
*Phone: (760) 767-5051*
*Fax: (760) 767-4552*
*After Hours Phone: (760) 767-5051*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,**
*Provider ID: 313070*
*NPI: 1134144165*
*Provider English Spoken: Y*
*Cultural Competency: N*
*DAP HEALTH INC*
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
*Phone: (760) 767-5051*
*Fax: (760) 767-4552*
*After Hours Phone: (760) 767-5051*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FQHC**

**DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,**

*Provider ID: 313070*

*NPI: 1134144165*

*Provider English Spoken: Y*

*Cultural Competency: N*

*DAP HEALTH INC*

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

*Phone: (760) 767-5051*

*Fax: (760) 767-4552*

*After Hours Phone: (760) 767-5051*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**GREENWAY, HUBERT**

*License Type: MD*

*Provider ID: 313070*

*Provider Gender: Male*

*License Number: C39104*

*NPI: 1366419004*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Board Certified Specialty: No*

*DAP HEALTH INC*

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

*Phone: (760) 767-5051*

*Fax: (760) 767-4552*

*After Hours Phone: (760) 767-5051*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**GREENWAY, HUBERT**

*License Type: MD*

*Provider ID: 313070*

*Provider Gender: Male*

*License Number: C39104*

*NPI: 1366419004*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Board Certified Specialty: No*

*DAP HEALTH INC*

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

*Phone: (760) 767-5051*

*Fax: (760) 767-4552*

*After Hours Phone: (760) 767-5051*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CAMPO**

**CERTIFIED NURSE PRACTITIONER**

**LIEBER, CAROL**

*License Type: NP*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: NP20849*

*NPI: 1487889846*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIEBER, CAROL**

*License Type: NP*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: NP20849*

*NPI: 1487889846*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAUM, PETER**

*License Type: DO*

*Provider ID: 275112*

*Provider Gender: Male*

*License Number: 20A14949*

*NPI: 1174919971*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAUM, PETER**

*License Type: DO*

*Provider ID: 302751*

*Provider Gender: Male*

*NPI: 1174919971*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*Fax: (619) 824-9071*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 10AM-4PM*
*M-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*

**FAMILY PRACTICE**

**BAUM, PETER**

*License Type: DO*

*Provider ID: 275112*

*Provider Gender: Male*

*License Number: 20A14949*

*NPI: 1174919971*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*

**FAMILY PRACTICE**

**CAMPOS, PRISCILLA**

*License Type: MD*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: A152651*

*NPI: 1508217399*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CAMPOS, PRISCILLA**

*License Type: MD*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: A152651*

*NPI: 1508217399*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CORONADO, MYRNA**

*License Type: MD*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: A112627*

*NPI: 1710147566*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORONADO, MYRNA**

*License Type: MD*

*Provider ID: 275112*

*Provider Gender: Female*

*License Number: A112627*

*NPI: 1710147566*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 445-6200*
*After Hours Phone: (619) 445-6200*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 445-6200*
*After Hours Phone: (619) 445-6200*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MCINTYRE, RYAN**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A133029*
*NPI: 1164776555*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MCINTYRE, RYAN**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A133029*
*NPI: 1164776555*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A156607*
*NPI: 1356761571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A156607*
*NPI: 1356761571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROGERS, MATTHEW**
*License Type: DO*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: 20A18400*
*NPI: 1639606130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROGERS, MATTHEW**
*License Type: DO*
*Provider ID: 302754*
*Provider Gender: Male*
*NPI: 1639606130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 824-9071*
*After Hours Phone: (619)*

*662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ROGERS, MATTHEW**
*License Type: DO*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: 20A18400*
*NPI: 1639606130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SAIDRO, LUZVIMINDA**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: A93746*
*NPI: 1750364386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SAIDRO, LUZVIMINDA**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: A93746*
*NPI: 1750364386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,**
*Provider ID: 275112*
*NPI: 1174164719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 478-9164*
*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,**
*Provider ID: 275112*
*NPI: 1174164719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 478-9164*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**IBANEZ, SIR CEDRIC**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A112484*
*NPI: 1841496452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: NATIVIDAD MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**IBANEZ, SIR CEDRIC**
*License Type: MD*
*Provider ID: 275112*
*Provider Gender: Male*
*License Number: A112484*
*NPI: 1841496452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: NATIVIDAD MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 275112*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## CARLSBAD

**CERTIFIED NURSE PRACTITIONER**

**YOUNG, JENNIFER**
*License Type: NPF*
*Provider ID: 289874*
*Provider Gender: Female*
*License Number: NP95003087*
*NPI: 1558701094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**YOUNG, JENNIFER**
*License Type: NPF*
*Provider ID: 305300*
*Provider Gender: Female*
*License Number: NP95003087*
*NPI: 1558701094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**YOUNG, JENNIFER**
*License Type: NPF*
*Provider ID: 289874*
*Provider Gender: Female*
*License Number: NP95003087*
*NPI: 1558701094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**YOUNG, JENNIFER**
*License Type: NPF*
*Provider ID: 289874*
*Provider Gender: Female*
*License Number: NP95003087*
*NPI: 1558701094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**YOUNG, JENNIFER**
*License Type: NPF*
*Provider ID: 305300*
*Provider Gender: Female*
*License Number: NP95003087*
*NPI: 1558701094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289874*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289874*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**PEDIATRICS**

**BURGAMY, ELIZABETH**
*License Type: MD*
*Provider ID: 204602*
*Provider Gender: Female*
*NPI: 1164609558*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**IYENGAR, RADHA**
*License Type: MD*
*Provider ID: 305300*
*Provider Gender: Female*
*License Number: A49273*
*NPI: 1265448112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**IYENGAR, RADHA**
*License Type: MD*
*Provider ID: 289874*
*Provider Gender: Female*
*License Number: A49273*
*NPI: 1265448112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**IYENGAR, RADHA**
*License Type: MD*
*Provider ID: 289874*
*Provider Gender: Female*
*License Number: A49273*
*NPI: 1265448112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**IYENGAR, RADHA**
*License Type: MD*
*Provider ID: 305300*
*Provider Gender: Female*
*License Number: A49273*
*NPI: 1265448112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*

*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**PEDIATRICS**

**MUTH, NATALIE**
*License Type: MD*
*Provider ID: 204731*
*Provider Gender: Female*
*NPI: 1497982888*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**OCONNOR, ERICA**
*License Type: MD*
*Provider ID: 302621*
*Provider Gender: Female*
*NPI: 1134782725*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**TANAKA, MARY**
*License Type: MD*
*Provider ID: 241393*
*Provider Gender: Female*
*NPI: 1295962686*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## CHULA VISTA

**CERTIFIED NURSE PRACTITIONER**

**FERNANDEZ LEYVA, JUAN CARLOS**
*License Type: NP*

*Provider ID: 39174*
*Provider Gender: Male*
*License Number: NP95001964*
*NPI: 1194115568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FERNANDEZ LEYVA, JUAN CARLOS**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: NP95001964*
*NPI: 1194115568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**

*License Type: NP*

*Provider ID: 39174*

*Provider Gender: Female*

*License Number: NP10943*

*NPI: 1285772392*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**

*License Type: NP*

*Provider ID: 39174*

*Provider Gender: Female*

*License Number: NP10943*

*NPI: 1285772392*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**

*License Type: NP*

*Provider ID: 39174*

*Provider Gender: Female*

*License Number: NP95001492*

*NPI: 1073869145*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**

*License Type: NP*

*Provider ID: 39174*

*Provider Gender: Female*

*License Number: NP95001492*

*NPI: 1073869145*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUILALANG, SUSAN**

*License Type: RN*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: NP5579*

*NPI: 1841200482*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUILALANG, SUSAN**

*License Type: RN*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: RN371480*

*NPI: 1841200482*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUILALANG, SUSAN**

*License Type: RN*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: NP5579*

*NPI: 1841200482*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUILALANG, SUSAN**

*License Type: RN*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: RN371480*

*NPI: 1841200482*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUILALANG, SUSAN**

*License Type: RN*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: RN371480*

*NPI: 1841200482*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**

*License Type: NP*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: NP95015413*
*NPI: 1548683378*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**
*License Type: NP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: NP95015413*
*NPI: 1548683378*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SAUNDERS, DENISE**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP23687*
*NPI: 1952737033*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SAUNDERS, DENISE**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP23687*
*NPI: 1952737033*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SICKLES, MAGGIE**
*License Type: NP*

*Provider ID: 217488*
*Provider Gender: Female*
*License Number: NP22000*
*NPI: 1821346826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SICKLES, MAGGIE**
*License Type: NP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: NP22000*
*NPI: 1821346826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VEGA, TERESA**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP95001705*
*NPI: 1912304569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VEGA, TERESA**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP95001705*
*NPI: 1912304569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BOSTON, LAURA**
*License Type: CRNM*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NM792*
*NPI: 1174553259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BOSTON, LAURA**
*License Type: CRNM*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NM792*
*NPI: 1174553259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BOSTON, LAURA**
*License Type: CRNM*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: NM792*
*NPI: 1174553259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ABDULRAHIM, AHMED**
*License Type: DC*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: DC28335*
*NPI: 1619040292*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**ABDULRAHIM, AHMED**
*License Type: DC*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: DC28335*
*NPI: 1619040292*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HASHEM, SHIVA**
*License Type: DC*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: DC26269*
*NPI: 1952950776*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HASHEM, SHIVA**
*License Type: DC*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: DC26269*
*NPI: 1952950776*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**KAZEM, HARON**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC33295*

*NPI: 1306221262*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**KAZEM, HARON**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC33295*
*NPI: 1306221262*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**PLANTE, CHARLES**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC31963*
*NPI: 1760464960*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**PLANTE, CHARLES**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC31963*
*NPI: 1760464960*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**REYNOSO, ALFONSO**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC20760*
*NPI: 1285921627*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**REYNOSO, ALFONSO**
*License Type: DC*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DC20760*
*NPI: 1285921627*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CARRILLO, MARITZA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A163183*
*NPI: 1649628587*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CARRILLO, MARITZA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A163183*
*NPI: 1649628587*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CRUZ, MICHAEL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A138772*
*NPI: 1265851133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CRUZ, MICHAEL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A138772*
*NPI: 1265851133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALANIZ, MATEO**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A124388*
*NPI: 1700175577*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALANIZ, MATEO**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A124388*
*NPI: 1700175577*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**AMANAT, SOROOSH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A153022*
*NPI: 1003279621*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**FAMILY PRACTICE**

**AMANAT, SOROOSH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A153022*
*NPI: 1003279621*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**FAMILY PRACTICE**

**ARCE GOMEZ, LAURA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123604*
*NPI: 1053532986*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ARCE GOMEZ, LAURA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123604*
*NPI: 1053532986*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CAMPOS, MELISSA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A138474*
*NPI: 1427475318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CAMPOS, MELISSA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A138474*
*NPI: 1427475318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHERY, FARAH**
*License Type: MD*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CHERY, FARAH**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CHERY, FARAH**
*License Type: MD*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CHERY, FARAH**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**DY, DIANE**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A153344*
*NPI: 1467807560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DY, DIANE**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*

# C. Primary Care Directory

*License Number: A153344*
*NPI: 1467807560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GARCIA, KARLA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A120672*
*NPI: 1154647410*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**GARCIA, KARLA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A120672*
*NPI: 1154647410*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**HUBLEY, PAUL**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: A73172*
*NPI: 1568496974*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**FAMILY PRACTICE**

**HUBLEY, PAUL**

*License Type: MD*

*Provider ID: 39174*

*Provider Gender: Male*

*License Number: A73172*

*NPI: 1568496974*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**JIMENEZ, KRYSTAL**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A159831*

*NPI: 1922531250*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**JIMENEZ, KRYSTAL**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A159831*

*NPI: 1922531250*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**JOHNSON, DANIEL**

*License Type: DO*

*Provider ID: 217488*

*Provider Gender: Male*

*License Number: 20A9393*

*NPI: 1245311216*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**JOHNSON, DANIEL**

*License Type: DO*

*Provider ID: 217488*

*Provider Gender: Male*

*License Number: 20A9393*

*NPI: 1245311216*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LARA, LESLEY**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A173435*

*NPI: 1184112682*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 425-6941*

*After Hours Phone: (619) 425-6941*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**LARA, LESLEY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A173435*
*NPI: 1184112682*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 425-6941*
*After Hours Phone: (619) 425-6941*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**LAW, KAREN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A138534*
*NPI: 1205253150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LAW, KAREN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A138534*
*NPI: 1205253150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MCKENNETT, MARIANNE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G57243*
*NPI: 1376639666*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MCKENNETT, MARIANNE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G57243*
*NPI: 1376639666*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MENON, POOJA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123263*
*NPI: 1053600064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MENON, POOJA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123263*
*NPI: 1053600064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MERRILL, SARAH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123492*
*NPI: 1225399512*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**MERRILL, SARAH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A123492*
*NPI: 1225399512*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**MOYA, MARY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A80185*
*NPI: 1093844417*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MOYA, MARY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A80185*
*NPI: 1093844417*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, LINH**
*License Type: MD*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: A144995*
*NPI: 1619357993*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, LINH**
*License Type: MD*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: A144995*
*NPI: 1619357993*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, CARIE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A106103*
*NPI: 1174781132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, CARIE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A106103*
*NPI: 1174781132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PALOMINO, MARY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A115699*
*NPI: 1770718975*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA*

# C. Primary Care Directory

*VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**PALOMINO, MARY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A115699*
*NPI: 1770718975*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**PEDROTTY, JOHN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G80234*
*NPI: 1992861629*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PEDROTTY, JOHN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G80234*
*NPI: 1992861629*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PEREZ, PERLITA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A119689*

*NPI: 1174810972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PEREZ, PERLITA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A119689*
*NPI: 1174810972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PIEROS, JANELLE**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A13225*
*NPI: 1386935914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**PIEROS, JANELLE**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A13225*
*NPI: 1386935914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**PINA, RAQUEL**
*License Type: MD*

*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A177698*
*NPI: 1255893368*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PINA, RAQUEL**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A177698*
*NPI: 1255893368*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PISINGER, PATRICIA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A69264*
*NPI: 1861428302*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Czech*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PISINGER, PATRICIA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A69264*
*NPI: 1861428302*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Czech*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**FAMILY PRACTICE**

**RAHMAN, AKBAR**

*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A110134*
*NPI: 1720314933*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RAHMAN, AKBAR**

*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A110134*
*NPI: 1720314933*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROSENBLATT, EUGENE**

*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A9060*
*NPI: 1427123991*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROSENBLATT, EUGENE**

*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A9060*
*NPI: 1427123991*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SERPAS, SHAILA**

*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G74728*

*NPI: 1124039136*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 678 3RD AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SERPAS, SHAILA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G74728*
*NPI: 1124039136*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 678 3RD AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SHAHTAJI, ALAN**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A11087*
*NPI: 1972751089*
- *Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 678 3RD AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHAHTAJI, ALAN**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A11087*
*NPI: 1972751089*
- *Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 678 3RD AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SWARTZ, JOHN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G72486*
*NPI: 1396754131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SWARTZ, JOHN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G72486*
*NPI: 1396754131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**TALAVERA, GREGORY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A40061*
*NPI: 1740337161*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TALAVERA, GREGORY**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A40061*
*NPI: 1740337161*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TEE, ALEXANDRA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A164392*
*NPI: 1881198406*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**TEE, ALEXANDRA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A164392*
*NPI: 1881198406*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**TOLEDO-NADER, CAROLL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A41486*
*NPI: 1427126648*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TOLEDO-NADER, CAROLL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A41486*
*NPI: 1427126648*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TREJO, RAUL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A77936*
*NPI: 1174534184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TREJO, RAUL**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A77936*
*NPI: 1174534184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 217488*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WEN, AKI**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A12555*
*NPI: 1205126505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**WEN, AKI**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: 20A12555*
*NPI: 1205126505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**WHITLEY, NICHOLAS**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A118250*
*NPI: 1629394721*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WHITLEY, NICHOLAS**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A118250*
*NPI: 1629394721*

# C. Primary Care Directory

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**YOON, RYAN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A114600*
*NPI: 1942435144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**YOON, RYAN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A114600*
*NPI: 1942435144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**CHULA VISTA FAMILY HLTH CTR,**
*Provider ID: 39174*
*NPI: 1346480837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*Fax: (619) 397-1161*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**CHULA VISTA FAMILY HLTH CTR,**
*Provider ID: 39174*
*NPI: 1346480837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*Fax: (619) 397-1161*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,**
*Provider ID: 73137*
*NPI: 1083959464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*Fax: (619) 420-0660*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,**
*Provider ID: 73137*
*NPI: 1083959464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*Fax: (619) 420-0660*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH CHULA VISTA,**
*Provider ID: 217488*
*NPI: 1326486861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-6941*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4PM*

**FQHC**

**SAN YSIDRO HEALTH CHULA VISTA,**
*Provider ID: 217488*
*NPI: 1326486861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-6941*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4PM*

**FQHC**

**SAN YSIDRO HEALTH SOUTH**

# C. Primary Care Directory

**BAY PEDIATRICS,**
*Provider ID: 307636*
*NPI: 1184135873*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,**
*Provider ID: 307636*
*NPI: 1184135873*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL DENTISTRY**

**PHAM, QUYNH**
*License Type: DDS*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: DDS102880*
*NPI: 1366917353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL DENTISTRY**

**PHAM, QUYNH**
*License Type: DDS*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: DDS102880*
*NPI: 1366917353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL PRACTICE**

**SAMI, REMAN**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A19457*
*NPI: 1295362242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619)*

# C. Primary Care Directory

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**SAMI, REMAN**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A19457*
*NPI: 1295362242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HEMATOLOGY / ONCOLOGY**

**QUIROZ, ELISA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A162816*
*NPI: 1932558301*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**HEMATOLOGY / ONCOLOGY**

**QUIROZ, ELISA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A162816*
*NPI: 1932558301*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INFECTIOUS DISEASE**

**POLESKY, ANDREA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G81333*
*NPI: 1063517365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tongan*

*Cultural Competency: N*
*Hospital Affiliation: SANTA CLARA VALLEY MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 425-6941*
*After Hours Phone: (619) 425-6941*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**INFECTIOUS DISEASE**

**POLESKY, ANDREA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: G81333*
*NPI: 1063517365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tongan*
*Cultural Competency: N*
*Hospital Affiliation: SANTA CLARA VALLEY MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 425-6941*
*After Hours Phone: (619) 425-6941*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**INTERNAL MEDICINE**

**CHEN, TSUH-YIN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: C55563*
*NPI: 1093803520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CHEN, TSUH-YIN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: C55563*
*NPI: 1093803520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**HAMMETT, ERIN**

*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A14025*
*NPI: 1467884098*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SANTA BARBARA COTTAGE HOSP, GOLETA VALLEY COTTAGE HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**HAMMETT, ERIN**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A14025*
*NPI: 1467884098*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SANTA BARBARA COTTAGE HOSP, GOLETA VALLEY COTTAGE HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**KAKAIYA, ROSHNI**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A19485*
*NPI: 1073179529*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**KAKAIYA, ROSHNI**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A19485*
*NPI: 1073179529*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**KAKAIYA, ROSHNI**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A19485*
*NPI: 1073179529*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*

# C. Primary Care Directory

*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**KIM, JIUN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: C182935*
*NPI: 1598020752*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**KIM, JIUN**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: C182935*
*NPI: 1598020752*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VELAZQUEZ CAMARENA, MARIA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A56153*
*NPI: 1518965714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VELAZQUEZ CAMARENA, MARIA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A56153*
*NPI: 1518965714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Male*

*License Number: A47906*

*NPI: 1437181922*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Male*

*License Number: A47906*

*NPI: 1437181922*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 39174*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

251 LANDIS AVE
CHULA VISTA, CA 91910

*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SEFA-BOAKYE, KOFI**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G59670*
*NPI: 1902993660*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SEFA-BOAKYE, KOFI**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: G59670*
*NPI: 1902993660*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SHORT, ABIADE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A114893*
*NPI: 1750559589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**SHORT, ABIADE**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A114893*
*NPI: 1750559589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**TRUJILLO, JENNIFER**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A8204*
*NPI: 1053407593*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**TRUJILLO, JENNIFER**
*License Type: DO*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: 20A8204*
*NPI: 1053407593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619)*

*515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A127706*
*NPI: 1790054393*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A127706*
*NPI: 1790054393*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PONS, MAURICIO**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A87650*
*NPI: 1376723759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

# C. Primary Care Directory

**PONS, MAURICIO**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A87650*
*NPI: 1376723759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ATIENZA, PAMELA**
*License Type: MD*
*Provider ID: 202519*
*Provider Gender: Female*
*NPI: 1417916107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
890 EASTLAKE PKWY STE 200

CHULA VISTA, CA 91914
*Phone: (619) 656-6817*
*Fax: (619) 656-6908*
*After Hours Phone: (619) 506-1218*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**BARBADILLO, FERDINAND**
*License Type: MD*
*Provider ID: 265352*
*Provider Gender: Male*
*NPI: 1982662193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
890 EASTLAKE PKWY STE 200
CHULA VISTA, CA 91914
*Phone: (619) 656-6817*
*Fax: (619) 656-6908*
*After Hours Phone: (619) 656-6817*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**BROUDY, ABRAHAM**
*License Type: MD*
*Provider ID: 204506*
*Provider Gender: Male*
*NPI: 1528039526*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
*Phone: (619) 656-3040*
*Fax: (619) 656-3045*
*After Hours Phone: (619) 656-3040*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CAPETANAKIS, ELENI**
*License Type: MD*
*Provider ID: 204392*
*Provider Gender: Female*
*NPI: 1346211554*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CORDOBA, MIGUEL**

*License Type: MD*

*Provider ID: 204390*

*Provider Gender: Male*

*NPI: 1053382176*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

865 3RD AVE STE 101
CHULA VISTA, CA 91911

*Phone: (619) 426-7910*

*Fax: (619) 426-2337*

*After Hours Phone: (619) 426-7910*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**DONG, TAMMY**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A66903*

*NPI: 1386655413*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DONG, TAMMY**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A66903*

*NPI: 1386655413*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DORINGO, ELAINIE**

*License Type: MD*

*Provider ID: 204936*

*Provider Gender: Female*

*NPI: 1013005636*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL, UC SAN*

*DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**FLETCHER, EMILY**
*License Type: MD*
*Provider ID: 204524*
*Provider Gender: Female*
*NPI: 1780935940*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
*Phone: (619) 656-3040*
*Fax: (619) 656-3045*
*After Hours Phone: (619) 656-3040*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**FLORES, ERNEST**
*License Type: MD*
*Provider ID: 303789*
*Provider Gender: Male*
*NPI: 1043848807*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**PEDIATRICS**

**FRESNO, BLANCA**
*License Type: MD*
*Provider ID: 204716*
*Provider Gender: Female*
*NPI: 1346258787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915
*Phone: (619) 482-1700*
*Fax: (619) 475-4578*
*After Hours Phone: (619) 482-1700*
*Website: N/A*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GARCIA, RAFAEL**
*License Type: MD*
*Provider ID: 204939*
*Provider Gender: Male*
*NPI: 1053414086*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
*Phone: (619) 656-0206*
*Fax: (619) 656-8936*
*After Hours Phone: (619) 656-0206*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Female*
*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 302740*
*Provider Gender: Female*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Female*

*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**HOLLICK, NATALIE**
*License Type: DO*
*Provider ID: 261027*
*Provider Gender: Female*
*NPI: 1558716845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ISAIAS, AGNELA**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Female*
*License Number: A82912*
*NPI: 1790772572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ISAIAS, AGNELA**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Female*
*License Number: A82912*
*NPI: 1790772572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*

# C. Primary Care Directory

*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JACOBS-KLEISLI, MILAGROS**
*License Type: DO*
*Provider ID: 261028*
*Provider Gender: Female*
*NPI: 1811221641*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, HUNTINGTON MEMORIAL HOSPITAL, USC Arcadia Hospital*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911
*Phone: (619) 482-3090*
*Fax: (619) 482-7350*
*After Hours Phone: (619) 482-3090*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**KORSAND, SID**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Male*
*License Number: A49591*
*NPI: 1588634513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**KORSAND, SID**
*License Type: MD*
*Provider ID: 302755*
*Provider Gender: Male*
*NPI: 1588634513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**KORSAND, SID**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Male*
*License Number: A49591*
*NPI: 1588634513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MCMAHON, SHARON**
*License Type: DO*
*Provider ID: 302425*
*Provider Gender: Female*
*NPI: 1487279246*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**MISTRY, CHETAN**
*License Type: MD*
*Provider ID: 204842*
*Provider Gender: Male*
*NPI: 1467505834*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
*Phone: (619) 656-3040*
*Fax: (619) 656-3045*
*After Hours Phone: (619) 656-3040*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**NGUYEN, TRUC**
*License Type: MD*
*Provider ID: 204837*
*Provider Gender: Female*
*NPI: 1881884054*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, WASHINGTON HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
*Phone: (619) 656-3040*
*Fax: (619) 656-3045*
*After Hours Phone: (619) 656-3040*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**OIRA, VICTORIA**

*License Type: MD*

*Provider ID: 205035*

*Provider Gender: Female*

*NPI: 1134172448*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

890 EASTLAKE PKWY STE 203
CHULA VISTA, CA 91914

*Phone: (619) 656-3020*

*Fax: (619) 656-3019*

*After Hours Phone: (619) 370-6661*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-4:30PM*

**PEDIATRICS**

**PIANSAY, MARIA CORAZON**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A93785*

*NPI: 1669680351*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**PIANSAY, MARIA CORAZON**

*License Type: MD*

*Provider ID: 217488*

*Provider Gender: Female*

*License Number: A93785*

*NPI: 1669680351*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ROWHANI, NAGHMEH**

*License Type: MD*

*Provider ID: 307636*

*Provider Gender: Female*

*License Number: A92037*

*NPI: 1992876759*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Persian*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

280 E ST
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619)*

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ROWHANI, NAGHMEH**
*License Type: MD*
*Provider ID: 307636*
*Provider Gender: Female*
*License Number: A92037*
*NPI: 1992876759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**SALAZAR, JUANITA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A78355*
*NPI: 1912938325*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SALAZAR, JUANITA**
*License Type: MD*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: A78355*
*NPI: 1912938325*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SANTIAGO, ROXANE**
*License Type: MD*
*Provider ID: 206254*
*Provider Gender: Female*
*NPI: 1033461801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA*

*MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
865 3RD AVE STE 101
CHULA VISTA, CA 91911
*Phone: (619) 426-7910*
*Fax: (619) 426-2337*
*After Hours Phone: (619) 426-7910*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**SHETH, HASMUKH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A45942*
*NPI: 1396812236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SHETH, HASMUKH**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: A45942*
*NPI: 1396812236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**VALENCIA, MARILES**
*License Type: MD*
*Provider ID: 204502*
*Provider Gender: Female*
*NPI: 1275541625*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915

*Phone: (619) 482-1700*
*Fax: (619) 475-4578*
*After Hours Phone: (619) 482-1700*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**YAO, CATHERINE**
*License Type: MD*
*Provider ID: 204644*
*Provider Gender: Female*
*NPI: 1801166442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
*Phone: (619) 482-3090*
*Fax: (619) 482-7350*
*After Hours Phone: (619) 482-3090*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ZARGAR, SHABNAM**
*License Type: MD*
*Provider ID: 204417*
*Provider Gender: Female*
*NPI: 1417256074*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
*Phone: (619) 482-3090*
*Fax: (619) 482-7350*
*After Hours Phone: (619) 482-3090*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**BALDONADO, ANALICIA**
*License Type: PA*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: PA61683*
*NPI: 1215477765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**BALDONADO, ANALICIA**
*License Type: PA*
*Provider ID: 73137*
*Provider Gender: Female*

*License Number: PA61683*
*NPI: 1215477765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*License Type: PA*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: PA54404*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*License Type: PA*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: PA54404*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**MENDEZ, JESUS**
*License Type: PA*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: PA13796*
*NPI: 1023202108*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MENDEZ, JESUS**

*License Type: PA*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: PA13796*
*NPI: 1023202108*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**QUICK, ELISABETH**
*License Type: PA*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PA21591*
*NPI: 1790055010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**QUICK, ELISABETH**
*License Type: PA*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PA21591*
*NPI: 1790055010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**REVELES, DIANA**
*License Type: PA*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: PA19306*
*NPI: 1548455405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**REVELES, DIANA**
*License Type: PA*
*Provider ID: 73137*
*Provider Gender: Female*
*License Number: PA19306*
*NPI: 1548455405*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**
*License Type: DPM*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**
*License Type: DPM*
*Provider ID: 217488*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**SCHNEIDER, SARAH**
*License Type: DPM*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: DPM4819*
*NPI: 1326282237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**SCHNEIDER, SARAH**
*License Type: DPM*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: DPM4819*
*NPI: 1326282237*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**AMAYA, RICARDO**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT37189*
*NPI: 1437445566*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**AMAYA, RICARDO**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT37189*
*NPI: 1437445566*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**AVILES, LEAH**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT298792*
*NPI: 1548867419*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**AVILES, LEAH**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT298792*
*NPI: 1548867419*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT295173*
*NPI: 1497236384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT295173*
*NPI: 1497236384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**GONZALES, MICHELLE**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT291706*
*NPI: 1548714652*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**GONZALES, MICHELLE**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT291706*
*NPI: 1548714652*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**GONZALES, MICHELLE**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT291706*
*NPI: 1548714652*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE

CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**RODRIGUEZ, CASSANDRA**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT292823*
*NPI: 1770025595*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**RODRIGUEZ, CASSANDRA**
*License Type: PT*
*Provider ID: 39174*
*Provider Gender: Female*
*License Number: PT292823*
*NPI: 1770025595*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*

*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**CABADING, DOREEN**
*License Type: SP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: SP18192*
*NPI: 1043507585*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SPEECH PATHOLOGIST**

**CABADING, DOREEN**
*License Type: SP*
*Provider ID: 217488*
*Provider Gender: Female*
*License Number: SP18192*
*NPI: 1043507585*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## EL CAJON

### CERTIFIED NURSE PRACTITIONER

**BELEN, NEZER**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: NP95009292*
*NPI: 1386120723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

### CERTIFIED NURSE PRACTITIONER

**BELEN, NEZER**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: NP95009292*
*NPI: 1386120723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

### CERTIFIED NURSE PRACTITIONER

**DRISCOLL, SUSAN**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95012943*
*NPI: 1477755684*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**DRISCOLL, SUSAN**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95012943*
*NPI: 1477755684*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, JOHNNY**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: NP95007000*
*NPI: 1932622156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, JOHNNY**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: NP95007000*
*NPI: 1932622156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95001707*
*NPI: 1164812293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
*License Type: NP*

*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95001707*
*NPI: 1164812293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HARPEL, SHERYL**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95009329*
*NPI: 1780177147*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HARPEL, SHERYL**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95009329*
*NPI: 1780177147*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLOGG, KRISTEN**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: NP95009180*
*NPI: 1649757741*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLOGG, KRISTEN**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: NP95009180*
*NPI: 1649757741*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP10943*
*NPI: 1285772392*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP10943*
*NPI: 1285772392*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**LU, TAMMY**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP95007253*
*NPI: 1457879132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LU, TAMMY**
*License Type: NP*
*Provider ID: 25729*

*Provider Gender: Female*
*License Number: NP95007253*
*NPI: 1457879132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MANGENE, CYNTHIA**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP6782*
*NPI: 1548292626*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**MANGENE, CYNTHIA**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP6782*
*NPI: 1548292626*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*

*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**

*License Type: NPF*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**

*License Type: NPF*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**

*License Type: NPF*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OLVERA, LUISA**

*License Type: NP*
*Provider ID: 313072*
*Provider Gender: Female*
*License Number: NP95001710*
*NPI: 1598161309*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OLVERA, LUISA**

*License Type: NP*

*Provider ID: 313072*

*Provider Gender: Female*

*License Number: NP95001710*

*NPI: 1598161309*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR*

*Board Certified Specialty: No*

*DAP HEALTH INC*

133 W MAIN ST
EL CAJON, CA 92020

*Phone: (619) 873-8940*

*Fax: (619) 401-0522*

*After Hours Phone: (619) 873-8940*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**

*License Type: NP*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: NP17328*

*NPI: 1548450471*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Catalan, German, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**

*License Type: NP*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: NP17328*

*NPI: 1548450471*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Catalan, German, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**REGEV, SHANEE**

*License Type: NP*

*Provider ID: 287227*

*Provider Gender: Female*

*License Number: NP95022460*
*NPI: 1477218121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**REGEV, SHANEE**
*License Type: NP*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: NP95022460*
*NPI: 1477218121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*

*License Number: NP15444*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: RN428876*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: NP15444*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**
*License Type: NP*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: RN428876*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SWAN, MELANIE**
*License Type: NP*
*Provider ID: 25729*

*Provider Gender: Female*
*License Number: NP95000818*
*NPI: 1871934414*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**SWAN, MELANIE**
*License Type: NP*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: NP95000818*
*NPI: 1871934414*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95001961*
*NPI: 1932452323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95001961*
*NPI: 1932452323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**VILLANUEVA DE GUTIE, BERENICE**

*License Type: NP*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: NP95002188*

*NPI: 1952795536*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**VILLANUEVA DE GUTIE, BERENICE**

*License Type: NP*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: NP95002188*

*NPI: 1952795536*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**

*License Type: NP*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: NP95013978*

*NPI: 1881727386*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**

*License Type: NP*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: NP95013978*

*NPI: 1881727386*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**
*License Type: DC*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: DC29314*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5983*
*After Hours Phone: (619) 795-5983*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**
*License Type: DC*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: DC29314*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5983*

*After Hours Phone: (619) 795-5983*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 25729*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 25729*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**UY, ASHLEY**

*License Type: DC*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: DC33869*

*NPI: 1174059760*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**UY, ASHLEY**

*License Type: DC*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: DC33869*

*NPI: 1174059760*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**ISLAM, JULIE**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A149552*

*NPI: 1750780516*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bengali, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**ISLAM, JULIE**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A149552*

*NPI: 1750780516*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bengali, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A146838*

*NPI: 1720474141*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A146838*

*NPI: 1720474141*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**AL ANI, NAJWAN**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A144974*

*NPI: 1275948473*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**AL ANI, NAJWAN**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Female*

*License Number: A144974*

*NPI: 1275948473*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST

EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BRUHN, JOSHUA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A186694*
*NPI: 1447888284*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BRUHN, JOSHUA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A186694*
*NPI: 1447888284*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**CORMAN, DANIEL**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A13060*
*NPI: 1629339593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORMAN, DANIEL**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A13060*
*NPI: 1629339593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DOMINGUEZ, DENNIS**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: G43179*
*NPI: 1225063811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DOMINGUEZ, DENNIS**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: G43179*
*NPI: 1225063811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GHAFARI, DAUOD**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A98486*
*NPI: 1053417691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GHAFARI, DAUOD**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A98486*
*NPI: 1053417691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian,*

*Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GORDON, CHRISTOPHER**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A83390*
*NPI: 1477711521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**GORDON, CHRISTOPHER**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A83390*
*NPI: 1477711521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HASTANAN, CAROL**
*License Type: MD*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: A110192*
*NPI: 1861648461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HASTANAN, CAROL**
*License Type: MD*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: A110192*
*NPI: 1861648461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE

EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HODGKIN, EDWARD**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A177445*
*NPI: 1922619766*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*
*8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HODGKIN, EDWARD**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A177445*
*NPI: 1922619766*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*
*8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**KASAWA, JOHN**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A79338*
*NPI: 1134230329*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KASAWA, JOHN**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A79338*
*NPI: 1134230329*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*

# C. Primary Care Directory

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A161682*
*NPI: 1841726148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A161682*
*NPI: 1841726148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**NASSIR, BASSAM**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A101888*
*NPI: 1386848166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NASSIR, BASSAM**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A101888*
*NPI: 1386848166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NIAZI, HARRIS**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A146111*
*NPI: 1174905871*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**NIAZI, HARRIS**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A146111*
*NPI: 1174905871*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*License Type: MD*
*Provider ID: 308887*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
181 REA AVE
EL CAJON, CA 92020
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
*Provider English Spoken: Y*
*Provider Language(s)*

# C. Primary Care Directory

*Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*License Type: MD*
*Provider ID: 308887*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
181 REA AVE
EL CAJON, CA 92020
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SALEM, RAMSEY**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A158364*
*NPI: 1245401298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SALEM, RAMSEY**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A158364*
*NPI: 1245401298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**CHASE AVENUE FAMILY HEALTH CTRS INC,**
*Provider ID: 25729*
*NPI: 1104861681*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*Fax: (619) 593-7164*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**CHASE AVENUE FAMILY HEALTH CTRS INC,**
*Provider ID: 25729*
*NPI: 1104861681*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*Fax: (619) 593-7164*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DAP HEALTH-CENTRO MEDICO EL CAJON,**
*Provider ID: 313072*
*NPI: 1154480069*
*Provider English Spoken: Y*
*Cultural Competency: N*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DAP HEALTH-CENTRO MEDICO EL CAJON,**
*Provider ID: 313072*
*NPI: 1154480069*
*Provider English Spoken: Y*
*Cultural Competency: N*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-EL CAJON,**
*Provider ID: 107522*
*NPI: 1932561198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*Fax: (619) 269-0191*

*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-EL CAJON,**
*Provider ID: 107522*
*NPI: 1932561198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*Fax: (619) 269-0191*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FQHC**

**LA MAESTRA CHC EL CAJON BROADWAY,**
*Provider ID: 110598*
*NPI: 1134590086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*Fax: (619) 795-5992*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LA MAESTRA CHC EL CAJON BROADWAY,**
*Provider ID: 110598*
*NPI: 1134590086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*Fax: (619) 795-5992*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LA MAESTRA CHC-REA AVE,**
*Provider ID: 308887*
*NPI: 1609849074*
*Provider English Spoken: Y*
*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
181 REA AVE
EL CAJON, CA 92020
*Phone: (619) 312-0347*
*Fax: (619) 510-4649*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

# C. Primary Care Directory

**FQHC**

**LA MAESTRA CHC-REA AVE,**

*Provider ID: 308887*

*NPI: 1609849074*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

181 REA AVE
EL CAJON, CA 92020

*Phone: (619) 312-0347*

*Fax: (619) 510-4649*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**

*Provider ID: 36508*

*NPI: 1336353721*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*Fax: (619) 749-5480*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**

*Provider ID: 36508*

*NPI: 1336353721*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*Fax: (619) 749-5480*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH EL CAJON,**

*Provider ID: 287227*

*NPI: 1568845741*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

*Phone: (619) 662-4100*

*Fax: (619) 785-3356*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH EL CAJON,**

*Provider ID: 287227*

*NPI: 1568845741*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

*Phone: (619) 662-4100*

*Fax: (619) 785-3356*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**AL-TAMEEMI, AHMED**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A151547*
*NPI: 1134513211*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**AL-TAMEEMI, AHMED**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A151547*
*NPI: 1134513211*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALWASH, MUSTAFA**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Male*

*License Number: A160516*

*NPI: 1679936439*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**ALWASH, MUSTAFA**

*License Type: MD*

*Provider ID: 107522*

*Provider Gender: Male*

*License Number: A160516*

*NPI: 1679936439*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*

*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**AWDISHO, ALAN**

*License Type: DO*

*Provider ID: 287227*

*Provider Gender: Male*

*License Number: 20A18702*

*NPI: 1164795498*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Assyrian, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**AWDISHO, ALAN**

*License Type: DO*

*Provider ID: 287227*

*Provider Gender: Male*

*License Number: 20A18702*

*NPI: 1164795498*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Assyrian, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DUONG, MAI**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A127798*
*NPI: 1629339304*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**DUONG, MAI**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A127798*
*NPI: 1629339304*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**GORGES, RANDA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A138815*
*NPI: 1285079509*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**GORGES, RANDA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A138815*
*NPI: 1285079509*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*

# C. Primary Care Directory

*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**JABRI, ZAIN**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: A160760*
*NPI: 1891159620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**JABRI, ZAIN**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: A160760*
*NPI: 1891159620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**MALINAK, JAMES**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: G52238*
*NPI: 1497867501*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation:*

# C. Primary Care Directory

*GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**MALINAK, JAMES**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: G52238*
*NPI: 1497867501*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**MANSY, TAMARA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A164238*
*NPI: 1396277737*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MANSY, TAMARA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A164238*
*NPI: 1396277737*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MAY, LOUIS**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A138568*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MAY, LOUIS**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A138568*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MICHAEL, RAMI**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A144513*
*NPI: 1467871673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**MICHAEL, RAMI**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A144513*
*NPI: 1467871673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**NADI, FAHIMA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A175325*
*NPI: 1770072290*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto, Persian,*

*Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**NADI, FAHIMA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A175325*
*NPI: 1770072290*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto, Persian, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**NARAYAN, ARCHANA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A101773*
*NPI: 1003053950*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**NARAYAN, ARCHANA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A101773*
*NPI: 1003053950*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*

*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PETITT, JOHN**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: G52812*
*NPI: 1497992432*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PETITT, JOHN**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: G52812*
*NPI: 1497992432*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**REDDY, ARJUN**

*License Type: MD*

*Provider ID: 129312*

*Provider Gender: Male*

*NPI: 1730132457*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

5442 SYCUAN RD
EL CAJON, CA 92019

*Phone: (619) 445-0707*

*Fax: (619) 445-0988*

*After Hours Phone: (619) 445-0707*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**

*License Type: MD*

*Provider ID: 110598*

*Provider Gender: Male*

*License Number: C55979*

*NPI: 1740254713*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

*Phone: (619) 795-5983*

*After Hours Phone: (619) 795-5983*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**

*License Type: MD*

*Provider ID: 36508*

*Provider Gender: Male*

*License Number: C55979*

*NPI: 1740254713*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 269-1262*

*After Hours Phone: (619) 269-1262*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8AM-5PM TH-F 8AM-5PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**

*License Type: MD*

*Provider ID: 36508*

*Provider Gender: Male*

*License Number: C55979*

*NPI: 1740254713*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 269-1262*
*After Hours Phone: (619) 269-1262*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM TH-F 8AM-5PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5983*
*After Hours Phone: (619) 795-5983*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**SHEIKH-MOHAMED, HALA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A159247*
*NPI: 1972946770*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SHEIKH-MOHAMED, HALA**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: A159247*
*NPI: 1972946770*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**TCHAKMAKJIAN, LEVON**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: C144411*
*NPI: 1790744795*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Armenian, Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**TCHAKMAKJIAN, LEVON**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: C144411*
*NPI: 1790744795*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Armenian, Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**YOON, TAE HYUN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: C161090*
*NPI: 1508918178*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**YOON, TAE HYUN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: C161090*
*NPI: 1508918178*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERVENTIONAL CARDIOLOGY**

**KAFRI, HASSAN**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A96002*
*NPI: 1730258401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL CARDIOLOGY**

**KAFRI, HASSAN**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A96002*
*NPI: 1730258401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020

*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BULLOCH, EDGAR**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A113241*
*NPI: 1508046376*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BULLOCH, EDGAR**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A113241*
*NPI: 1508046376*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 107522*

*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**KHAN, ALIYA**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: G50634*
*NPI: 1285687350*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**KHAN, ALIYA**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: G50634*
*NPI: 1285687350*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A47906*
*NPI: 1437181922*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A47906*
*NPI: 1437181922*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA*

*VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**PAPA, RHETT**
*License Type: DO*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: 20A11733*
*NPI: 1063642312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**PAPA, RHETT**
*License Type: DO*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: 20A11733*
*NPI: 1063642312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**

*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**

*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**

*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL*

*CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## OBSTETRICS / GYNECOLOGY

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## OPHTHALMOLOGY

**JARDON, JAVIER**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A131365*
*NPI: 1609171982*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## OPHTHALMOLOGY

**JARDON, JAVIER**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A131365*
*NPI: 1609171982*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*

**OPHTHALMOLOGY**

**MANI, NASRIN**

*License Type: MD*

*Provider ID: 287227*

*Provider Gender: Female*

*License Number: A40473*

*NPI: 1023061314*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**MANI, NASRIN**

*License Type: MD*

*Provider ID: 287227*

*Provider Gender: Female*

*License Number: A40473*

*NPI: 1023061314*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**

*License Type: MD*

*Provider ID: 287227*

*Provider Gender: Male*

*License Number: A127706*

*NPI: 1790054393*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**

*License Type: MD*

*Provider ID: 287227*

*Provider Gender: Male*

*License Number: A127706*

*NPI: 1790054393*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PONS, MAURICIO**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A87650*
*NPI: 1376723759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**PONS, MAURICIO**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A87650*
*NPI: 1376723759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ADJAN, ROULA**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: A81682*
*NPI: 1992847263*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ADJAN, ROULA**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: A81682*
*NPI: 1992847263*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ALWAHAB, AREEJ**
*License Type: MD*
*Provider ID: 308468*
*Provider Gender: Female*
*NPI: 1497138002*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: ST*

# C. Primary Care Directory

*BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
250 E CHASE AVE STE 110
EL CAJON, CA 92020
*Phone: (619) 399-7878*
*Fax: (858) 499-5006*
*After Hours Phone: (619) 399-7878*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**FIGUEROA RODRIGUEZ, BRENDA**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Female*
*License Number: A114674*
*NPI: 1134205214*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FIGUEROA RODRIGUEZ, BRENDA**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Female*
*License Number: A114674*
*NPI: 1134205214*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FLEMING, TARA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A152462*
*NPI: 1972965242*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**FLEMING, TARA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A152462*
*NPI: 1972965242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**JACKSON, DANA**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: 20A14119*
*NPI: 1689060063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JACKSON, DANA**
*License Type: DO*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: 20A14119*
*NPI: 1689060063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JONES, SETAREH**

*License Type: MD*

*Provider ID: 110598*

*Provider Gender: Female*

*License Number: A110010*

*NPI: 1033441316*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

*Phone: (619) 795-5983*

*After Hours Phone: (619) 795-5983*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**JONES, SETAREH**

*License Type: MD*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: A110010*

*NPI: 1033441316*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**JONES, SETAREH**

*License Type: MD*

*Provider ID: 110598*

*Provider Gender: Female*

*License Number: A110010*

*NPI: 1033441316*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

*Phone: (619) 795-5983*

*After Hours Phone: (619) 795-5983*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**JONES, SETAREH**

*License Type: MD*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: A110010*

*NPI: 1033441316*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**KODSI, ALICIA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A147976*
*NPI: 1932514353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**KODSI, ALICIA**
*License Type: MD*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: A147976*
*NPI: 1932514353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**NAGNUR, PRITI**
*License Type: MD*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: A170055*
*NPI: 1316289929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**NAGNUR, PRITI**
*License Type: MD*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: A170055*
*NPI: 1316289929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*

*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**NAIK, SHILPA**
*License Type: MD*
*Provider ID: 285853*
*Provider Gender: Female*
*NPI: 1902156904*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
844 JACKMAN ST
EL CAJON, CA 92020
*Phone: (619) 442-2560*
*Fax: (619) 442-7836*
*After Hours Phone: (619) 442-2560*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**NGUYEN, VI**
*License Type: MD*
*Provider ID: 285862*
*Provider Gender: Female*
*NPI: 1053540534*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
844 JACKMAN ST
EL CAJON, CA 92020
*Phone: (619) 442-2560*
*Fax: (619) 442-7836*
*After Hours Phone: (619) 442-2560*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**PINTO, ANITA**
*License Type: MD*
*Provider ID: 285966*
*Provider Gender: Female*
*NPI: 1477663722*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
844 JACKMAN ST
EL CAJON, CA 92020
*Phone: (619) 442-2560*
*Fax: (619) 442-7836*
*After Hours Phone: (619) 442-2560*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*License Type: MD*

*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A134995*
*NPI: 1508209651*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Portuguese, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*License Type: MD*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: A134995*
*NPI: 1508209651*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Portuguese, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**STENSMAN, LARS**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A158569*
*NPI: 1659638062*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**STENSMAN, LARS**
*License Type: MD*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: A158569*
*NPI: 1659638062*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*

**PHYSICIANS ASSISTANT**

**ALYAS, ALISIA**

*License Type: PA*

*Provider ID: 110598*

*Provider Gender: Female*

*License Number: PA58466*

*NPI: 1437768017*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

*Phone: (619) 795-5991*

*After Hours Phone: (619) 795-5991*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ALYAS, ALISIA**

*License Type: PA*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: PA58466*

*NPI: 1437768017*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ALYAS, ALISIA**

*License Type: PA*

*Provider ID: 110598*

*Provider Gender: Female*

*License Number: PA58466*

*NPI: 1437768017*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

*Phone: (619) 795-5991*

*After Hours Phone: (619) 795-5991*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ALYAS, ALISIA**

*License Type: PA*

*Provider ID: 36508*

*Provider Gender: Female*

*License Number: PA58466*

*NPI: 1437768017*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST
EL CAJON, CA 92019

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**

*License Type: PA*

*Provider ID: 36508*

*Provider Gender: Male*

*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**
*License Type: PA*
*Provider ID: 36508*
*Provider Gender: Male*
*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 36508*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 36508*
*Provider Gender: Female*

*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 110598*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**PATEL, SHREYA**
*License Type: PA*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: PA18719*
*NPI: 1447468137*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**PATEL, SHREYA**
*License Type: PA*
*Provider ID: 25729*
*Provider Gender: Female*
*License Number: PA18719*
*NPI: 1447468137*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ROSENBLATT, SHERILYN**

*License Type: PA*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: PA22872*
*NPI: 1114041621*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**ROSENBLATT, SHERILYN**
*License Type: PA*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: PA22872*
*NPI: 1114041621*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TURNER, SHEREENA**
*License Type: PA*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: PA20396*
*NPI: 1992934988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, ERIC**
*License Type: PA*
*Provider ID: 25729*
*Provider Gender: Male*
*License Number: PA55067*
*NPI: 1669756128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, ERIC**
*License Type: PA*

*Provider ID: 25729*
*Provider Gender: Male*
*License Number: PA55067*
*NPI: 1669756128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, SHEREENA**
*License Type: PA*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: PA20396*
*NPI: 1992934988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ZAMBRANA, GEORGE**
*License Type: PA*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: PA16673*
*NPI: 1104836659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ZAMBRANA, GEORGE**
*License Type: PA*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: PA16673*
*NPI: 1104836659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**CHARP, KENNETH**
*License Type: DPM*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: DPM1536*
*NPI: 1841384203*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**CHARP, KENNETH**
*License Type: DPM*
*Provider ID: 313072*
*Provider Gender: Male*
*License Number: DPM1536*
*NPI: 1841384203*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
133 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 873-8940*
*Fax: (619) 401-0522*
*After Hours Phone: (619) 873-8940*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**JUAREZ, LETICIA**
*License Type: DPM*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: DPM5661*
*NPI: 1508393778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PODIATRIST**

**JUAREZ, LETICIA**
*License Type: DPM*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: DPM5661*
*NPI: 1508393778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PODIATRIST**

**LE, DIANA**
*License Type: DPM*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: DPM5734*
*NPI: 1184112864*

# C. Primary Care Directory

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**PODIATRIST**

**LE, DIANA**
*License Type: DPM*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: DPM5734*
*NPI: 1184112864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**
*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: PT295173*
*NPI: 1497236384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**
*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: PT295173*
*NPI: 1497236384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**DASCENZO, EMILY**
*License Type: PT*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: PT40025*
*NPI: 1952982761*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**DASCENZO, EMILY**
*License Type: PT*
*Provider ID: 287227*
*Provider Gender: Female*
*License Number: PT40025*
*NPI: 1952982761*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**GONZALEZ, JUSTINE ARIEL**
*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: PT292482*
*NPI: 1851834873*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**REGISTERED PHYSICAL THERAPIST**

**GONZALEZ, JUSTINE ARIEL**
*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Female*
*License Number: PT292482*
*NPI: 1851834873*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

*Hours: M-F 8:30AM-5:30PM*

**REGISTERED PHYSICAL THERAPIST**

**KUIOKA, TROY**

*License Type: PT*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: PT42665*
*NPI: 1912640053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**KUIOKA, TROY**

*License Type: PT*
*Provider ID: 287227*
*Provider Gender: Male*
*License Number: PT42665*
*NPI: 1912640053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**

*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**

*License Type: PT*
*Provider ID: 107522*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

# C. Primary Care Directory

## ENCINITAS

### PEDIATRICS

**BRION, SONJA**

*License Type: MD*
*Provider ID: 205039*
*Provider Gender: Female*
*NPI: 1306817317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
*Phone: (760) 436-4511*
*Fax: (760) 436-5106*
*After Hours Phone: (760) 436-4511*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### PEDIATRICS

**MENDENHALL, ANNA**

*License Type: MD*
*Provider ID: 204809*
*Provider Gender: Female*
*NPI: 1639140650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
*Phone: (760) 436-4511*
*Fax: (760) 436-5106*
*After Hours Phone: (760) 436-4511*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### PEDIATRICS

**TERRY, AMANDA**

*License Type: MD*
*Provider ID: 205166*
*Provider Gender: Female*
*NPI: 1861770885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
*Phone: (760) 436-4511*
*Fax: (760) 436-5106*
*After Hours Phone: (760) 436-4511*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### PEDIATRICS

**TOLBA, KAMEI**

*License Type: MD*
*Provider ID: 204458*
*Provider Gender: Male*

*NPI: 1144221763*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
*Phone: (760) 436-4511*
*Fax: (760) 436-5106*
*After Hours Phone: (760) 436-4511*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## ESCONDIDO

### CERTIFIED NURSE PRACTITIONER

**CARNEY, AMY**
*License Type: NP*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: NP8169*
*NPI: 1164445227*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**CARNEY, AMY**
*License Type: NP*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: NP8169*
*NPI: 1164445227*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**HACINAS, REYNALDO**
*License Type: NP*
*Provider ID: 313071*
*Provider Gender: Male*
*License Number: NP95003024*
*NPI: 1215304860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HACINAS, REYNALDO**

*License Type: NP*

*Provider ID: 313071*

*Provider Gender: Male*

*License Number: NP95003024*

*NPI: 1215304860*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*DAP HEALTH INC*

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

*Phone: (760) 871-0606*

*Fax: (858) 634-6918*

*After Hours Phone: (760) 871-0606*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KAHL, NICHOLAS**

*License Type: NP*

*Provider ID: 289769*

*Provider Gender: Male*

*License Number: NP95006360*

*NPI: 1821306598*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

704 E GRAND AVE
ESCONDIDO, CA 92025

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KAHL, NICHOLAS**

*License Type: NP*

*Provider ID: 289769*

*Provider Gender: Male*

*License Number: NP95006360*

*NPI: 1821306598*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

704 E GRAND AVE
ESCONDIDO, CA 92025

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**

*License Type: NP*

*Provider ID: 289769*

*Provider Gender: Female*

*License Number: NP95005999*

*NPI: 1316478092*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

704 E GRAND AVE
ESCONDIDO, CA 92025

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**

*License Type: NP*

*Provider ID: 289769*

*Provider Gender: Female*

*License Number: NP95005999*

*NPI: 1316478092*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

704 E GRAND AVE
ESCONDIDO, CA 92025

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ROBINSON, DEAN**

*License Type: DC*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: DC12036*

*NPI: 1851320337*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ROBINSON, DEAN**

*License Type: DC*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: DC12036*

*NPI: 1851320337*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ZECHA, RONALD**

*License Type: DC*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: DC28605*

*NPI: 1427252121*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-12PM*

**CHIROPRACTOR**

**ZECHA, RONALD**

*License Type: DC*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: DC28605*

*NPI: 1427252121*

*Provider English Spoken: Y*

# C. Primary Care Directory

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**ARRIETA, NOEMI**
*License Type: DO*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: 20A11153*
*NPI: 1912223496*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ARRIETA, NOEMI**
*License Type: DO*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: 20A11153*
*NPI: 1912223496*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**AVILA, MICHAEL**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A159727*
*NPI: 1962936450*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**AVILA, MICHAEL**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A159727*
*NPI: 1962936450*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*

# C. Primary Care Directory

*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**COBIAN, VANESSA**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A145349*
*NPI: 1134513039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**COX, VICTORIA**
*License Type: MD*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: C171064*
*NPI: 1093087819*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**COBIAN, VANESSA**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A145349*
*NPI: 1134513039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**COX, VICTORIA**
*License Type: MD*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: C171064*
*NPI: 1093087819*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**FERRAIOLO, NATALIE**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A152372*
*NPI: 1306290143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**FERRAIOLO, NATALIE**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A152372*
*NPI: 1306290143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 304810*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (760) 546-2858*
*After Hours Phone: (760) 546-2858*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 304810*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (760) 546-2858*
*After Hours Phone: (760) 546-2858*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUR, JATINDER**

*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A120771*
*NPI: 1912141391*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**KAUR, JATINDER**

*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A120771*
*NPI: 1912141391*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**LAI, AMARA**

*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A120348*
*NPI: 1790912855*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

**FAMILY PRACTICE**

**LAI, AMARA**

*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Female*
*License Number: A120348*
*NPI: 1790912855*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*

*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

**FAMILY PRACTICE**

**MCHENRY, KATHRYN**
*License Type: DO*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: 20A14292*
*NPI: 1326458373*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**MCHENRY, KATHRYN**
*License Type: DO*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: 20A14292*
*NPI: 1326458373*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**NAKAMURA, MELANIE**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A107557*
*NPI: 1104022672*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**NAKAMURA, MELANIE**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A107557*
*NPI: 1104022672*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**PATEL, JITENBHAI**

*License Type: MD*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: A94128*

*NPI: 1902921406*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PATEL, JITENBHAI**

*License Type: MD*

*Provider ID: 289855*

*Provider Gender: Male*

*License Number: A94128*

*NPI: 1902921406*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

728 E VALLEY PKWY
ESCONDIDO, CA 92025

*Phone: (760) 737-6900*

*After Hours Phone: (760) 737-6900*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PATEL, JITENBHAI**

*License Type: MD*

*Provider ID: 289876*

*Provider Gender: Male*

*License Number: A94128*

*NPI: 1902921406*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PATEL, JITENBHAI**

*License Type: MD*

*Provider ID: 289855*

*Provider Gender: Male*

*License Number: A94128*

*NPI: 1902921406*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

728 E VALLEY PKWY
ESCONDIDO, CA 92025

*Phone: (760) 737-6900*

*After Hours Phone: (760) 737-6900*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RAO, USHA**

*License Type: MD*

*Provider ID: 289769*

*Provider Gender: Female*

*License Number: A148750*

*NPI: 1184019911*

*Provider English Spoken: Y*

# C. Primary Care Directory

*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RAO, USHA**
*License Type: MD*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: A148750*
*NPI: 1184019911*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RASHCOVSKY SCHIFF, KARIN**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A82173*
*NPI: 1699706333*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RASHCOVSKY SCHIFF, KARIN**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A82173*
*NPI: 1699706333*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RODARTE, GABRIEL**
*License Type: MD*
*Provider ID: 289865*
*Provider Gender: Male*
*License Number: A87906*
*NPI: 1184649212*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*After Hours Phone: (760) 520-8340*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**RODARTE, GABRIEL**
*License Type: MD*
*Provider ID: 289865*
*Provider Gender: Male*
*License Number: A87906*
*NPI: 1184649212*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*After Hours Phone: (760) 520-8340*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SANDHU, BASANT**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: A140398*
*NPI: 1265795744*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**SANDHU, BASANT**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: A140398*
*NPI: 1265795744*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-8PM TH-F 8AM-5PM*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TANTOD, KULIN**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A109655*
*NPI: 1902058928*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**TANTOD, KULIN**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A109655*
*NPI: 1902058928*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**THOMPSON, CHERYL**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A102687*
*NPI: 1548429863*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**FAMILY PRACTICE**

**THOMPSON, CHERYL**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A102687*
*NPI: 1548429863*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FQHC**

**DAP HEALTH-CENTRO MEDICO ESCONDIDO,**
*Provider ID: 313071*
*NPI: 1023349883*
*Provider English Spoken: Y*
*Cultural Competency: N*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DAP HEALTH-CENTRO MEDICO ESCONDIDO,**
*Provider ID: 313071*
*NPI: 1023349883*
*Provider English Spoken: Y*
*Cultural Competency: N*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**ESCONDIDO FAMILY HEALTH CENTER,**
*Provider ID: 304810*
*NPI: 1417640491*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (619) 515-2474*
*After Hours Phone: (619) 515-2474*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**ESCONDIDO FAMILY HEALTH CENTER,**
*Provider ID: 304810*
*NPI: 1417640491*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (619) 515-2474*
*After Hours Phone: (619) 515-2474*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**NEIGHBORHOOD HEALTHCARE ESCONDIDO,**
*Provider ID: 289876*
*NPI: 1598703647*
*Provider English Spoken: Y*
*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (360) 466-2745*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE ESCONDIDO,**
*Provider ID: 289876*
*NPI: 1598703647*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (360) 466-2745*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,**
*Provider ID: 289873*
*NPI: 1437335353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*Fax: (360) 462-2747*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,**
*Provider ID: 289873*
*NPI: 1437335353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*Fax: (360) 462-2747*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,**
*Provider ID: 289865*
*NPI: 1265618185*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*Fax: (360) 462-2752*
*After Hours Phone: (760) 520-8340*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

# C. Primary Care Directory

**NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,**
*Provider ID: 289865*
*NPI: 1265618185*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*Fax: (360) 462-2752*
*After Hours Phone: (760) 520-8340*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,**
*Provider ID: 289855*
*NPI: 1720264641*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,**
*Provider ID: 289855*
*NPI: 1720264641*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 9AM-5PM*
*TH-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,**
*Provider ID: 289769*
*NPI: 1801438239*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (760) 745-7847*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,**
*Provider ID: 289769*
*NPI: 1801438239*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (760) 745-7847*

*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**AGUERO, AMETHYST**
*License Type: DO*
*Provider ID: 304810*
*Provider Gender: Female*
*License Number: 20A19473*
*NPI: 1568021913*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (760) 546-2858*
*After Hours Phone: (760) 546-2858*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**AGUERO, AMETHYST**
*License Type: DO*
*Provider ID: 304810*
*Provider Gender: Female*
*License Number: 20A19473*
*NPI: 1568021913*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
128 N BROADWAY
ESCONDIDO, CA 92025
*Phone: (760) 546-2858*
*After Hours Phone: (760) 546-2858*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CARRERA, JORGE**
*License Type: MD*
*Provider ID: 289769*
*Provider Gender: Male*
*License Number: G58033*
*NPI: 1184728586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CARRERA, JORGE**
*License Type: MD*
*Provider ID: 289769*
*Provider Gender: Male*
*License Number: G58033*
*NPI: 1184728586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CHEN, MARGARET**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A61751*
*NPI: 1659305084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Modern Greek, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**CHEN, MARGARET**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A61751*
*NPI: 1659305084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Modern Greek, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**VETTICADEN, SANTOSH**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: C53062*
*NPI: 1679102461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**VETTICADEN, SANTOSH**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: C53062*
*NPI: 1679102461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760)*

520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

**PEDIATRICS**

**AGUILAR, EDITA**
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**AGUILAR, EDITA**
License Type: MD
Provider ID: 289865
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**AGUILAR, EDITA**
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**AGUILAR, EDITA**
License Type: MD
Provider ID: 289865
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ALDANA, NANCY**

*License Type: MD*
*Provider ID: 289873*
*Provider Gender: Female*
*License Number: A62467*
*NPI: 1558371963*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*After Hours Phone: (760) 520-8340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ALDANA, NANCY**

*License Type: MD*
*Provider ID: 289873*
*Provider Gender: Female*
*License Number: A62467*
*NPI: 1558371963*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*After Hours Phone: (760) 520-8340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CHOW, BYRON**

*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A78116*
*NPI: 1619907607*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHOW, BYRON**

*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Male*
*License Number: A78116*
*NPI: 1619907607*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL*

# C. Primary Care Directory

*CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**COHEN, CARA**
*License Type: MD*
*Provider ID: 305159*
*Provider Gender: Female*
*NPI: 1215021274*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 746-2641*
*Fax: (760) 740-2178*
*After Hours Phone: (760) 746-2641*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**COULLAHAN, JESSICA**
*License Type: MD*
*Provider ID: 305160*
*Provider Gender: Female*
*NPI: 1750579108*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 746-2641*
*Fax: (760) 740-2178*
*After Hours Phone: (760) 746-2641*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8:30AM-12PM*

**PEDIATRICS**

**CURET, ZULMA**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A119661*
*NPI: 1841561107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**PEDIATRICS**

**CURET, ZULMA**

*License Type: MD*

*Provider ID: 289876*

*Provider Gender: Female*

*License Number: A119661*

*NPI: 1841561107*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

460 N ELM ST
ESCONDIDO, CA 92025

*Phone: (760) 520-8100*

*After Hours Phone: (760) 520-8100*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DOSHI, NEELIMA**

*License Type: MD*

*Provider ID: 289873*

*Provider Gender: Female*

*License Number: A67626*

*NPI: 1417921578*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

426 N DATE ST
ESCONDIDO, CA 92025

*Phone: (760) 690-5900*

*After Hours Phone: (760) 690-5900*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\21*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DOSHI, NEELIMA**

*License Type: MD*

*Provider ID: 289873*

*Provider Gender: Female*

*License Number: A67626*

*NPI: 1417921578*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

426 N DATE ST
ESCONDIDO, CA 92025

*Phone: (760) 690-5900*

*After Hours Phone: (760) 690-5900*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\21*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**IBRAHIM, MAGED**

*License Type: MD*

*Provider ID: 313071*

*Provider Gender: Male*

*License Number: C141296*

*NPI: 1306852934*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP*

*Board Certified Specialty: No*

*DAP HEALTH INC*

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

*Phone: (760) 871-0606*

*Fax: (858) 634-6918*

*After Hours Phone: (760) 871-0606*

*Website: N/A*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**IBRAHIM, MAGED**
*License Type: MD*
*Provider ID: 313071*
*Provider Gender: Male*
*License Number: C141296*
*NPI: 1306852934*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALEKSHAMRAN, KEYVAN**
*License Type: MD*
*Provider ID: 313071*
*Provider Gender: Male*
*License Number: A94845*
*NPI: 1952466112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALEKSHAMRAN, KEYVAN**
*License Type: MD*
*Provider ID: 313071*
*Provider Gender: Male*
*License Number: A94845*
*NPI: 1952466112*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SONG, JOYCE**
*License Type: DO*
*Provider ID: 305166*
*Provider Gender: Female*
*NPI: 1417510694*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 746-2641*
*Fax: (760) 740-2178*
*After Hours Phone: (760) 746-2641*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**STRAZICICH, KARLA**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A45413*
*NPI: 1134154958*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**STRAZICICH, KARLA**
*License Type: MD*
*Provider ID: 289876*
*Provider Gender: Female*
*License Number: A45413*
*NPI: 1134154958*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TELLECHEA-SANCHEZ, SELMIRA**
*License Type: MD*
*Provider ID: 289873*
*Provider Gender: Female*
*License Number: G83438*
*NPI: 1730288747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TELLECHEA-SANCHEZ, SELMIRA**
*License Type: MD*
*Provider ID: 289873*
*Provider Gender: Female*
*License Number: G83438*
*NPI: 1730288747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**THIRUNAGARI, HARRSHA**
*License Type: MD*
*Provider ID: 313071*
*Provider Gender: Female*
*License Number: A64928*
*NPI: 1447472212*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RIVERSIDE COMMUNITY HOSP, Parkview Community Hospital Medical Center*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**THIRUNAGARI, HARRSHA**
*License Type: MD*
*Provider ID: 313071*
*Provider Gender: Female*
*License Number: A64928*
*NPI: 1447472212*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RIVERSIDE COMMUNITY HOSP, Parkview Community Hospital Medical Center*
*Board Certified Specialty: No*
*DAP HEALTH INC*
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 871-0606*
*Fax: (858) 634-6918*
*After Hours Phone: (760) 871-0606*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BAISLEY, SHAWN**
*License Type: PA*
*Provider ID: 289769*
*Provider Gender: Male*
*License Number: PA52347*
*NPI: 1376936120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BAISLEY, SHAWN**
*License Type: PA*
*Provider ID: 289769*

*Provider Gender: Male*
*License Number: PA52347*
*NPI: 1376936120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**NEGRON, RICARDO**
*License Type: DPM*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: DPM5260*
*NPI: 1932548393*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 289769*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**NEGRON, RICARDO**
*License Type: DPM*
*Provider ID: 289855*
*Provider Gender: Male*
*License Number: DPM5260*
*NPI: 1932548393*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## FALLBROOK

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*

*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  *TU 8AM-12:30PM*
  *W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  *TU 8AM-12:30PM*
  *W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  *TU 8AM-12:30PM*
  *W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  *TU 8AM-12:30PM*
  *W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*

*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760)*

*723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*License Type: NP*
*Provider ID: 298304*
*Provider Gender: Male*
*License Number: NP95015717*

*NPI: 1801497284*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Male*

*License Number: NP95015717*

*NPI: 1801497284*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**

*License Type: NP*

*Provider ID: 298304*

*Provider Gender: Male*

*License Number: NP95015717*

*NPI: 1801497284*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*After Hours Phone: (760) 723-6200*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**FQHC**

**FALLBROOK FAMILY HLTH CTR,**

*Provider ID: 289871*

*NPI: 1982756086*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

1328 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 451-4720*

*Fax: (760) 451-4700*

*After Hours Phone: (760) 451-4720*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FQHC**

**FALLBROOK FAMILY HLTH CTR,**

*Provider ID: 289871*
*NPI: 1982756086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 451-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1316501562*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1649662719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*

*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1316501562*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 298304*
*NPI: 1649662719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-4PM*
*TU 8:30AM-12:30PM*
*W-TH 8:30AM-4PM*

**OBSTETRICS / GYNECOLOGY**

**PEARSON, LAWRENCE**
*License Type: MD*
*Provider ID: 289871*
*Provider Gender: Male*
*License Number: G37412*
*NPI: 1538234190*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**PEARSON, LAWRENCE**
*License Type: MD*
*Provider ID: 289871*
*Provider Gender: Male*
*License Number: G37412*
*NPI: 1538234190*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**PEDIATRICS**

**DEL RE, AMANDA**
*License Type: MD*
*Provider ID: 201533*
*Provider Gender: Female*
*NPI: 1548499957*
*Provider English Spoken: Y*
*Cultural Competency: N*

# C. Primary Care Directory

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1107 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-0070*
*Fax: (760) 451-1499*
*After Hours Phone: (760) 451-0070*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**LINARES, YENDI**
*License Type: MD*
*Provider ID: 279215*
*Provider Gender: Female*
*NPI: 1336674886*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1107 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-0070*
*Fax: (760) 451-1499*
*After Hours Phone: (760) 451-0070*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ROBINSON, DAISY**
*License Type: MD*
*Provider ID: 204471*
*Provider Gender: Female*
*NPI: 1659389740*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-4PM*

**PEDIATRICS**

**VU, WENDY**
*License Type: MD*
*Provider ID: 289871*
*Provider Gender: Female*
*License Number: A169529*
*NPI: 1508148370*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4770*
*After Hours Phone: (760) 451-4770*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-7:30PM*
*SA 8AM-5PM*

**PEDIATRICS**

**VU, WENDY**
*License Type: MD*
*Provider ID: 289871*
*Provider Gender: Female*
*License Number: A169529*
*NPI: 1508148370*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4770*
*After Hours Phone: (760) 451-4770*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-7:30PM*
*SA 8AM-5PM*

## IMPERIAL BEACH

**FAMILY PRACTICE**

**JOHNSON, DANIEL**
*License Type: DO*
*Provider ID: 289864*
*Provider Gender: Male*
*License Number: 20A9393*
*NPI: 1245311216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-9PM*
*F 8:30AM-5PM*
*SA 8:30AM-2PM*

**FAMILY PRACTICE**

**JOHNSON, DANIEL**
*License Type: DO*
*Provider ID: 289864*
*Provider Gender: Male*
*License Number: 20A9393*
*NPI: 1245311216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-9PM*
*F 8:30AM-5PM*
*SA 8:30AM-2PM*

**FQHC**

**IMPERIAL BEACH HEALTH CENTER,**
*Provider ID: 289864*
*NPI: 1790718351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**IMPERIAL BEACH HEALTH CENTER,**
*Provider ID: 289864*
*NPI: 1790718351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**RYAN, DANA**
*License Type: MD*
*Provider ID: 289864*
*Provider Gender: Female*
*License Number: A66830*
*NPI: 1780609990*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RYAN, DANA**
*License Type: MD*
*Provider ID: 289864*
*Provider Gender: Female*
*License Number: A66830*
*NPI: 1780609990*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DOKICH, SRETENKA**
*License Type: MD*
*Provider ID: 289864*
*Provider Gender: Female*
*License Number: A51447*
*NPI: 1154409035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Serbian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE

IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DOKICH, SRETENKA**
*License Type: MD*
*Provider ID: 289864*
*Provider Gender: Female*
*License Number: A51447*
*NPI: 1154409035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Serbian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**JULIAN**

**CLINIC OUTPATIENT**

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**
*Provider ID: 307283*
*NPI: 1235804139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*Fax: (760) 765-1278*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CLINIC OUTPATIENT**

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**
*Provider ID: 307283*
*NPI: 1235804139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*Fax: (760) 765-1278*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**WYLIE, BLAKE**
*License Type: DO*
*Provider ID: 307283*
*Provider Gender: Male*
*License Number: 20A11088*
*NPI: 1922314145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**WYLIE, BLAKE**
*License Type: DO*
*Provider ID: 307283*
*Provider Gender: Male*
*License Number: 20A11088*
*NPI: 1922314145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**
*Provider ID: 307283*
*NPI: 1235804139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*Fax: (760) 765-1278*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**
*Provider ID: 307283*
*NPI: 1235804139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2721 WASHINGTON ST
JULIAN, CA 92036
*Phone: (619) 662-4100*
*Fax: (760) 765-1278*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## LA JOLLA

**PEDIATRICS**

**GAINOR, GRETCHEN**
*License Type: MD*
*Provider ID: 279603*
*Provider Gender: Female*
*NPI: 1174504757*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
*Phone: (858) 459-4351*
*Fax: (858) 459-4399*
*After Hours Phone: (858) 459-4351*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

# C. Primary Care Directory

**PEDIATRICS**

**GANDHI, SHEETAL**

*License Type: MD*

*Provider ID: 205020*

*Provider Gender: Female*

*NPI: 1700858859*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037

*Phone: (858) 457-2043*

*Fax: (858) 457-2092*

*After Hours Phone: (858) 457-2043*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**PARSONS, GENEVIEVE**

*License Type: MD*

*Provider ID: 206224*

*Provider Gender: Female*

*NPI: 1699700914*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

*Phone: (858) 459-4351*

*Fax: (858) 459-4399*

*After Hours Phone: (858) 459-4351*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ROBERTS, KENDALL**

*License Type: MD*

*Provider ID: 205024*

*Provider Gender: Male*

*NPI: 1265762033*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037

*Phone: (858) 457-2043*

*Fax: (858) 457-2092*

*After Hours Phone: (858) 457-2043*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**TUNG, VIVIAN**

*License Type: MD*

*Provider ID: 204348*

*Provider Gender: Female*

*NPI: 1285665133*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
*Phone: (858) 459-4351*
*Fax: (858) 459-4399*
*After Hours Phone: (858) 459-4351*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## LA MESA

### PEDIATRICS

**MOLINOS, NICOLE**
*License Type: MD*
*Provider ID: 279283*
*Provider Gender: Female*
*NPI: 1538685524*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942
*Phone: (619) 698-2184*
*Fax: (619) 698-2084*
*After Hours Phone: (619) 698-2184*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

## LAKESIDE

### CHIROPRACTOR

**PAGE, BIANCA**
*License Type: DC*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: DC33688*
*NPI: 1649787607*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### CHIROPRACTOR

**PAGE, BIANCA**
*License Type: DC*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: DC33688*
*NPI: 1649787607*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FAMILY PRACTICE

**FERRAIOLO, NATALIE**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A152372*
*NPI: 1306290143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**FERRAIOLO, NATALIE**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A152372*
*NPI: 1306290143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LIU-BARBARO, DOROTHY**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A115342*
*NPI: 1851602270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (619) 440-2751*
*After Hours Phone: (619) 440-2751*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LIU-BARBARO, DOROTHY**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A115342*
*NPI: 1851602270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (619) 440-2751*
*After Hours Phone: (619) 440-2751*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE LAKESIDE,**
*Provider ID: 289859*
*NPI: 1932384120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*Fax: (360) 462-2744*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE LAKESIDE,**
*Provider ID: 289859*
*NPI: 1932384120*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*Fax: (360) 462-2744*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL PRACTICE**

**MANNINO, ELIZABETH**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A43914*
*NPI: 1548290463*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL PRACTICE**

**MANNINO, ELIZABETH**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Female*
*License Number: A43914*
*NPI: 1548290463*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**MCFARLAND, NATHAN**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Male*
*License Number: A75411*
*NPI: 1265462196*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

# C. Primary Care Directory

**MCFARLAND, NATHAN**
*License Type: MD*
*Provider ID: 289859*
*Provider Gender: Male*
*License Number: A75411*
*NPI: 1265462196*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## LEMON GROVE

### CERTIFIED NURSE PRACTITIONER

**ALLEN, KATHERINE**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP95009933*
*NPI: 1831557024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**ALLEN, KATHERINE**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP95009933*
*NPI: 1831557024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**SMITH, SHARON**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP15444*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE

# C. Primary Care Directory

**PRACTITIONER**

**SMITH, SHARON**

*License Type: NP*

*Provider ID: 46661*

*Provider Gender: Female*

*License Number: RN428876*

*NPI: 1780603597*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945

*Phone: (619) 515-2550*

*After Hours Phone: (619) 515-2550*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**

*License Type: NP*

*Provider ID: 46661*

*Provider Gender: Female*

*License Number: NP15444*

*NPI: 1780603597*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945

*Phone: (619) 515-2550*

*After Hours Phone: (619) 515-2550*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**

*License Type: NP*

*Provider ID: 46661*

*Provider Gender: Female*

*License Number: RN428876*

*NPI: 1780603597*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945

*Phone: (619) 515-2550*

*After Hours Phone: (619) 515-2550*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TOTH, JESSICA**

*License Type: NP*

*Provider ID: 46661*

*Provider Gender: Female*

*License Number: NP95001050*

*NPI: 1578993788*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945

*Phone: (619) 515-2550*

*After Hours Phone: (619) 515-2550*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

# C. Primary Care Directory

**TOTH, JESSICA**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP95001050*
*NPI: 1578993788*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DORN, TIA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: C172318*
*NPI: 1285074740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**DORN, TIA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*

*License Number: C172318*
*NPI: 1285074740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**KIM, YUHEE**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A107323*
*NPI: 1629289400*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KIM, YUHEE**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A107323*
*NPI: 1629289400*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LEMON GROVE FAMILY HEALTH CENTER,**
*Provider ID: 46661*
*NPI: 1427282466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*Fax: (619) 825-9577*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FQHC**

**LEMON GROVE FAMILY HEALTH CENTER,**
*Provider ID: 46661*
*NPI: 1427282466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*

*Fax: (619) 825-9577*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**INTERNAL MEDICINE**

**GALLARES, DANIEL**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A165925*
*NPI: 1245689488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**GALLARES, DANIEL**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A165925*
*NPI: 1245689488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL,*

*SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*

*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL*

# C. Primary Care Directory

*CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**JACKSON, DANA**
*License Type: DO*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: 20A14119*
*NPI: 1689060063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JACKSON, DANA**
*License Type: DO*
*Provider ID: 46661*
*Provider Gender: Female*
*License Number: 20A14119*
*NPI: 1689060063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**FLEMING, DAVID**
*License Type: PA*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: PA12416*
*NPI: 1932329505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**FLEMING, DAVID**

*License Type: PA*
*Provider ID: 46661*
*Provider Gender: Male*
*License Number: PA12416*
*NPI: 1932329505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## NATIONAL CITY

### CERTIFIED NURSE PRACTITIONER

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 25518*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 109486*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 25518*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM*

*F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**

*License Type: NP*
*Provider ID: 109486*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**

*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**

*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**

*License Type: NP*
*Provider ID: 25518*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*License Type: NP*
*Provider ID: 109486*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*License Type: NP*
*Provider ID: 25518*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*License Type: NP*
*Provider ID: 109486*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**LUM, YUIN-WAH**
*License Type: NP*
*Provider ID: 121626*
*Provider Gender: Female*
*License Number: NP95010663*
*NPI: 1942764477*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LUM, YUIN-WAH**
*License Type: NP*
*Provider ID: 121626*
*Provider Gender: Female*
*License Number: NP95010663*
*NPI: 1942764477*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**NEVAREZ, IRENE**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95009891*
*NPI: 1003166646*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 564-8765*
*After Hours Phone: (619) 564-8765*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**NEVAREZ, IRENE**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95009891*
*NPI: 1003166646*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 564-8765*
*After Hours Phone: (619) 564-8765*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*

# C. Primary Care Directory

*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP17328*
*NPI: 1548450471*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Catalan, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP17328*
*NPI: 1548450471*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Catalan, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619)*

*434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95001961*
*NPI: 1932452323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95001961*
*NPI: 1932452323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE

NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VILLANUEVA DE GUTIE, BERENICE**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95002188*
*NPI: 1952795536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VILLANUEVA DE GUTIE, BERENICE**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95002188*
*NPI: 1952795536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**
*License Type: DC*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: DC29314*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**
*License Type: DC*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: DC29314*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ANDAYA, MIKHAEL**
*License Type: MD*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: A176878*
*NPI: 1780189209*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ANDAYA, MIKHAEL**
*License Type: MD*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: A176878*
*NPI: 1780189209*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAEZ, BEATRICE**
*License Type: MD*
*Provider ID: 25518*
*Provider Gender: Female*
*License Number: A74777*
*NPI: 1245372507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BAEZ, BEATRICE**
*License Type: MD*
*Provider ID: 25518*
*Provider Gender: Female*
*License Number: A74777*
*NPI: 1245372507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*

# C. Primary Care Directory

*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**CAMPBELL, BRIANNA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A157488*
*NPI: 1316479892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CANLAS, AVELINO**
*License Type: MD*
*Provider ID: 25518*
*Provider Gender: Male*
*License Number: A74854*
*NPI: 1275682528*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**FAMILY PRACTICE**

**CAMPBELL, BRIANNA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A157488*
*NPI: 1316479892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CANLAS, AVELINO**
*License Type: MD*
*Provider ID: 25518*
*Provider Gender: Male*
*License Number: A74854*
*NPI: 1275682528*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CEVALLOS, JAMES**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: A55469*
*NPI: 1720181829*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 474-3722*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CEVALLOS, JAMES**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: A55469*

*NPI: 1720181829*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 474-3722*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DILLON, MAYRA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A112571*
*NPI: 1629232715*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 336-2323*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**DILLON, MAYRA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A112571*
*NPI: 1629232715*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 336-2323*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LANUZA, MARK J**
*License Type: DO*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: 20A18460*
*NPI: 1992230593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*

*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FAMILY PRACTICE**

**LANUZA, MARK J**

*License Type: DO*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: 20A18460*
*NPI: 1992230593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FAMILY PRACTICE**

**LAW, KAREN**

*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A138534*
*NPI: 1205253150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LAW, KAREN**

*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A138534*
*NPI: 1205253150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEUTE, ERIC**

*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Male*
*License Number: A80832*
*NPI: 1720171507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEUTE, ERIC**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Male*
*License Number: A80832*
*NPI: 1720171507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MEDINA, ALEXANDER**
*License Type: MD*
*Provider ID: 247959*
*Provider Gender: Male*
*License Number: A133539*
*NPI: 1467714436*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MEDINA, ALEXANDER**
*License Type: MD*
*Provider ID: 247959*
*Provider Gender: Male*
*License Number: A133539*
*NPI: 1467714436*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MOHAMEDI, NADIA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A146819*
*NPI: 1477947364*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A

NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**MOHAMEDI, NADIA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A146819*
*NPI: 1477947364*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NIKZAD, JASON**
*License Type: DO*
*Provider ID: 247959*
*Provider Gender: Male*
*License Number: 20A12653*
*NPI: 1508121674*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NIKZAD, JASON**
*License Type: DO*
*Provider ID: 247959*
*Provider Gender: Male*
*License Number: 20A12653*
*NPI: 1508121674*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NOLASCO, JOANNA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A138919*
*NPI: 1154749315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NOLASCO, JOANNA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A138919*
*NPI: 1154749315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**OCEGUEDA, JOSHUA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: A165184*
*NPI: 1336643345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

# C. Primary Care Directory

*MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**OCEGUEDA, JOSHUA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: A165184*
*NPI: 1336643345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**RICHARDSON, DANIELLE**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A127555*
*NPI: 1609142892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RICHARDSON, DANIELLE**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A127555*
*NPI: 1609142892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROBERTS, POMAI**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A103218*
*NPI: 1023278314*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ROBERTS, POMAI**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: A103218*
*NPI: 1023278314*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
*License Type: DO*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: 20A6433*
*NPI: 1184616872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNOOK, BRIAN**
*License Type: DO*
*Provider ID: 42839*
*Provider Gender: Male*
*License Number: 20A11518*
*NPI: 1295977353*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2806*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNOOK, BRIAN**
*License Type: DO*
*Provider ID: 42839*
*Provider Gender: Male*
*License Number: 20A11518*
*NPI: 1295977353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2806*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**STONES, RACHEL**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: A167184*
*NPI: 1720583040*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FAMILY PRACTICE**

**STONES, RACHEL**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: A167184*
*NPI: 1720583040*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**FAMILY HEALTH CTR SD NATIONAL CITY,**
*Provider ID: 121626*
*NPI: 1417409228*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FQHC**

**FAMILY HEALTH CTR SD NATIONAL CITY,**
*Provider ID: 121626*
*NPI: 1417409228*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**
*Provider ID: 58606*
*NPI: 1336353721*
*Provider English Spoken: Y*

# C. Primary Care Directory

*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**
*Provider ID: 58606*
*NPI: 1336353721*
*Provider English Spoken: Y*
*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FQHC**

**OPERATION SAMAHAN - NATIONAL C,**
*Provider ID: 25518*
*NPI: 1801907449*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 474-3919*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**FQHC**

**OPERATION SAMAHAN - NATIONAL C,**
*Provider ID: 25518*
*NPI: 1801907449*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 474-3919*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**FQHC**

**OPERATION SAMAHAN GRANGER SCHOOL BASED,**
*Provider ID: 109486*
*NPI: 1205134517*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-8999*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**OPERATION SAMAHAN GRANGER SCHOOL BASED,**
*Provider ID: 109486*
*NPI: 1205134517*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-8999*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH NATIONAL CITY,**
*Provider ID: 25520*
*NPI: 1003869363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 474-3722*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH NATIONAL CITY,**
*Provider ID: 25520*
*NPI: 1003869363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 474-3722*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH PARADISE HILLS,**
*Provider ID: 42839*
*NPI: 1598907487*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2811*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH PARADISE HILLS,**
*Provider ID: 42839*
*NPI: 1598907487*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2811*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH SOUTH BAY,**
*Provider ID: 247959*
*NPI: 1851757215*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 434-3514*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH SOUTH BAY,**
*Provider ID: 247959*
*NPI: 1851757215*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 434-3514*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**

*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 247959*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 247959*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian,*

*Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**NEUROLOGY**

**CANTU-REYNA, GUILLERMO**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 798-3977*
*After Hours Phone: (619) 798-3977*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**CANTU-REYNA, GUILLERMO**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 798-3977*
*After Hours Phone: (619) 798-3977*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**CANTU-REYNA, GUILLERMO**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 798-3977*
*After Hours Phone: (619) 798-3977*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ASLIAN, AZITA**

*License Type: MD*

*Provider ID: 42839*

*Provider Gender: Female*

*License Number: A118227*

*NPI: 1851667661*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Faroese, Fataleka*

*Cultural Competency: N*

*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ASLIAN, AZITA**

*License Type: MD*

*Provider ID: 42839*

*Provider Gender: Female*

*License Number: A118227*

*NPI: 1851667661*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Faroese, Fataleka*

*Cultural Competency: N*

*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BAILONY, MOHAMMED**

*License Type: MD*

*Provider ID: 204571*

*Provider Gender: Male*

*NPI: 1376625913*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: Yes*

*RADY CHILDRENS HEALTH NETWORK*

655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

*Phone: (619) 470-1945*

*Fax: (619) 475-5048*

*After Hours Phone: (619) 470-1945*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**BAILONY, AHMAD**

*License Type: MD*

*Provider ID: 204623*

*Provider Gender: Male*

*NPI: 1790914422*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
*Phone: (619) 470-1945*
*Fax: (619) 475-5048*
*After Hours Phone: (619) 470-1945*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**BONSU, BEMA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: C55180*
*NPI: 1932106986*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BONSU, BEMA**
*License Type: MD*
*Provider ID: 25520*
*Provider Gender: Male*
*License Number: C55180*
*NPI: 1932106986*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619)*

*434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DABU, LISA**
*License Type: MD*
*Provider ID: 310258*
*Provider Gender: Female*
*NPI: 1881128254*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
502 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
*Phone: (619) 475-6204*
*Fax: (619) 475-5174*
*After Hours Phone: (619) 475-6204*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**DAY, CHRISTOPHER**
*License Type: MD*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: A163862*
*NPI: 1184121253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**PEDIATRICS**

**DAY, CHRISTOPHER**
*License Type: MD*
*Provider ID: 121626*
*Provider Gender: Male*
*License Number: A163862*
*NPI: 1184121253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*

# C. Primary Care Directory

*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**PEDIATRICS**

**FRESNO, BLANCA**
*License Type: MD*
*Provider ID: 204715*
*Provider Gender: Female*
*NPI: 1346258787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
*Phone: (619) 475-4575*
*Fax: (619) 475-4578*
*After Hours Phone: (619) 475-4575*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU-SA 8AM-5PM*

**PEDIATRICS**

**GARCIA, RAFAEL**
*License Type: MD*
*Provider ID: 204938*
*Provider Gender: Male*
*NPI: 1053414086*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 527-7700*
*Fax: (619) 527-3226*
*After Hours Phone: (619) 527-7700*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RANA, DEBORAH**
*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: G88347*
*NPI: 1033191457*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**PEDIATRICS**

**RANA, DEBORAH**

*License Type: MD*
*Provider ID: 42839*
*Provider Gender: Female*
*License Number: G88347*
*NPI: 1033191457*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**UY, CARMELITA**

*License Type: MD*
*Provider ID: 204563*
*Provider Gender: Female*
*NPI: 1154431484*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2340 E 8TH ST STE E
NATIONAL CITY, CA 91950
*Phone: (619) 216-8500*
*Fax: (619) 216-8511*
*After Hours Phone: (619) 216-8511*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**VALENCIA, MARILES**

*License Type: MD*
*Provider ID: 204503*
*Provider Gender: Female*
*NPI: 1275541625*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
*Phone: (619) 475-4575*
*Fax: (619) 475-4578*
*After Hours Phone: (619) 475-4575*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU-SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**

*License Type: PA*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**
*License Type: PA*
*Provider ID: 58606*
*Provider Gender: Male*
*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**PHYSICIANS ASSISTANT**

**BANGS, SASHA**
*License Type: PA*
*Provider ID: 121626*
*Provider Gender: Female*
*License Number: PA55660*
*NPI: 1720524374*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BANGS, SASHA**
*License Type: PA*
*Provider ID: 121626*
*Provider Gender: Female*
*License Number: PA55660*
*NPI: 1720524374*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MARTINEZ-MURGUIA, IRENE**
*License Type: PA*
*Provider ID: 58606*
*Provider Gender: Female*
*License Number: PA20296*
*NPI: 1447492889*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MARTINEZ-MURGUIA, IRENE**

*License Type: PA*

*Provider ID: 58606*

*Provider Gender: Female*

*License Number: PA20296*

*NPI: 1447492889*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (619) 434-7308*

*After Hours Phone: (619) 434-7308*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**

*License Type: PA*

*Provider ID: 58606*

*Provider Gender: Female*

*License Number: PA21625*

*NPI: 1154609790*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (619) 434-7308*

*After Hours Phone: (619) 434-7308*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**

*License Type: PA*

*Provider ID: 58606*

*Provider Gender: Female*

*License Number: PA21625*

*NPI: 1154609790*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (619) 434-7308*

*After Hours Phone: (619) 434-7308*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

## OCEANSIDE

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**

*License Type: NP*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95003571*

*NPI: 1053776914*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95003571*
*NPI: 1053776914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*License Type: NP*
*Provider ID: 289857*
*Provider Gender: Female*
*License Number: NP95001653*
*NPI: 1427325166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 757-5841*
*After Hours Phone: (760) 757-5841*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*License Type: NP*
*Provider ID: 305294*
*Provider Gender: Female*
*License Number: NP95001653*
*NPI: 1427325166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 757-5841*
*After Hours Phone: (760) 757-5841*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*License Type: NP*
*Provider ID: 305294*
*Provider Gender: Female*
*License Number: NP95001653*
*NPI: 1427325166*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 757-5841*
*After Hours Phone: (760) 757-5841*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*License Type: NP*
*Provider ID: 289857*
*Provider Gender: Female*
*License Number: NP95001653*
*NPI: 1427325166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 757-5841*
*After Hours Phone: (760) 757-5841*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*

*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*

*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*

*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP20497*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*

# C. Primary Care Directory

*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*

*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95001650*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*License Type: NPF*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE**

# C. Primary Care Directory

**PRACTITIONER**

**EVERETT, ELIZABETH**

*License Type: NPF*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95025094*

*NPI: 1942952767*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**

*License Type: NPF*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95025094*

*NPI: 1942952767*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**

*License Type: NPF*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95025094*

*NPI: 1942952767*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**

*License Type: NPF*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95025094*

*NPI: 1942952767*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**

*License Type: NPF*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95025094*

*NPI: 1942952767*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Sign Language*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*License Type: NP*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*License Type: NP*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*License Type: NP*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*License Type: NP*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*License Type: NP*

*Provider ID: 289943*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 304702*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289899*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 304701*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289943*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 304702*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*

*Provider ID: 289899*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 304701*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95022679*
*NPI: 1407545221*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**

*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: NP95020894*
*NPI: 1427797943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*
*Provider ID: 289899*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 304701*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 289899*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 304701*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*

*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*

*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*License Type: NP*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A12958*
*NPI: 1003172016*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A12958*
*NPI: 1003172016*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A12958*
*NPI: 1003172016*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289902*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*

*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A18374*
*NPI: 1831354026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*License Type: MD*
*Provider ID: 304701*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*License Type: MD*
*Provider ID: 289899*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057

# C. Primary Care Directory

*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 289899*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*License Type: MD*
*Provider ID: 304701*
*Provider Gender: Male*
*License Number: A135564*
*NPI: 1699038125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL*

*CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**MILLER, DIANA**
*License Type: DO*
*Provider ID: 289943*
*Provider Gender: Female*
*License Number: 20A17371*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**MILLER, DIANA**
*License Type: DO*
*Provider ID: 304702*
*Provider Gender: Female*
*License Number: 20A17371*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**MILLER, DIANA**
*License Type: DO*
*Provider ID: 304702*
*Provider Gender: Female*
*License Number: 20A17371*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**MILLER, DIANA**
*License Type: DO*
*Provider ID: 304702*
*Provider Gender: Female*
*License Number: 20A17371*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

# C. Primary Care Directory

**MILLER, DIANA**
*License Type: DO*
*Provider ID: 289943*
*Provider Gender: Female*
*License Number: 20A17371*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

# C. Primary Care Directory

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A21066*
*NPI: 1891069662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*

*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A149340*
*NPI: 1235492760*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*
*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*
*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*
*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*

*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*
*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*License Type: DO*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: 20A8949*
*NPI: 1871791749*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289857*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289857*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*

*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1649662719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1316501562*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*

*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1649662719*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 289902*
*NPI: 1316501562*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 8AM-12PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC HORNE STREET,**
*Provider ID: 289943*
*NPI: 1609094036*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC HORNE STREET,**
*Provider ID: 304702*
*NPI: 1609094036*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC HORNE STREET,**
*Provider ID: 289943*
*NPI: 1609094036*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC HORNE STREET,**
*Provider ID: 304702*
*NPI: 1609094036*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC PIER VIEW WAY,**
*Provider ID: 289899*
*NPI: 1629357355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC PIER VIEW WAY,**
*Provider ID: 304701*
*NPI: 1629357355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC PIER VIEW WAY,**
*Provider ID: 289899*
*NPI: 1629357355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**FQHC**

**VISTA COMMUNITY CLINIC**
**PIER VIEW WAY,**
*Provider ID: 304701*
*NPI: 1629357355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Female*
*License Number: C54458*
*NPI: 1942204979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

# C. Primary Care Directory

**CALHOUN, CHANELLE**
*License Type: MD*
*Provider ID: 289857*
*Provider Gender: Female*
*License Number: G75390*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 891-4667*
*After Hours Phone: (760) 891-4667*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CALHOUN, CHANELLE**
*License Type: MD*
*Provider ID: 305294*
*Provider Gender: Female*
*License Number: G75390*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 891-4667*
*After Hours Phone: (760) 891-4667*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CALHOUN, CHANELLE**
*License Type: MD*
*Provider ID: 303883*
*Provider Gender: Female*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CALHOUN, CHANELLE**
*License Type: MD*
*Provider ID: 289857*
*Provider Gender: Female*
*License Number: G75390*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054

*Phone: (760) 891-4667*
*After Hours Phone: (760) 891-4667*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CALHOUN, CHANELLE**
*License Type: MD*
*Provider ID: 305294*
*Provider Gender: Female*
*License Number: G75390*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 891-4667*
*After Hours Phone: (760) 891-4667*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**CURLEY, EDWARD**
*License Type: MD*
*Provider ID: 289857*
*Provider Gender: Male*
*License Number: A73814*
*NPI: 1164434312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**CURLEY, EDWARD**
*License Type: MD*
*Provider ID: 305294*
*Provider Gender: Male*
*License Number: A73814*
*NPI: 1164434312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**CURLEY, EDWARD**
*License Type: MD*
*Provider ID: 303869*
*Provider Gender: Male*
*NPI: 1164434312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**CURLEY, EDWARD**
*License Type: MD*
*Provider ID: 305294*
*Provider Gender: Male*
*License Number: A73814*
*NPI: 1164434312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**CURLEY, EDWARD**
*License Type: MD*
*Provider ID: 289857*
*Provider Gender: Male*
*License Number: A73814*
*NPI: 1164434312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**DANIELS, SARAH**
*License Type: MD*
*Provider ID: 204869*
*Provider Gender: Female*
*NPI: 1730446527*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# C. Primary Care Directory

**PEDIATRICS**

**GUNTA, SUJANA**

*License Type: MD*

*Provider ID: 304701*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 818 PIER VIEW WAY OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GUNTA, SUJANA**

*License Type: MD*

*Provider ID: 289899*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 818 PIER VIEW WAY OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GUNTA, SUJANA**

*License Type: MD*

*Provider ID: 289899*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 818 PIER VIEW WAY OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GUNTA, SUJANA**

*License Type: MD*

*Provider ID: 304701*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

# C. Primary Care Directory

*DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**KRAMER, MELISSA**
*License Type: MD*
*Provider ID: 278249*
*Provider Gender: Female*
*NPI: 1467833467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*Fax: (760) 547-1011*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**MAC, VICTOR**
*License Type: DO*
*Provider ID: 289857*
*Provider Gender: Male*
*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**MAC, VICTOR**
*License Type: DO*
*Provider ID: 305294*
*Provider Gender: Male*
*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**MAC, VICTOR**
*License Type: DO*
*Provider ID: 305294*
*Provider Gender: Male*

*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**MAC, VICTOR**
*License Type: DO*
*Provider ID: 289857*
*Provider Gender: Male*
*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**MACINTYRE, ELIZABETH**
*License Type: MD*
*Provider ID: 282327*
*Provider Gender: Female*
*NPI: 1336520766*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*Fax: (760) 547-1011*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**PEDIATRICS**

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

# C. Primary Care Directory

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MCCAMMACK, BRADLEY**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: A130883*
*NPI: 1629368857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3731*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MILLER, DONALD**
*License Type: MD*
*Provider ID: 204370*
*Provider Gender: Male*
*NPI: 1154356582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**NOVOTA, GABRIELA**
*License Type: MD*
*Provider ID: 309792*
*Provider Gender: Female*
*NPI: 1154520096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**PARK, RONALD**
*License Type: MD*
*Provider ID: 303868*
*Provider Gender: Male*
*NPI: 1881695914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**PEDIATRICS**

**PERKINS, RACHEL**
*License Type: MD*
*Provider ID: 206313*
*Provider Gender: Female*
*NPI: 1427398320*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289902*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

## POWAY

### FAMILY PRACTICE

**KAUR, JATINDER**
*License Type: MD*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: A120771*
*NPI: 1912141391*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FAMILY PRACTICE

**KAUR, JATINDER**
*License Type: MD*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: A120771*
*NPI: 1912141391*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FQHC

**NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,**
*Provider ID: 289883*
*NPI: 1023518768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*Fax: (360) 462-2742*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FQHC

**NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,**
*Provider ID: 289883*
*NPI: 1023518768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*Fax: (360) 462-2742*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CURET, ZULMA**
*License Type: MD*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: A119661*
*NPI: 1841561107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CURET, ZULMA**
*License Type: MD*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: A119661*
*NPI: 1841561107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**LINDBACK, SARAH**
*License Type: MD*
*Provider ID: 204859*
*Provider Gender: Female*
*NPI: 1427345487*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**LOSTETTER, ADRIENNE**
*License Type: MD*
*Provider ID: 204611*

*Provider Gender: Female*
*NPI: 1881607984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MOREIRA, LUCILA**
*License Type: DO*
*Provider ID: 276093*
*Provider Gender: Female*
*NPI: 1104846567*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU-SA 8AM-5PM*

**PEDIATRICS**

**MORTIMER, DORI**
*License Type: MD*
*Provider ID: 204396*
*Provider Gender: Female*
*NPI: 1417928417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RAMGREN, AILEEN**
*License Type: DO*
*Provider ID: 223702*
*Provider Gender: Female*
*NPI: 1356785505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL*

*CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**TAI, KUANGKAI**
*License Type: MD*
*Provider ID: 204807*
*Provider Gender: Male*
*NPI: 1396744066*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15525 POMERADO RD STE B1
POWAY, CA 92064
*Phone: (858) 487-8333*
*Fax: (858) 487-0856*
*After Hours Phone: (858) 484-4003*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM SA 8:30AM-12PM*

**PHYSICIANS ASSISTANT**

**BALDWIN, DONNA**
*License Type: PA*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: PA23310*
*NPI: 1649692369*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**PHYSICIANS ASSISTANT**

**BALDWIN, DONNA**
*License Type: PA*
*Provider ID: 289883*
*Provider Gender: Female*
*License Number: PA23310*
*NPI: 1649692369*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

## RAMONA

**CERTIFIED NURSE PRACTITIONER**

**DOAN, CHINH**
*License Type: NP*
*Provider ID: 289875*
*Provider Gender: Female*

*License Number: NP18874*
*NPI: 1083845069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**DOAN, CHINH**
*License Type: NP*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: NP18874*
*NPI: 1083845069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289875*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289875*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**HO, LYSA**
*License Type: DO*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: 20A17507*
*NPI: 1821494337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**HO, LYSA**
*License Type: DO*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: 20A17507*
*NPI: 1821494337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**INTERNAL MEDICINE**

**YUNG, DORIS**
*License Type: MD*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: A89893*
*NPI: 1730386863*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**YUNG, DORIS**
*License Type: MD*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: A89893*
*NPI: 1730386863*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**REIFENBERGER, JODY**
*License Type: PA*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: PA22669*
*NPI: 1386741072*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760)*

*736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**REIFENBERGER, JODY**
*License Type: PA*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: PA22669*
*NPI: 1386741072*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ZANGEN, ROCHELLE**
*License Type: PA*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: PA51494*
*NPI: 1447681150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ZANGEN, ROCHELLE**
*License Type: PA*
*Provider ID: 289875*
*Provider Gender: Female*
*License Number: PA51494*
*NPI: 1447681150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## SAN DIEGO

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU*

*8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 203755*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 203755*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*License Type: NP*
*Provider ID: 203755*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ARTS, SERENA**
*License Type: NPF*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP10769*
*NPI: 1801881552*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ARTS, SERENA**
*License Type: NPF*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP10769*
*NPI: 1801881552*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ARVIZU, MARGARITA**
*License Type: NPF*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95024510*
*NPI: 1558058636*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**ARVIZU, MARGARITA**
*License Type: NPF*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95024510*
*NPI: 1558058636*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**BELEN, NEZER**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: NP95009292*
*NPI: 1386120723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**BELEN, NEZER**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: NP95009292*
*NPI: 1386120723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**BURNS, DELLA**
*License Type: NP*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: NP7413*
*NPI: 1871577023*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**BURNS, DELLA**
*License Type: NP*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: NP7413*
*NPI: 1871577023*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**CELESTIN-RAMSEY, AKANKE**
*License Type: NPF*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: NP8563*
*NPI: 1447450275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

# C. Primary Care Directory

**CELESTIN-RAMSEY, AKANKE**
*License Type: NPF*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: NP8563*
*NPI: 1447450275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHASE, AVA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95000602*
*NPI: 1164496386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**CHASE, AVA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95000602*
*NPI: 1164496386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES-UPPAL, ALLISON**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95026125*
*NPI: 1053002360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**DAVIES-UPPAL, ALLISON**

*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95026125*
*NPI: 1053002360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**DEMESSIE, RAHEL**

*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95027483*
*NPI: 1619749041*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**DEMESSIE, RAHEL**

*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95027483*
*NPI: 1619749041*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**

*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**GALLEGOS, CYNTHIA**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95016217*
*NPI: 1174105589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GALLEGOS, CYNTHIA**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95016217*
*NPI: 1174105589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, JOHNNY**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: NP95007000*
*NPI: 1932622156*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, JOHNNY**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: NP95007000*
*NPI: 1932622156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GOLDFINGER, SARAH**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95011313*
*NPI: 1134686744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GOLDFINGER, SARAH**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95011313*
*NPI: 1134686744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GRAYSON, ANDREA**
*License Type: NPF*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP23206*
*NPI: 1447577671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**GRAYSON, ANDREA**
*License Type: NPF*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP23206*
*NPI: 1447577671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP95010517*
*NPI: 1346443983*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HARRINGTON, BARBARA LORRAINE**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP17008*
*NPI: 1659579134*
*Provider English Spoken: Y*

**CERTIFIED NURSE**

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRINGTON, BARBARA LORRAINE**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP17008*
*NPI: 1659579134*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**HART, BECKY**
*License Type: NPF*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95025699*
*NPI: 1316626344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HART, BECKY**
*License Type: NPF*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95025699*
*NPI: 1316626344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HEFNER, ANNA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP5512*
*NPI: 1588913537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND*

# C. Primary Care Directory

*HEALTHCARE CTR*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HEFNER, ANNA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP5512*
*NPI: 1588913537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILL, GENIELYN**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95020046*
*NPI: 1710632435*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILL, GENIELYN**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95020046*
*NPI: 1710632435*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILLIARD, THESALONICA**

*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95010585*
*NPI: 1861956724*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILLIARD, THESALONICA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95010585*
*NPI: 1861956724*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HOANG, CHI**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP95004600*
*NPI: 1902350994*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HOANG, CHI**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP95004600*
*NPI: 1902350994*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**

*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**

*License Type: NP*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: NP17852*

*NPI: 1205019510*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Thai*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**

*License Type: NP*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: NP17852*

*NPI: 1205019510*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Thai*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HORNEY, KRISTAN**

*License Type: NPF*

*Provider ID: 289863*

*Provider Gender: Female*

*License Number: NP95007712*

*NPI: 1720590904*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HORNEY, KRISTAN**

*License Type: NPF*

*Provider ID: 289863*

*Provider Gender: Female*

*License Number: NP95007712*

*NPI: 1720590904*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**INSTONE, SUSAN**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP4858*
*NPI: 1710223268*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**INSTONE, SUSAN**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP4858*
*NPI: 1710223268*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**JOHNSON, SHAWNA**
*License Type: NP*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: NP95002518*
*NPI: 1922237809*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**JOHNSON, SHAWNA**
*License Type: NP*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: NP95002518*
*NPI: 1922237809*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KEMP, KATHRINE**
*License Type: NP*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95018497*
*NPI: 1316615313*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**KEMP, KATHRINE**
*License Type: NP*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95018497*
*NPI: 1316615313*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**KHAN, MATTHEW**
*License Type: NP*
*Provider ID: 100648*
*Provider Gender: Male*
*License Number: NP17838*
*NPI: 1942456124*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**KHAN, MATTHEW**
*License Type: NP*
*Provider ID: 100648*
*Provider Gender: Male*
*License Number: NP17838*
*NPI: 1942456124*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE

SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**KI, TRISH**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP23847*
*NPI: 1376840199*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**KI, TRISH**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP23847*
*NPI: 1376840199*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**LENNON, RYAN**
*License Type: NPF*
*Provider ID: 298139*
*Provider Gender: Female*
*License Number: NP95027593*
*NPI: 1558084855*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*After Hours Phone: (619) 515-2355*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LENNON, RYAN**
*License Type: NPF*
*Provider ID: 298139*
*Provider Gender: Female*
*License Number: NP95027593*
*NPI: 1558084855*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF*

*SAN DIEGO*
2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*After Hours Phone: (619) 515-2355*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIEBER, CAROL**
*License Type: NP*
*Provider Gender: Female*
*License Number: NP20849*
*NPI: 1487889846*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIEBER, CAROL**
*License Type: NP*
*Provider Gender: Female*
*License Number: NP20849*
*NPI: 1487889846*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95000203*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*

# C. Primary Care Directory

*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**LU, TAMMY**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95007253*
*NPI: 1457879132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LU, TAMMY**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95007253*
*NPI: 1457879132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MANZO, CORINA**
*License Type: NPF*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95020369*
*NPI: 1669087326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**MANZO, CORINA**
*License Type: NPF*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95020369*
*NPI: 1669087326*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**MARTIN, RIA**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95005321*
*NPI: 1437695079*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MARTIN, RIA**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95005321*
*NPI: 1437695079*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MARTINEZ, CAROLYN**
*License Type: NP*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: NP22031*
*NPI: 1609101997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ibclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5PM*
*TU-TH 8:30AM-8PM*
*F 8:30AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**MARTINEZ, CAROLYN**
*License Type: NP*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: NP22031*
*NPI: 1609101997*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ibclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**MENDOZA, GRETEL MARIE**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95002233*
*NPI: 1245652387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MENDOZA, GRETEL MARIE**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95002233*
*NPI: 1245652387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MORAN, TIFFANY**
*License Type: NPF*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95011037*
*NPI: 1730730649*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**MORAN, TIFFANY**
*License Type: NPF*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95011037*
*NPI: 1730730649*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**NEVAREZ, IRENE**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95009891*
*NPI: 1003166646*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 564-8765*
*After Hours Phone: (619) 564-8765*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**NEVAREZ, IRENE**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95009891*
*NPI: 1003166646*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 564-8765*
*After Hours Phone: (619) 564-8765*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**NGUYEN, NINA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95020179*
*NPI: 1417699869*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**NGUYEN, NINA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95020179*
*NPI: 1417699869*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**NOCEDA, ANA**
*License Type: NP*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: NP19505*
*NPI: 1386971760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**NOCEDA, ANA**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP19505*
*NPI: 1386971760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**NOCEDA, ANA**
*License Type: NP*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: NP19505*
*NPI: 1386971760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**NOCEDA, ANA**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP19505*
*NPI: 1386971760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP95003427*
*NPI: 1063856805*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin, Yue Chinese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP95003427*
*NPI: 1063856805*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin, Yue Chinese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP95003427*

*NPI: 1063856805*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin, Yue Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**

*License Type: NP*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: NP95003427*

*NPI: 1063856805*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin, Yue Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP95003427*

*NPI: 1063856805*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin, Yue Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP95003427*

*NPI: 1063856805*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin, Yue Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: RN810863*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*License Type: NPF*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95000205*
*NPI: 1063835692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic, Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619)*

*515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ORPILLA, IMELDA**
*License Type: NP*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: NP95003211*
*NPI: 1790785988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ORPILLA, IMELDA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95003211*
*NPI: 1790785988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**ORPILLA, IMELDA**
*License Type: NP*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: NP95003211*
*NPI: 1790785988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**ORPILLA, IMELDA**
*License Type: NP*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: NP95003211*
*NPI: 1790785988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*

*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**PADILLA, MICHELE**
*License Type: NP*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95020636*
*NPI: 1356083828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

# C. Primary Care Directory

**PADILLA, MICHELE**
*License Type: NP*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: NP95020636*
*NPI: 1356083828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATEL, KELLY**
*License Type: NP*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NP95004735*
*NPI: 1033493747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATEL, KELLY**
*License Type: NP*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NP95004735*
*NPI: 1033493747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*

*8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: NP95012511*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**PERRY, KATHERINE**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95014964*
*NPI: 1215543426*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**PERRY, KATHERINE**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95014964*
*NPI: 1215543426*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**QUINTO, CINDY**
*License Type: NP*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: NP16433*
*NPI: 1902810377*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Lao, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**QUINTO, CINDY**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP16433*
*NPI: 1902810377*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Lao, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUINTO, CINDY**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP16433*
*NPI: 1902810377*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Lao, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**QUINTO, CINDY**
*License Type: NP*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: NP16433*
*NPI: 1902810377*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Lao, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare*

*.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95002766*
*NPI: 1083081467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**RILEY, JEREN**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Male*
*License Number: NP95012588*
*NPI: 1932742376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**RILEY, JEREN**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Male*
*License Number: NP95012588*
*NPI: 1932742376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

**CERTIFIED NURSE**

# C. Primary Care Directory

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**ROGERS, TANYA**
*License Type: NP*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: NP95004443*
*NPI: 1558710038*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ROGERS, TANYA**
*License Type: NP*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: NP95004443*
*NPI: 1558710038*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*License Type: NP*
*Provider ID: 289868*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: NP4668*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SAMPSON, ANDRIECE**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95026377*
*NPI: 1619594124*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**SAMPSON, ANDRIECE**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95026377*
*NPI: 1619594124*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP2390*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP2390*

*NPI: 1619370475*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP7022*

*NPI: 1225012842*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**

*License Type: NP*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: NP7022*

*NPI: 1225012842*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**

*License Type: NP*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: NP7022*

*NPI: 1225012842*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP7022*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM TU 8AM-8PM W-F 8AM-5PM SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*License Type: NP*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: NP7022*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM TU 8AM-8PM W-F 8AM-5PM SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*License Type: NP*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: NP7022*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*

*8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SAVILLE, EDITH**
*License Type: NP*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: NP7374*
*NPI: 1730567678*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**SAVILLE, EDITH**
*License Type: NP*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: NP7374*
*NPI: 1730567678*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**SCOTT, KELLY**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95015026*
*NPI: 1013420801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**SCOTT, KELLY**
*License Type: NP*
*Provider ID: 289869*
*Provider Gender: Female*
*License Number: NP95015026*
*NPI: 1013420801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP10906*
*NPI: 1295750339*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: RN486421*
*NPI: 1295750339*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP10906*
*NPI: 1295750339*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP10906*
*NPI: 1295750339*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: RN486421*
*NPI: 1295750339*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**

*License Type: NP*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**
*License Type: NP*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*

*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, KAYLA**
*License Type: NP*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**
*License Type: NP*
*Provider ID: 257948*
*Provider Gender: Female*
*License Number: NP95005999*
*NPI: 1316478092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**
*License Type: NP*
*Provider ID: 257948*
*Provider Gender: Female*
*License Number: NP95005999*
*NPI: 1316478092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TRAN, KELLY**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95003689*
*NPI: 1255799276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TRAN, KELLY**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95003689*
*NPI: 1255799276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TUEROS, VICTORIA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP2286*
*NPI: 1598989261*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**TUEROS, VICTORIA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP2286*
*NPI: 1598989261*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VEGA, TERESA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95001705*
*NPI: 1912304569*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VEGA, TERESA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95001705*
*NPI: 1912304569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VILLALOBOS, REBECA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95015780*
*NPI: 1184224396*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VILLALOBOS, REBECA**
*License Type: NP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NP95015780*
*NPI: 1184224396*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WEICKERT, MARIA**
*License Type: NP*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: NP95010814*
*NPI: 1841758984*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WEICKERT, MARIA**
*License Type: NP*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: NP95010814*
*NPI: 1841758984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: NP95013978*

*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*License Type: NP*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**WOLF, CELIA**

*License Type: NP*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: NP95001899*
*NPI: 1245635564*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WOLF, CELIA**
*License Type: NP*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: NP95001899*
*NPI: 1245635564*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BOSTON, LAURA**
*License Type: CRNM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NM792*
*NPI: 1174553259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BOSTON, LAURA**
*License Type: CRNM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NM792*
*NPI: 1174553259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GEPSHTEIN, YANA**
*License Type: CRNM*
*Provider ID: 25608*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: NM1662*
*NPI: 1396956512*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GEPSHTEIN, YANA**
*License Type: CRNM*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: NM1662*
*NPI: 1396956512*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**TOLMIE, SIMONE**
*License Type: CRNM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NM236263*
*NPI: 1104572007*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence Santa Rosa Memorial Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**TOLMIE, SIMONE**
*License Type: CRNM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: NM236263*
*NPI: 1104572007*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence Santa Rosa Memorial Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**CHIROPRACTOR**

**ASSADIAN, MEHRAK**

*License Type: DC*

*Provider ID: 217520*

*Provider Gender: Female*

*License Number: DC27523*

*NPI: 1295278281*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Turkish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

950 S EUCLID AVE
SAN DIEGO, CA 92114

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ASSADIAN, MEHRAK**

*License Type: DC*

*Provider ID: 217520*

*Provider Gender: Female*

*License Number: DC27523*

*NPI: 1295278281*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Turkish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

950 S EUCLID AVE
SAN DIEGO, CA 92114

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**CABALLERO, JAMES**

*License Type: DC*

*Provider ID: 25517*

*Provider Gender: Male*

*License Number: DC27726*

*NPI: 1093991549*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**CHIROPRACTOR**

**CABALLERO, JAMES**

*License Type: DC*

*Provider ID: 112894*

*Provider Gender: Male*

*License Number: DC27726*

*NPI: 1093991549*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**CABALLERO, JAMES**

*License Type: DC*

# C. Primary Care Directory

*Provider ID: 25517*
*Provider Gender: Male*
*License Number: DC27726*
*NPI: 1093991549*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CHIROPRACTOR**

**CABALLERO, JAMES**
*License Type: DC*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: DC27726*
*NPI: 1093991549*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**
*License Type: DC*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: DC15775*
*NPI: 1821463159*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**
*License Type: DC*
*Provider ID: 25517*
*Provider Gender: Male*
*License Number: DC15775*
*NPI: 1821463159*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

*Hours: M-F 8AM-4:30PM*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**

*License Type: DC*

*Provider ID: 112894*

*Provider Gender: Male*

*License Number: DC15775*

*NPI: 1821463159*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**

*License Type: DC*

*Provider ID: 25517*

*Provider Gender: Male*

*License Number: DC15775*

*NPI: 1821463159*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**CHIROPRACTOR**

**HALEY, STEVEN**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: DC25697*

*NPI: 1083764484*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 280-4213*

*After Hours Phone: (619) 280-4213*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HALEY, STEVEN**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: DC25697*

*NPI: 1083764484*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 280-4213*

*After Hours Phone: (619) 280-4213*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

# C. Primary Care Directory

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: DC29314*

*NPI: 1306916994*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 280-4213*

*After Hours Phone: (619) 280-4213*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**HOURIHAN, KEITH**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: DC29314*

*NPI: 1306916994*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 280-4213*

*After Hours Phone: (619) 280-4213*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**ILCHENA, ALESANDRA**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Female*

*License Number: DC32800*

*NPI: 1871046664*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 798-3947*

*After Hours Phone: (619) 798-3947*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**ILCHENA, ALESANDRA**

*License Type: DC*

*Provider ID: 46039*

*Provider Gender: Female*

*License Number: DC32800*

*NPI: 1871046664*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 798-3947*

*After Hours Phone: (619)*

*798-3947*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHIROPRACTOR**

**KAZEM, AHMAD**
*License Type: DC*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: DC33300*
*NPI: 1003296096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**KAZEM, AHMAD**
*License Type: DC*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: DC33300*
*NPI: 1003296096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**LOVERN, JENNIFER**
*License Type: DC*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: DC29074*
*NPI: 1235469396*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**LOVERN, JENNIFER**
*License Type: DC*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: DC29074*
*NPI: 1235469396*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Italian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**OLSEN, MARTIN**
*License Type: DC*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: DC20729*
*NPI: 1730247990*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**OLSEN, MARTIN**
*License Type: DC*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: DC20729*
*NPI: 1730247990*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ROJAS, RICHARD**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC31024*
*NPI: 1538318811*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**CHIROPRACTOR**

**ROJAS, RICHARD**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC31024*
*NPI: 1538318811*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619)*

*515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**SOSA, DAVID**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC33150*
*NPI: 1013308675*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**CHIROPRACTOR**

**TAGHIZADEH, MAJID**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC30121*
*NPI: 1750590600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**TAGHIZADEH, MAJID**
*License Type: DC*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: DC30121*
*NPI: 1750590600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**TAGHIZADEH, MAJID**
*License Type: DC*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: DC30121*
*NPI: 1750590600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**TAGHIZADEH, MAJID**
*License Type: DC*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: DC30121*
*NPI: 1750590600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**TRUONG, VENNES**

*License Type: DC*

*Provider ID: 25517*

*Provider Gender: Female*

*License Number: DC34907*

*NPI: 1053919928*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**CHIROPRACTOR**

**TRUONG, VENNES**

*License Type: DC*

*Provider ID: 25517*

*Provider Gender: Female*

*License Number: DC34907*

*NPI: 1053919928*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**CLINIC OUTPATIENT**

**OPERATION SAMAHAN RANCHO PENASQUITOS,**

*Provider ID: 112894*

*NPI: 1699216622*

*Provider English Spoken: Y*

*Cultural Competency: N*

*OPERATION SAMAHAN*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**CLINIC OUTPATIENT**

**OPERATION SAMAHAN RANCHO PENASQUITOS,**

*Provider ID: 112894*

*NPI: 1699216622*

*Provider English Spoken: Y*

*Cultural Competency: N*

*OPERATION SAMAHAN*

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

*Phone: (844) 200-2426*

*Fax: (858) 695-9074*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**DERMATOLOGY**

**BURROWS, WILLIAM**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G16236*
*NPI: 1639199292*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DERMATOLOGY**

**BURROWS, WILLIAM**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G16236*
*NPI: 1639199292*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DERMATOLOGY**

**CARTER, NATASHA**

*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A140912*
*NPI: 1033539184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DERMATOLOGY**

**CARTER, NATASHA**

*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A140912*
*NPI: 1033539184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**AHMAD, AAKIF**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A12732*
*NPI: 1720308331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**AHMAD, AAKIF**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A12732*
*NPI: 1720308331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CHANG, AMY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A93385*
*NPI: 1750568911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CHANG, AMY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*

*License Number: A93385*
*NPI: 1750568911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**HOSEIN, NADEEN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A113255*
*NPI: 1912051715*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**HOSEIN, NADEEN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A113255*
*NPI: 1912051715*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**ISLAM, JULIE**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A149552*
*NPI: 1750780516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY**

# C. Primary Care Directory

**METABOLISM DIABETES**

**ISLAM, JULIE**

*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A149552*
*NPI: 1750780516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**LEVINE, MATTHEW**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A77126*
*NPI: 1801994231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**LEVINE, MATTHEW**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A77126*
*NPI: 1801994231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**LORENZO, PATRICIA**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A129599*
*NPI: 1487913315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**LORENZO, PATRICIA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A129599*
*NPI: 1487913315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**MCCALLUM, JAMES**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A55708*
*NPI: 1609838994*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-6PM*
*TH 8:30AM-6PM*
*F 8:30AM-5PM*
*SA 8:30AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**MCCALLUM, JAMES**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A55708*
*NPI: 1609838994*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-6PM*

*TH 8:30AM-6PM*
*F 8:30AM-5PM*
*SA 8:30AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A146838*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A146838*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**PHILIS-TSIMIKAS, ATHENA**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A50477*
*NPI: 1922105964*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Modern Greek*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**PHILIS-TSIMIKAS, ATHENA**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A50477*
*NPI: 1922105964*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Modern Greek*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**ABDALLAH, ALI**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: 20A15471*
*NPI: 1649699968*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ABDALLAH, ALI**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: 20A15471*
*NPI: 1649699968*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: A157505*
*NPI: 1588197826*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**

*License Type: MD*

*Provider ID: 37723*

*Provider Gender: Male*

*License Number: A157505*

*NPI: 1588197826*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**BACHARACH, REBECCA**

*License Type: DO*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: 20A15459*

*NPI: 1225442643*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**BACHARACH, REBECCA**

*License Type: DO*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: 20A15459*

*NPI: 1225442643*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**

*License Type: MD*

*Provider ID: 100648*

*Provider Gender: Female*

*License Number: A173486*

*NPI: 1588141865*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Pashto*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4874 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 515-2426*

*After Hours Phone: (619) 515-2426*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A173486*
*NPI: 1588141865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A173486*
*NPI: 1588141865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**
*License Type: MD*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: A173486*
*NPI: 1588141865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A173486*
*NPI: 1588141865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAHRAMZI, MARIA**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A173486*
*NPI: 1588141865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAIN, NATALIE**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A183464*
*NPI: 1821677584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAIN, NATALIE**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A183464*
*NPI: 1821677584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BAUTISTA, LUIS**

*License Type: MD*
*Provider Gender: Male*
*License Number: A97270*
*NPI: 1295712206*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**FAMILY PRACTICE**

**BAUTISTA, LUIS**

*License Type: MD*
*Provider Gender: Male*
*License Number: A97270*
*NPI: 1295712206*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BISHOP, MELISSA**

*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: C137521*
*NPI: 1578667077*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**BISHOP, MELISSA**

*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: C137521*
*NPI: 1578667077*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**BODIFORD, SAMANTHA**

*License Type: MD*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: A165398*
*NPI: 1730684200*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ibclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M 8:30AM-5PM*
*TU-TH 8:30AM-8PM*
*F 8:30AM-5PM*

**FAMILY PRACTICE**

**BODIFORD, SAMANTHA**
*License Type: MD*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: A165398*
*NPI: 1730684200*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ibclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5PM*
*TU-TH 8:30AM-8PM*
*F 8:30AM-5PM*

**FAMILY PRACTICE**

**BRADY, PATRICIA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: C53121*
*NPI: 1952390437*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM*
*TH 8:30AM-9PM*
*F 8:30AM-5PM*

**FAMILY PRACTICE**

**BRADY, PATRICIA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: C53121*
*NPI: 1952390437*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM*
*TH 8:30AM-9PM*
*F 8:30AM-5PM*

**FAMILY PRACTICE**

**BRODSKY, MARK**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: C53623*
*NPI: 1346337904*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BRODSKY, MARK**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: C53623*
*NPI: 1346337904*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A20786*
*NPI: 1376171520*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A20786*
*NPI: 1376171520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A20786*
*NPI: 1376171520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A20786*
*NPI: 1376171520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**CAMPBELL, BRIANNA**
*License Type: MD*
*Provider ID: 217520*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: A157488*
*NPI: 1316479892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4194*
*After Hours Phone: (619) 662-4194*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CAMPBELL, BRIANNA**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A157488*
*NPI: 1316479892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4194*
*After Hours Phone: (619) 662-4194*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*

# C. Primary Care Directory

*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619)*

*515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHOU, BILL**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: 20A14794*
*NPI: 1730448101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHUN, HYUN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A163978*
*NPI: 1083118988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CHUN, HYUN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A163978*
*NPI: 1083118988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORMAN, DANIEL**
*License Type: DO*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: 20A13060*
*NPI: 1629339593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORMAN, DANIEL**

*License Type: DO*

*Provider ID: 25608*

*Provider Gender: Male*

*License Number: 20A13060*

*NPI: 1629339593*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DAPPEN, AMANDA**

*License Type: MD*

*Provider ID: 37723*

*Provider Gender: Female*

*License Number: A153414*

*NPI: 1689037111*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**DAPPEN, AMANDA**

*License Type: MD*

*Provider ID: 37723*

*Provider Gender: Female*

*License Number: A153414*

*NPI: 1689037111*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**DAVIS, DEIRDRE**

*License Type: MD*

*Provider ID: 217520*

*Provider Gender: Female*

*License Number: A165432*

*NPI: 1265921365*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

950 S EUCLID AVE
SAN DIEGO, CA 92114

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**DAVIS, DEIRDRE**

# C. Primary Care Directory

*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A165432*
*NPI: 1265921365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**FAMILY PRACTICE**

**FAMBRO, CYNTHIA**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A153223*
*NPI: 1710331707*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**FAMBRO, CYNTHIA**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A153223*
*NPI: 1710331707*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**FLORES, JOE**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A171135*
*NPI: 1033647409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**FLORES, JOE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A171135*

*NPI: 1033647409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**FAMILY PRACTICE**

**FLORES, JOE**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A171135*
*NPI: 1033647409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**FLORES, JOE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A171135*
*NPI: 1033647409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**FAMILY PRACTICE**

**GIRGIS, CHERIF**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Male*
*License Number: A105162*
*NPI: 1023237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

**GIRGIS, CHERIF**
*License Type: MD*

*Provider ID: 312590*
*Provider Gender: Male*
*NPI: 1023237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 536-8034*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**FAMILY PRACTICE**

**GIRGIS, CHERIF**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Male*
*License Number: A105162*
*NPI: 1023237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

**GLEASON-ROHRER, GWEN**
*License Type: MD*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: A112176*
*NPI: 1710140462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GLEASON-ROHRER, GWEN**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: A112176*
*NPI: 1710140462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE

150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GLEASON-ROHRER, GWEN**
*License Type: MD*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: A112176*
*NPI: 1710140462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GLEASON-ROHRER, GWEN**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: A112176*
*NPI: 1710140462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**GRIFFITHS, KENNETH**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: C52451*
*NPI: 1760563068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**GRIFFITHS, KENNETH**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: C52451*
*NPI: 1760563068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**GUTIERREZ, TANIA**
*License Type: DO*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: 20A19345*
*NPI: 1285196311*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**GUTIERREZ, TANIA**
*License Type: DO*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: 20A19345*
*NPI: 1285196311*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: 20A14772*
*NPI: 1235576059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**HENDRIX, JEFFERSON**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A32571*
*NPI: 1235142738*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HENDRIX, JEFFERSON**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A32571*
*NPI: 1235142738*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**JAINCHILL, AMANDA**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A141541*
*NPI: 1720426901*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

**JAINCHILL, AMANDA**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A141541*
*NPI: 1720426901*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*

*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFMAN, JENNIFER**
*License Type: MD*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: G149974*
*NPI: 1407818768*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**KAUFMAN, JENNIFER**
*License Type: MD*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: G149974*
*NPI: 1407818768*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**KEFLEZIGHI, BAHGHI**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A100391*
*NPI: 1124210844*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*Fax: (619) 263-2499*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KEFLEZIGHI, BAHGHI**

*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A100391*
*NPI: 1124210844*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*Fax: (619) 263-2499*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KIDDER, BRENDAN**

*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: A112379*
*NPI: 1275793929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KIDDER, BRENDAN**

*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: A112379*
*NPI: 1275793929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A177922*
*NPI: 1679137780*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LACH, REBECCA**

*License Type: MD*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LACH, REBECCA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A177922*
*NPI: 1679137780*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEE, SANDRINE**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: 20A15068*
*NPI: 1073909651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEE, SANDRINE**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: 20A15068*
*NPI: 1073909651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEE, SANDRINE**
*License Type: DO*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: 20A15068*
*NPI: 1073909651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**FAMILY PRACTICE**

**LEE, SANDRINE**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A15068*

*NPI: 1073909651*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LINDEMAN, KURTIS**

*License Type: MD*

*Provider ID: 289863*

*Provider Gender: Male*

*License Number: A104052*

*NPI: 1124155791*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LINDEMAN, KURTIS**

*License Type: MD*

*Provider ID: 289863*

*Provider Gender: Male*

*License Number: A104052*

*NPI: 1124155791*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LOUGH, MICHELLE**

*License Type: MD*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: A165872*

*NPI: 1053816496*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

*Phone: (619) 515-2560*

*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LOUGH, MICHELLE**

*License Type: MD*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: A165872*

*NPI: 1053816496*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

*Phone: (619) 515-2560*

*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LU, JULIE**

*License Type: DO*

*Provider ID: 103499*

*Provider Gender: Female*

*License Number: 20A14804*

*NPI: 1619210614*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

*Phone: (619) 515-2454*

*After Hours Phone: (619) 515-2454*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**LU, JULIE**

*License Type: DO*

*Provider ID: 103499*

*Provider Gender: Female*

*License Number: 20A14804*

*NPI: 1619210614*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

*Phone: (619) 515-2454*

*After Hours Phone: (619) 515-2454*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A161682*

*NPI: 1841726148*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A161682*
*NPI: 1841726148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*License Type: DO*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: 20A12402*
*NPI: 1417205055*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

# C. Primary Care Directory

**MATICH, BRANKO**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**MATICH, BRANKO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MATICH, BRANKO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MATICH, BRANKO**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**MATICH, BRANKO**

*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MATICH, BRANKO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C174985*
*NPI: 1023437704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MCLAUGHLIN, ERIK**
*License Type: MD*
*Provider ID: 289869*
*Provider Gender: Male*
*License Number: C176574*
*NPI: 1861637217*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**FAMILY PRACTICE**

**MCLAUGHLIN, ERIK**
*License Type: MD*
*Provider ID: 289869*
*Provider Gender: Male*
*License Number: C176574*
*NPI: 1861637217*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**FAMILY PRACTICE**

**MELGAR, MONICA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A154399*

*NPI: 1629432174*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MELGAR, MONICA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A154399*
*NPI: 1629432174*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MORALES, ALEJANDRA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A162332*
*NPI: 1063945657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MORALES, ALEJANDRA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A162332*
*NPI: 1063945657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, NGOC**
*License Type: MD*
*Provider ID: 257948*
*Provider Gender: Male*
*License Number: A74094*
*NPI: 1184668105*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, NGOC**
*License Type: MD*
*Provider ID: 257948*
*Provider Gender: Male*
*License Number: A74094*
*NPI: 1184668105*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**FAMILY PRACTICE**

**NGUYEN-CLEARY, THAI**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A86079*
*NPI: 1467442624*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**NGUYEN-CLEARY, THAI**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A86079*
*NPI: 1467442624*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**NIAZI, HARRIS**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A146111*
*NPI: 1174905871*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NIAZI, HARRIS**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A146111*
*NPI: 1174905871*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NORRIS, JEFFREY**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A136275*
*NPI: 1073870374*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NORRIS, JEFFREY**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A136275*
*NPI: 1073870374*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NUQUI, JOSIE**
*License Type: MD*
*Provider ID: 203755*
*Provider Gender: Female*
*License Number: A71544*
*NPI: 1184773673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM SA 8:30AM-5PM*

**FAMILY PRACTICE**

**NUQUI, JOSIE**
*License Type: MD*
*Provider ID: 203755*
*Provider Gender: Female*
*License Number: A71544*
*NPI: 1184773673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM SA 8:30AM-5PM*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**
*License Type: MD*
*Provider Gender: Male*
*License Number: A156607*
*NPI: 1356761571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**
*License Type: MD*
*Provider Gender: Male*
*License Number: A156607*
*NPI: 1356761571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**PEREZ, PERLITA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A119689*
*NPI: 1174810972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PEREZ, PERLITA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A119689*
*NPI: 1174810972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**POSADA, SEAN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A180171*
*NPI: 1295100691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**POSADA, SEAN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A180171*
*NPI: 1295100691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PROPST, TOBE**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A82123*
*NPI: 1194814277*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PROPST, TOBE**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A82123*
*NPI: 1194814277*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**FAMILY PRACTICE**

**RAGUVEER, VISHAKA**

*License Type: MD*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: A172736*
*NPI: 1740609387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (916) 419-7292*
*After Hours Phone: (916) 419-7292*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**RAGUVEER, VISHAKA**

*License Type: MD*
*Provider ID: 297039*
*Provider Gender: Female*
*NPI: 1740609387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9995 CARMEL MOUNTAIN RD STE 10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 240-6470*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**RAGUVEER, VISHAKA**

*License Type: MD*
*Provider ID: 112894*
*Provider Gender: Female*
*License Number: A172736*
*NPI: 1740609387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (916) 419-7292*
*After Hours Phone: (916) 419-7292*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**RIDGE, NEAL**

*License Type: DO*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: 20A6920*
*NPI: 1053381004*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RIDGE, NEAL**

*License Type: DO*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: 20A6920*
*NPI: 1053381004*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RITTER, STEVEN**
*License Type: DO*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: 20A7435*
*NPI: 1356556021*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RODRIGUEZ, SEAN**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: A120576*
*NPI: 1780909903*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**RODRIGUEZ, SEAN**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: A120576*
*NPI: 1780909903*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ROSADO, IVAN**
*License Type: MD*
*Provider Gender: Male*
*License Number: A169434*
*NPI: 1316479603*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROSADO, IVAN**
*License Type: MD*
*Provider Gender: Male*
*License Number: A169434*
*NPI: 1316479603*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROSENBAUM, HERBERT**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A169694*
*NPI: 1922532712*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ROSENBAUM, HERBERT**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A169694*
*NPI: 1922532712*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**

*License Type: DO*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: 20A6433*

*NPI: 1184616872*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*Fax: (619) 284-4731*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM SA 8AM-2PM*

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**

*License Type: DO*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: 20A6433*

*NPI: 1184616872*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*Fax: (619) 284-4731*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM SA 8AM-2PM*

**FAMILY PRACTICE**

**SCOTT, RYLEE**

*License Type: MD*

*Provider ID: 25608*

*Provider Gender: Male*

*License Number: A162946*

*NPI: 1457887911*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCOTT, RYLEE**

*License Type: MD*

*Provider ID: 25608*

*Provider Gender: Male*

*License Number: A162946*

*NPI: 1457887911*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHEIKH, ZARA**

*License Type: MD*

*Provider ID: 289882*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4290 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 563-0250*

*After Hours Phone: (619) 563-0250*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FAMILY PRACTICE**

**SHEIKH, ZARA**

*License Type: MD*

*Provider ID: 289881*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2058*

*After Hours Phone: (619) 280-2058*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\22*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FAMILY PRACTICE**

**SHEIKH, ZARA**

*License Type: MD*

*Provider ID: 289881*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2058*

*After Hours Phone: (619) 280-2058*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\22*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FAMILY PRACTICE**

**SHEIKH, ZARA**

*License Type: MD*

*Provider ID: 289882*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Urdu*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4290 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 563-0250*

*After Hours Phone: (619) 563-0250*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FAMILY PRACTICE**

**SHIRAKI, JEAN**
*License Type: DO*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: 20A17577*
*NPI: 1144684382*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHIRAKI, JEAN**
*License Type: DO*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: 20A17577*
*NPI: 1144684382*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHUMILAK, KAILI**
*License Type: DO*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: 20A12796*
*NPI: 1831489855*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHUMILAK, KAILI**
*License Type: DO*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: 20A12796*
*NPI: 1831489855*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SMOOT, CHARLES**
*License Type: MD*
*Provider ID: 35571*
*Provider Gender: Male*
*License Number: A97036*
*NPI: 1245490358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SMOOT, CHARLES**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A97036*
*NPI: 1245490358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**SMOOT, CHARLES**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A97036*
*NPI: 1245490358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**SMOOT, CHARLES**
*License Type: MD*
*Provider ID: 35571*
*Provider Gender: Male*
*License Number: A97036*
*NPI: 1245490358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNYDER, CHRISTOPHER**

*License Type: DO*

*Provider ID: 257948*

*Provider Gender: Male*

*License Number: 20A7502*

*NPI: 1922041235*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNYDER, CHRISTOPHER**

*License Type: DO*

*Provider ID: 257948*

*Provider Gender: Male*

*License Number: 20A7502*

*NPI: 1922041235*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SOPHY, ELIZABETH**

*License Type: MD*

*Provider ID: 289863*

*Provider Gender: Female*

*License Number: A157547*

*NPI: 1013441203*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**SOPHY, ELIZABETH**

*License Type: MD*

*Provider ID: 289863*

# C. Primary Care Directory

*Provider Gender: Female*
*License Number: A157547*
*NPI: 1013441203*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- *Phone: (619) 233-8500*
- *After Hours Phone: (619) 233-8500*
- *Website: N/A*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**SUMMERS-DAY, COURTNEY**
*License Type: MD*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: A112781*
*NPI: 1124288873*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD
SAN DIEGO, CA 92154
- *Phone: (619) 429-3733*
- *After Hours Phone: (619) 429-3733*
- *Website: www.ibclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SUMMERS-DAY, COURTNEY**
*License Type: MD*
*Provider ID: 289856*
*Provider Gender: Female*
*License Number: A112781*
*NPI: 1124288873*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD
SAN DIEGO, CA 92154
- *Phone: (619) 429-3733*
- *After Hours Phone: (619) 429-3733*
- *Website: www.ibclinic.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SWARTZ, JOHN**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: G72486*
*NPI: 1396754131*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SWARTZ, JOHN**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: G72486*
*NPI: 1396754131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**THAI, JUSTIN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A177462*
*NPI: 1093276198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**THAI, JUSTIN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A177462*
*NPI: 1093276198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**THAI, JUSTIN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A177462*
*NPI: 1093276198*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**THAI, JUSTIN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A177462*
*NPI: 1093276198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**THOMAS, ZACHARY**
*License Type: MD*
*Provider ID: 100648*
*Provider Gender: Male*
*License Number: A145023*
*NPI: 1326453119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**THOMAS, ZACHARY**
*License Type: MD*
*Provider ID: 100648*
*Provider Gender: Male*
*License Number: A145023*
*NPI: 1326453119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRAN, UYEN-THAO**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A76709*
*NPI: 1891720355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 795-2756*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRAN, UYEN-THAO**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A76709*
*NPI: 1891720355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 795-2756*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRAN, TONNIA**
*License Type: DO*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: 20A7662*
*NPI: 1982746657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRAN, TONNIA**
*License Type: DO*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: 20A7662*
*NPI: 1982746657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRUONG, NHA**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*

*License Number: 20A17836*
*NPI: 1760975833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TRUONG, NHA**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: 20A17836*
*NPI: 1760975833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TSUCHIYA, KIMIKO**
*License Type: DO*
*Provider ID: 71153*
*Provider Gender: Female*
*License Number: 20A19610*
*NPI: 1629637285*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
*Phone: (619) 515-2430*
*After Hours Phone: (619) 515-2430*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**TSUCHIYA, KIMIKO**
*License Type: DO*
*Provider ID: 71153*
*Provider Gender: Female*
*License Number: 20A19610*
*NPI: 1629637285*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
*Phone: (619) 515-2430*
*After Hours Phone: (619) 515-2430*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**VALENZUELA, TRICIA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A161373*
*NPI: 1346776358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

# C. Primary Care Directory

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VALENZUELA, TRICIA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A161373*
*NPI: 1346776358*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WANG, REGINA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A109828*
*NPI: 1154554871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**WANG, REGINA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A109828*
*NPI: 1154554871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**FAMILY PRACTICE**

**WHITE, KATHERINE**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A120447*

# C. Primary Care Directory

*NPI: 1801112925*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WHITE, KATHERINE**

*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: A120447*
*NPI: 1801112925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WU, JENNIFER**

*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A54702*
*NPI: 1215953013*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**WU, JENNIFER**

*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A54702*
*NPI: 1215953013*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**ZAHLER, MARVIN**

*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: 20A11612*
*NPI: 1134380710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ZAHLER, MARVIN**

*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: 20A11612*
*NPI: 1134380710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ZINK, IRENE**

*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: C54198*
*NPI: 1215959549*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**ZINK, IRENE**

*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: C54198*
*NPI: 1215959549*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,**
*Provider ID: 78906*
*NPI: 1982747671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*Fax: (619) 263-2499*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,**
*Provider ID: 78906*
*NPI: 1982747671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*Fax: (619) 263-2499*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**DOWNTOWN FAMILY CTR AT CONNECTIONS,**
*Provider ID: 71153*
*NPI: 1588901045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
*Phone: (619) 515-2430*
*Fax: (619) 578-2410*
*After Hours Phone: (619) 515-2430*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**DOWNTOWN FAMILY CTR AT CONNECTIONS,**
*Provider ID: 71153*
*NPI: 1588901045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
*Phone: (619) 515-2430*
*Fax: (619) 578-2410*
*After Hours Phone: (619) 515-2430*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HEALTH CTR IBARRA,**
*Provider ID: 100648*
*NPI: 1477953933*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*Fax: (619) 255-8002*
*After Hours Phone: (619) 515-2426*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HEALTH CTR IBARRA,**
*Provider ID: 100648*
*NPI: 1477953933*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*Fax: (619) 255-8002*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HEALTH CTR OF SD-ELM ST,**
*Provider ID: 57714*
*NPI: 1316419070*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
140 ELM ST
SAN DIEGO, CA 92101
*Phone: (619) 515-2520*
*Fax: (619) 231-0431*
*After Hours Phone: (619) 515-2520*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HEALTH CTR OF SD-ELM ST,**
*Provider ID: 57714*
*NPI: 1316419070*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
140 ELM ST
SAN DIEGO, CA 92101
*Phone: (619) 515-2520*
*Fax: (619) 231-0431*
*After Hours Phone: (619) 515-2520*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**
*Provider ID: 304989*
*NPI: 1336525906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2114 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2406*
*After Hours Phone: (619) 515-2406*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**
*Provider ID: 103499*
*NPI: 1336525906*

*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*Fax: (619) 794-2696*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**
*Provider ID: 304989*
*NPI: 1336525906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2114 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2406*
*After Hours Phone: (619) 515-2406*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**
*Provider ID: 103499*
*NPI: 1336525906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*Fax: (619) 794-2696*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,**
*Provider ID: 97440*
*NPI: 1235521782*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,**
*Provider ID: 97440*
*NPI: 1235521782*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,**

*Provider ID: 87122*

*NPI: 1356750376*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

*Phone: (619) 515-2525*

*Fax: (619) 501-5814*

*After Hours Phone: (619) 515-2525*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,**

*Provider ID: 87122*

*NPI: 1356750376*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

*Phone: (619) 515-2525*

*Fax: (619) 501-5814*

*After Hours Phone: (619) 515-2525*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA,**

*Provider ID: 25608*

*NPI: 1386689701*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*Fax: (858) 488-1394*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA,**

*Provider ID: 25608*

*NPI: 1386689701*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*Fax: (858) 488-1394*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR SD**

**HILLCREST,**
*Provider ID: 100421*
*NPI: 1629456900*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FQHC**

**FAMILY HLTH CTR SD HILLCREST,**
*Provider ID: 100421*
*NPI: 1629456900*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FQHC**

**KING CHAVEZ HEALTH CENTER,**
*Provider ID: 217520*
*NPI: 1538262092*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FQHC**

**KING CHAVEZ HEALTH CENTER,**
*Provider ID: 217520*
*NPI: 1538262092*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FQHC**

**LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT,**
*Provider ID: 315861*
*NPI: 1609849074*
*Provider English Spoken: Y*
*Cultural Competency: N*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*Fax: (619) 510-4649*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**FQHC**

**LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT,**

*Provider ID: 315861*

*NPI: 1609849074*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 312-0347*

*Fax: (619) 510-4649*

*After Hours Phone: (619) 312-0347*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**

*Provider ID: 46039*

*NPI: 1336353721*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*Fax: (619) 795-9849*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**

*Provider ID: 46039*

*NPI: 1336353721*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*Fax: (619) 795-9849*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**LINDA VISTA HEALTH CARE CTR,**

*Provider ID: 289868*

*NPI: 1609905215*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LINDA VISTA HEALTH CARE CTR,**

*Provider ID: 289868*

*NPI: 1780665877*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LINDA VISTA HEALTH CARE CTR,**
*Provider ID: 289868*
*NPI: 1609905215*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LINDA VISTA HEALTH CARE CTR,**
*Provider ID: 289868*
*NPI: 1780665877*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**
*Provider ID: 298139*
*NPI: 1447281936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*Fax: (619) 232-7011*
*After Hours Phone: (619) 515-2355*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**
*Provider ID: 25731*
*NPI: 1447281936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 234-2447*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**

*Provider ID: 298139*
*NPI: 1447281936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*Fax: (619) 232-7011*
*After Hours Phone: (619) 515-2355*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**
*Provider ID: 25731*
*NPI: 1447281936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 234-2447*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**
*Provider ID: 289882*
*NPI: 1962483040*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**
*Provider ID: 289881*
*NPI: 1962483040*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**
*Provider ID: 289882*
*NPI: 1962483040*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**

*Provider ID: 289881*

*NPI: 1962483040*

*Provider English Spoken: Y Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2058*

*Fax: (858) 633-4682*

*After Hours Phone: (619) 280-2058*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\22*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**NESTOR COMMUNITY HEALTH CENTER,**

*Provider ID: 289856*

*NPI: 1215246996*

*Provider English Spoken: Y Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD
SAN DIEGO, CA 92154

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Website: www.ibclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM*

**FQHC**

**NESTOR COMMUNITY HEALTH CENTER,**

*Provider ID: 289856*

*NPI: 1215246996*

*Provider English Spoken: Y Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD
SAN DIEGO, CA 92154

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Website: www.ibclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM*

**FQHC**

**NORTH PARK FAMILY HEALTH CENTERS,**

*Provider ID: 25732*

*NPI: 1184169963*

*Provider English Spoken: Y Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*Fax: (619) 501-0627*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FQHC**

**NORTH PARK FAMILY HEALTH CENTERS,**

*Provider ID: 39198*

*NPI: 1700821303*

*Provider English Spoken: Y Cultural Competency: N*

# C. Primary Care Directory

*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 683-7586*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**FQHC**

**NORTH PARK FAMILY HEALTH CENTERS,**
*Provider ID: 25732*
*NPI: 1700821303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 501-0627*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**NORTH PARK FAMILY HEALTH CENTERS,**
*Provider ID: 39198*
*NPI: 1700821303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 683-7586*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**FQHC**

**NORTH PARK FAMILY HEALTH CENTERS,**
*Provider ID: 25732*
*NPI: 1184169963*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*Fax: (619) 501-0627*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

# C. Primary Care Directory

**OPERATION SAMAHAN - MIRA MESA,**
*Provider ID: 203755*
*NPI: 1861933897*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*Fax: (858) 536-8034*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**OPERATION SAMAHAN - MIRA MESA,**
*Provider ID: 25517*
*NPI: 1871680397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**OPERATION SAMAHAN - MIRA MESA,**
*Provider ID: 203755*
*NPI: 1861933897*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*Fax: (858) 536-8034*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**OPERATION SAMAHAN - MIRA MESA,**
*Provider ID: 25517*
*NPI: 1871680397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**FQHC**

**OPERATION SAMAHAN RANCHO PENASQUITOS,**
*Provider ID: 112894*
*NPI: 1699216622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 695-9074*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**FQHC**

**OPERATION SAMAHAN RANCHO PENASQUITOS,**
*Provider ID: 112894*
*NPI: 1699216622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 695-9074*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**FQHC**

**SAN DIEGO AMERICAN INDIAN HEALTH CENTER,**
*Provider ID: 289869*
*NPI: 1003902917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**FQHC**

**SAN DIEGO AMERICAN INDIAN HEALTH CENTER,**
*Provider ID: 289869*
*NPI: 1003902917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**FQHC**

**SAN DIEGO FAMILY CARE,**
*Provider ID: 289872*
*NPI: 1457724858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**FQHC**

**SAN DIEGO FAMILY CARE,**
*Provider ID: 289872*
*NPI: 1457724858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**FQHC**

**SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,**
*NPI: 1598308926*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*Fax: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,**
*NPI: 1598308926*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 238-5551*
*Fax: (619) 238-5551*
*After Hours Phone: (619) 238-5551*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH CHC - OCEAN VIEW,**
*Provider ID: 37723*
*NPI: 1326225632*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 232-5922*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH CHC - OCEAN VIEW,**
*Provider ID: 37723*
*NPI: 1326225632*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 232-5922*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

# C. Primary Care Directory

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,**

*Provider ID: 257948*

*NPI: 1205477841*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 662-4100*

*Fax: (619) 824-9076*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,**

*Provider ID: 257948*

*NPI: 1205477841*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 662-4100*

*Fax: (619) 824-9076*

*After Hours Phone: (619) 662-4100*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH PRECISION PARK,**

*Provider ID: 307044*

*NPI: 1124782685*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

*Phone: (619) 662-4100*

*Fax: (619) 600-4870*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH PRECISION PARK,**

*Provider ID: 307044*

*NPI: 1124782685*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

*Phone: (619) 662-4100*

*Fax: (619) 600-4870*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**FQHC**

**SHERMAN HEIGHTS FAMILY HLTH CTRS INC,**

*Provider ID: 35571*

*NPI: 1174549232*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

2391 ISLAND AVE
SAN DIEGO, CA 92102

*Phone: (619) 515-2435*

*Fax: (619) 515-2435*

*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**SHERMAN HEIGHTS FAMILY HLTH CTRS INC,**
*Provider ID: 35571*
*NPI: 1174549232*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*Fax: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,**
*Provider ID: 289863*
*NPI: 1659415131*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**FQHC**

**ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,**
*Provider ID: 289863*
*NPI: 1659415131*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**GASTROENTEROLOGY**

**HAI, FAIZI**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A159324*
*NPI: 1639523228*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**GASTROENTEROLOGY**

# C. Primary Care Directory

**HAI, FAIZI**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A159324*
*NPI: 1639523228*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**GASTROENTEROLOGY**

**OLIVER, DEANNA**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A139921*
*NPI: 1750725362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, ST AGNES MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, ADVENTIST MEDICAL CENTER, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**GASTROENTEROLOGY**

**OLIVER, DEANNA**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A139921*
*NPI: 1750725362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, ST AGNES MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, ADVENTIST MEDICAL CENTER, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**GASTROENTEROLOGY**

# C. Primary Care Directory

**STIPHO, SALLY**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A104647*
*NPI: 1467642215*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

## GASTROENTEROLOGY

**STIPHO, SALLY**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A104647*
*NPI: 1467642215*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

## GENERAL PRACTICE

**DOAN STEPHENS, CRYSTAL**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: A152267*
*NPI: 1730570144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## GENERAL PRACTICE

**DOAN STEPHENS, CRYSTAL**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Female*
*License Number: A152267*
*NPI: 1730570144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*

# C. Primary Care Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HEPATOLOGY**

**GISH, ROBERT**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Male*
*License Number: G45632*
*NPI: 1548281322*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**HEPATOLOGY**

**HASSANEIN, TAREK**

*License Type: MD*

*Provider ID: 25517*

*Provider Gender: Male*

*License Number: A54452*

*NPI: 1801854450*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, CHILDRENS HOSPITAL AT MISSION, SHARP MEMORIAL HOSPITAL, Sharp Coronado Hospital Dept of Radiology, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR, ORANGE COAST MEM MED CTR, JOHN C FREMONT HOSPITAL, SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**HEPATOLOGY**

**HASSANEIN, TAREK**

*License Type: MD*

*Provider ID: 25517*

*Provider Gender: Male*

*License Number: A54452*

*NPI: 1801854450*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, CHILDRENS HOSPITAL AT MISSION, SHARP MEMORIAL HOSPITAL, Sharp Coronado Hospital Dept of Radiology, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR, ORANGE COAST MEM MED CTR, JOHN C FREMONT HOSPITAL, SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4:30PM*

**INTERNAL MEDICINE**

**ALASSIL, SALLY**

*License Type: MD*

*Provider ID: 97440*

*Provider Gender: Female*

*License Number: A122238*

*NPI: 1982044483*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113

*Phone: (619) 515-2422*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALASSIL, SALLY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A122238*
*NPI: 1982044483*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALASSIL, SALLY**
*License Type: MD*
*Provider ID: 97440*
*Provider Gender: Female*
*License Number: A122238*
*NPI: 1982044483*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALASSIL, SALLY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A122238*
*NPI: 1982044483*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALDOUS, JEANNETTE**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A101017*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114

*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALDOUS, JEANNETTE**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: A101017*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ARGOUD, GEORGES**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Male*
*License Number: G61898*
*NPI: 1144303538*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ARGOUD, GEORGES**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Male*
*License Number: G61898*
*NPI: 1144303538*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A19248*

*NPI: 1124521901*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A19248*

*NPI: 1124521901*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A19248*

*NPI: 1124521901*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A19248*

*NPI: 1124521901*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**

*License Type: DO*

*Provider ID: 25732*

*Provider Gender: Female*

*License Number: 20A19248*

*NPI: 1124521901*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**INTERNAL MEDICINE**

**BRIONES-COLMAN, FELICIA**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: A80153*

*NPI: 1962517367*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**BRIONES-COLMAN, FELICIA**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Female*

*License Number: A80153*

*NPI: 1962517367*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHAN, ANDY**

*License Type: DO*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: 20A20352*

*NPI: 1104480912*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHAN, ANDY**

*License Type: DO*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: 20A20352*

*NPI: 1104480912*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHANDRADAS, SAJIV**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A122474*
*NPI: 1720350465*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHANDRADAS, SAJIV**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A122474*
*NPI: 1720350465*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHEN, JAMES**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A86644*
*NPI: 1265495691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CHEN, JAMES**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A86644*
*NPI: 1265495691*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CSAPOCZI, PETER**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: A96919*
*NPI: 1841357118*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**INTERNAL MEDICINE**

**CSAPOCZI, PETER**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: A96919*
*NPI: 1841357118*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*

**INTERNAL MEDICINE**

**CUMMINS, ANDREW**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A102764*
*NPI: 1699917096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**INTERNAL MEDICINE**

**CUMMINS, ANDREW**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A102764*
*NPI: 1699917096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DAHMS, ERIC**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G80316*
*NPI: 1306808464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DAHMS, ERIC**

*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G80316*
*NPI: 1306808464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DIEP, KEVIN**

*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: 20A17657*
*NPI: 1083117865*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF*

*SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**DIEP, KEVIN**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: 20A17657*
*NPI: 1083117865*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**DODGE, JOHN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G67831*
*NPI: 1770510489*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DODGE, JOHN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G67831*
*NPI: 1770510489*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DOMINGUEZ, FERNANDO**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A154708*

*NPI: 1972917672*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**DOMINGUEZ, FERNANDO**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: A154708*

*NPI: 1972917672*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**EL-GHONEIMY, AHMED**

*License Type: MD*

*Provider ID: 315861*

*Provider Gender: Male*

*License Number: A93235*

*NPI: 1942257852*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, French, Italian*

*Cultural Competency: N*

*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**EL-GHONEIMY, AHMED**

*License Type: MD*

*Provider ID: 315861*

*Provider Gender: Male*

*License Number: A93235*

*NPI: 1942257852*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, French, Italian*

*Cultural Competency: N*

*Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**FABELLA, GABRIEL**
*License Type: MD*
*Provider ID: 121666*
*Provider Gender: Male*
*NPI: 1124060827*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese, Spanish, Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126
*Phone: (858) 695-1262*
*Fax: (858) 695-2132*
*After Hours Phone: (858) 695-1262*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-3PM*

**INTERNAL MEDICINE**

**FRENETTE, CATHERINE**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A80461*
*NPI: 1417935081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**FRENETTE, CATHERINE**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A80461*
*NPI: 1417935081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**GEHR, MARC**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G67338*

*NPI: 1306800180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**GEHR, MARC**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G67338*
*NPI: 1306800180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**GERWER, JOHANNA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A169752*
*NPI: 1043742588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**GERWER, JOHANNA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A169752*
*NPI: 1043742588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**GUTIERREZ DAVILA, ANGELICA**
*License Type: MD*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: A175116*
*NPI: 1982180329*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**GUTIERREZ DAVILA, ANGELICA**
*License Type: MD*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: A175116*
*NPI: 1982180329*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**HAN, PAUL**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A116816*
*NPI: 1053553339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**HAN, PAUL**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A116816*
*NPI: 1053553339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

# C. Primary Care Directory

**INTERNAL MEDICINE**

**HAZELBAKER, PAUL**

*License Type: DO*

*Provider ID: 71153*

*Provider Gender: Male*

*License Number: 20A7147*

*NPI: 1831106103*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

*Phone: (619) 515-2430*

*After Hours Phone: (619) 515-2430*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**HAZELBAKER, PAUL**

*License Type: DO*

*Provider ID: 71153*

*Provider Gender: Male*

*License Number: 20A7147*

*NPI: 1831106103*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

*Phone: (619) 515-2430*

*After Hours Phone: (619) 515-2430*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**HENDERSON, PHILIP**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: A140324*

*NPI: 1447678834*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**HENDERSON, PHILIP**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: A140324*

*NPI: 1447678834*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**HIGGINSON, MICHELLE**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Female*
*License Number: A74420*
*NPI: 1114955879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**HIGGINSON, MICHELLE**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A74420*
*NPI: 1114955879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**JACKSON, GAVIN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A110647*
*NPI: 1609033182*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**INTERNAL MEDICINE**

**JACKSON, GAVIN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: A110647*
*NPI: 1609033182*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# C. Primary Care Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**INTERNAL MEDICINE**

**JAMISON, KAREN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A95356*
*NPI: 1285830505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**JAMISON, KAREN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A95356*
*NPI: 1285830505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**KARCHES, KELLI**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A80931*
*NPI: 1891997631*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**KARCHES, KELLI**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A80931*
*NPI: 1891997631*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN*

*SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**KHANNA, POORNIMA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A70714*
*NPI: 1598862583*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**KHANNA, POORNIMA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A70714*
*NPI: 1598862583*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**KRIJGER, LISA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A67762*
*NPI: 1932278710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**INTERNAL MEDICINE**

**KRIJGER, LISA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A67762*
*NPI: 1932278710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858)*

*279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A119010*
*NPI: 1609095264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

# C. Primary Care Directory

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARAYANAN, MEENA**

*License Type: MD*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: A113448*

*NPI: 1508170697*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

*Phone: (619) 515-2560*

*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**NARAYANAN, MEENA**

*License Type: MD*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: A113448*

*NPI: 1508170697*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

*Phone: (619) 515-2560*

*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RAMERS, CHRISTIAN**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: A119631*

*NPI: 1730381385*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RAMERS, CHRISTIAN**

*License Type: MD*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: A119631*

*NPI: 1730381385*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RESNIKOFF, PAMELA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: G80358*
*NPI: 1841252533*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RESNIKOFF, PAMELA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: G80358*
*NPI: 1841252533*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RIVERA, TANIA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A126958*
*NPI: 1336346972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RIVERA, TANIA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A126958*
*NPI: 1336346972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR*

*MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**SASSIC, JESSICA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A185024*
*NPI: 1598342529*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**SASSIC, JESSICA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A185024*
*NPI: 1598342529*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**SHAMSINEJAD BABAKI, ARASH**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A81206*
*NPI: 1750498119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SHAMSINEJAD BABAKI, ARASH**
*License Type: MD*
*Provider ID: 307044*
*Provider Gender: Male*
*License Number: A81206*
*NPI: 1750498119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SHI, RUJING**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: 20A19399*
*NPI: 1710446539*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619)*

*515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**SHI, RUJING**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: 20A19399*
*NPI: 1710446539*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**TESSIER, ADLA**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Female*
*License Number: A51666*
*NPI: 1013915594*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**TESSIER, ADLA**
*License Type: MD*
*Provider ID: 315861*
*Provider Gender: Female*
*License Number: A51666*
*NPI: 1013915594*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**URIBE-BRUCE, LILIANA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C55724*
*NPI: 1689010324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,*

*SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**URIBE-BRUCE, LILIANA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C55724*
*NPI: 1689010324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VALDEZ, KRYSTAL ANGELI**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A156854*
*NPI: 1629480272*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**INTERNAL MEDICINE**

**VALDEZ, KRYSTAL ANGELI**
*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A156854*
*NPI: 1629480272*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**INTERNAL MEDICINE**

**VIDAURRAZAGA, MONICA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A169207*
*NPI: 1346628310*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VIDAURRAZAGA, MONICA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A169207*
*NPI: 1346628310*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**WASTILA, LISA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A60801*
*NPI: 1043375231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**WASTILA, LISA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A60801*
*NPI: 1043375231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**WATTANAMANO, PORNTHEP**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C186338*
*NPI: 1295738516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**WATTANAMANO, PORNTHEP**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C186338*
*NPI: 1295738516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**WATTANAMANO, PORNTHEP**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C186338*
*NPI: 1295738516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**WATTANAMANO, PORNTHEP**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: C186338*
*NPI: 1295738516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*

# C. Primary Care Directory

*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

**WATTS, ELI**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: A79383*
*NPI: 1649373739*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**WATTS, ELI**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: A79383*
*NPI: 1649373739*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**YUNG, STEVEN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G80798*
*NPI: 1689636656*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**YUNG, STEVEN**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G80798*
*NPI: 1689636656*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**MULTI SPECIALTY MEDICAL CLINIC**

**UCSD MEDICAL GROUP,**
*Provider ID: 205571*

# C. Primary Care Directory

*NPI: 1508968751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 25\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MULTI SPECIALTY MEDICAL CLINIC**

**UCSD MEDICAL GROUP,**
*Provider ID: 87130*
*NPI: 1578672184*
*Provider English Spoken: Y*
*Cultural Competency: N*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 400
SAN DIEGO, CA 92103
*Phone: (619) 471-9260*
*Fax: (619) 471-9310*
*After Hours Phone: (619) 471-9260*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\25*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**CANTU-REYNA, GUILLERMO**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NEUROLOGY**

**CANTU-REYNA, GUILLERMO**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NEUROLOGY**

**LUHAR, RIYA**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: 20A19975*
*NPI: 1235665662*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**NEUROLOGY**

**LUHAR, RIYA**
*License Type: DO*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: 20A19975*
*NPI: 1235665662*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**NEUROLOGY**

**MARTIN, FREDERIC**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G61965*
*NPI: 1265582605*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**MARTIN, FREDERIC**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: G61965*
*NPI: 1265582605*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**TAFRESHI, GILDA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A103111*
*NPI: 1891946950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**NEUROLOGY**

**TAFRESHI, GILDA**
*License Type: MD*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: A103111*
*NPI: 1891946950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**AL-MSHHDANI, AYSER**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A172929*
*NPI: 1679008569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**AL-MSHHDANI, AYSER**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A172929*
*NPI: 1679008569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G44807*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G44807*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*

*License Number: G44807*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G44807*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**

*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**

*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**

*License Type: MD*
*Provider ID: 25608*

*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
- *Phone: (619) 515-2444*
- *After Hours Phone: (619) 515-2444*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3514 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*

# C. Primary Care Directory

*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

# C. Primary Care Directory

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**

*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619)*

*515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM*
*TH 9AM-6PM*
*F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25731*

*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A178499*

*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**GRANT, REBEKAH**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C159737*
*NPI: 1326243833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**GRANT, REBEKAH**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C159737*
*NPI: 1326243833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**

*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25732*

*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
- *Phone: (619) 515-2444*
- *After Hours Phone: (619) 515-2444*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP*

*CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST

# C. Primary Care Directory

SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**

*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**

*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**PHAN, TIFFANI**

*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A161105*
*NPI: 1134515695*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**PHAN, TIFFANI**

*License Type: MD*
*Provider ID: 25517*
*Provider Gender: Female*
*License Number: A161105*
*NPI: 1134515695*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

*Phone: (619) 515-2560*

*After Hours Phone: (619) 515-2560*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 39198*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3514 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 25608*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: 20A13958*

*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*License Type: DO*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: 20A13958*
*NPI: 1932269198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**TRUJILLO, JENNIFER**
*License Type: DO*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: 20A8204*
*NPI: 1053407593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**TRUJILLO, JENNIFER**
*License Type: DO*
*Provider ID: 217520*
*Provider Gender: Female*
*License Number: 20A8204*
*NPI: 1053407593*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

# C. Primary Care Directory

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL,*

*SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25732*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF*

*SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**NAJAFI, DAVID**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A68124*
*NPI: 1396715991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-6PM*
*TH 8:30AM-6PM*
*F 8:30AM-5PM*
*SA 8:30AM-5PM*

**OPHTHALMOLOGY**

**NAJAFI, DAVID**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A68124*
*NPI: 1396715991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-6PM*
*TH 8:30AM-6PM*
*F 8:30AM-5PM*
*SA 8:30AM-5PM*

**OPHTHALMOLOGY**

**SHAW, BLAKE**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: G61394*
*NPI: 1649206541*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-7:30PM*
*TU-F 8:30AM-5:30PM*

**OPHTHALMOLOGY**

**SHAW, BLAKE**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: G61394*
*NPI: 1649206541*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SHAW, BLAKE**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Male*
*License Number: G61394*

*NPI: 1649206541*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SHAW, BLAKE**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: G61394*
*NPI: 1649206541*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-7:30PM TU-F 8:30AM-5:30PM*

**OPHTHALMOLOGY**

**ZABLIT, KARIM**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A42127*
*NPI: 1083700538*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:45PM*

**OPHTHALMOLOGY**

**ZABLIT, KARIM**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Male*
*License Number: A42127*
*NPI: 1083700538*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:45PM*

**OTOLARYNGOLOGY**

**MILLS, MORGAN**
*License Type: MD*

*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A181809*
*NPI: 1891359154*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OTOLARYNGOLOGY**

**MILLS, MORGAN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A181809*
*NPI: 1891359154*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OTOLARYNGOLOGY**

**YOUSEF, ANDREW**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A186426*
*NPI: 1275152662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OTOLARYNGOLOGY**

**YOUSEF, ANDREW**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A186426*
*NPI: 1275152662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ABELL, GEOFFREY**
*License Type: MD*
*Provider ID: 204570*
*Provider Gender: Male*
*NPI: 1245256130*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
*Phone: (619) 262-8624*
*Fax: (619) 262-6639*
*After Hours Phone: (619) 262-8624*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ABRAMSON, RACHEL**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A104918*
*NPI: 1588707178*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**ABRAMSON, RACHEL**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A104918*
*NPI: 1588707178*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**ADJAN, ROULA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A81682*
*NPI: 1992847263*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*Fax: (619) 749-5480*
*After Hours Phone: (619)*

*255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ADJAN, ROULA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A81682*
*NPI: 1992847263*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*Fax: (619) 749-5480*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ADLOUNI, LOUBABA**
*License Type: MD*
*Provider ID: 204574*
*Provider Gender: Female*
*NPI: 1669443685*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
*Phone: (858) 924-1960*
*Fax: (858) 924-1964*
*After Hours Phone: (858) 924-1960*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ALBINO, NICHOLAS**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A179851*
*NPI: 1740843499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**ALBINO, NICHOLAS**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A179851*
*NPI: 1740843499*
*Provider English Spoken: Y*

# C. Primary Care Directory

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**ANDREE, GREGOR**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Male*
*License Number: A72833*
*NPI: 1467436063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ANDREE, GREGOR**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A72833*
*NPI: 1467436063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**ANDREE, GREGOR**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A72833*
*NPI: 1467436063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**PEDIATRICS**

**ANDREE, GREGOR**

*License Type: MD*

*Provider ID: 289881*

*Provider Gender: Male*

*License Number: A72833*

*NPI: 1467436063*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: German, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

- *Phone: (619) 280-2058*
- *After Hours Phone: (619) 280-2058*
- *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\22*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ARCHAMBAULT, CHRISTIAN**

*License Type: MD*

*Provider ID: 204446*

*Provider Gender: Male*

*NPI: 1992776918*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, CHILDRENS HOSPITAL OF ORANGE COUNTY, PARADISE VALLEY HOSPITAL, PARADISE VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

16918 DOVE CANYON RD STE 200
SAN DIEGO, CA 92127

- *Phone: (858) 924-1960*

*Fax: (858) 924-1964*

- *After Hours Phone: (858) 924-1960*
- *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

**PEDIATRICS**

**AWDYKOVYCH, MARTA**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A44027*

*NPI: 1447265137*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**AWDYKOVYCH, MARTA**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A44027*

*NPI: 1447265137*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese, French,*

*Spanish, Ukrainian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**AYSON, NICOLE**
*License Type: MD*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: A128091*
*NPI: 1013278704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**AYSON, NICOLE**
*License Type: MD*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: A128091*
*NPI: 1013278704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**AZIMI, AYSUN**
*License Type: DO*
*Provider ID: 205178*
*Provider Gender: Female*
*NPI: 1710246160*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL, CLOVIS COMMUNITY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
*Phone: (619) 262-8624*
*Fax: (619) 262-6639*

*After Hours Phone: (619) 262-8624*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**BONSU, BEMA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: C55180*
*NPI: 1932106986*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BONSU, BEMA**
*License Type: MD*
*Provider ID: 37723*
*Provider Gender: Male*
*License Number: C55180*
*NPI: 1932106986*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CABARLO, JEHRIB**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A8516*
*NPI: 1770661340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CABARLO, JEHRIB**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A8516*
*NPI: 1770661340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY*

# C. Primary Care Directory

*CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CARSON, STEPHEN**
*License Type: MD*
*Provider ID: 204346*
*Provider Gender: Male*
*NPI: 1780719872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8:30PM*
*F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**CASTELNOVI, CLAUDIA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A111170*
*NPI: 1417279324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Italian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CASTELNOVI, CLAUDIA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A111170*
*NPI: 1417279324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Italian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.or*

*g*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHEN, JENNIFER**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A141057*
*NPI: 1255785150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHEN, JENNIFER**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A141057*
*NPI: 1255785150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHEN, EILEEN**
*License Type: MD*
*Provider ID: 296844*
*Provider Gender: Female*
*NPI: 1932660966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 400
SAN DIEGO, CA 92123
*Phone: (858) 495-0500*
*Fax: (858) 560-4279*
*After Hours Phone: (858) 495-0500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9154*
*After Hours Phone: (619) 255-9154*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**PEDIATRICS**

**CONE, STEPHANIE**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9154*
*After Hours Phone: (619) 255-9154*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**PEDIATRICS**

**CORDES, WILLIAM**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A15743*
*NPI: 1174942544*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**PEDIATRICS**

**CORDES, WILLIAM**
*License Type: DO*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: 20A15743*
*NPI: 1174942544*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*

*SA 8AM-5PM*

**PEDIATRICS**

**DIXON, SARAH**

*License Type: MD*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: A137415*

*NPI: 1467751131*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**DIXON, SARAH**

*License Type: MD*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: A137415*

*NPI: 1467751131*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**FISHMAN, ELENA**

*License Type: MD*

*Provider ID: 276247*

*Provider Gender: Female*

*NPI: 1740249432*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Russian*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130

*Phone: (858) 793-1011*

*After Hours Phone: (858) 793-1011*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**FORTUNE, ERIN**

*License Type: MD*

*Provider ID: 39198*

*Provider Gender: Male*

*License Number: A95577*

*NPI: 1801088422*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FORTUNE, ERIN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A95577*
*NPI: 1801088422*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**FORTUNE, ERIN**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Male*
*License Number: A95577*
*NPI: 1801088422*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FORTUNE, ERIN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: A95577*
*NPI: 1801088422*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**FRIEDMAN, JAIME**
*License Type: MD*

# C. Primary Care Directory

*Provider ID: 204676*
*Provider Gender: Female*
*NPI: 1144297961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
*Phone: (858) 924-1960*
*Fax: (858) 924-1964*
*After Hours Phone: (858) 924-1960*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GOGGIN, SAMANTHA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A163693*
*NPI: 1023506367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9154*
*After Hours Phone: (619) 255-9154*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GOGGIN, SAMANTHA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A163693*
*NPI: 1023506367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9154*
*After Hours Phone: (619) 255-9154*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GRAY, SARAH**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A151631*
*NPI: 1508210311*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-7PM*
*TU-TH 8:30AM-6PM*
*F 8:30AM-5:30PM*
*SA 8:30AM-5PM*

# C. Primary Care Directory

**PEDIATRICS**

**GRAY, SARAH**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A151631*
*NPI: 1508210311*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-7PM*
*TU-TH 8:30AM-6PM*
*F 8:30AM-5:30PM*
*SA 8:30AM-5PM*

**PEDIATRICS**

**GUPTA, VARSHA**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A164889*
*NPI: 1891283214*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**GUPTA, VARSHA**

*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A164889*
*NPI: 1891283214*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**HENDERSON, TREVOR**

*License Type: MD*
*Provider ID: 204586*
*Provider Gender: Male*
*NPI: 1356449425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
*Phone: (619) 265-3400*
*Fax: (619) 265-3407*
*After Hours Phone: (619) 265-3400*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**HIBBS, NICOLE**
*License Type: MD*
*Provider ID: 204509*
*Provider Gender: Female*
*NPI: 1164627832*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8:30PM*
*F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**HORMOZDYARAN, SANAYA**
*License Type: MD*
*Provider ID: 296313*
*Provider Gender: Female*
*NPI: 1750887634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*

2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106
*Phone: (619) 222-1253*
*Fax: (619) 222-1276*
*After Hours Phone: (619) 222-1253*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**JORDAN, JAMIE**
*License Type: MD*
*Provider ID: 204510*
*Provider Gender: Female*
*NPI: 1275762833*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131
*Phone: (858) 566-4444*
*Fax: (858) 566-3321*
*After Hours Phone: (858) 566-4444*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**JUAREZ, PATRICIA**

*License Type: MD*

*Provider ID: 204696*

*Provider Gender: Female*

*NPI: 1205807229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 400
SAN DIEGO, CA 92123

*Phone: (858) 495-0500*

*Fax: (858) 560-4279*

*After Hours Phone: (858) 495-0500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**KARMAKAR, KANKA**

*License Type: MD*

*Provider ID: 25517*

*Provider Gender: Female*

*License Number: C54941*

*NPI: 1972536654*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**PEDIATRICS**

**KARMAKAR, KANKA**

*License Type: MD*

*Provider ID: 25517*

*Provider Gender: Female*

*License Number: C54941*

*NPI: 1972536654*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**PEDIATRICS**

**KESANAPALLI, DEEPTHI**

*License Type: MD*

*Provider ID: 294427*

*Provider Gender: Female*

*NPI: 1487948584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Telugu*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 335
SAN DIEGO, CA 92123
*Phone: (858) 576-8010*
*Fax: (858) 576-7391*
*After Hours Phone: (858) 576-8010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-6PM F 8:30AM-12PM*

**PEDIATRICS**

**LAWRIE, ALISA**
*License Type: MD*
*Provider ID: 305240*
*Provider Gender: Female*
*NPI: 1407847908*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-4567*
*After Hours Phone: (619) 297-4567*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM*

**PEDIATRICS**

**LE, NGUYEN**
*License Type: MD*
*Provider ID: 204363*
*Provider Gender: Male*
*NPI: 1548308109*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5507 EL CAJON BLVD STE B
SAN DIEGO, CA 92115
*Phone: (619) 582-8814*
*Fax: (619) 582-8813*
*After Hours Phone: (619) 582-8814*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**LOPER, KAREN**
*License Type: MD*
*Provider ID: 258121*
*Provider Gender: Female*
*NPI: 1619908936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH*

*HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**LUJAN, ARLEEN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A61687*
*NPI: 1760412431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**LUJAN, ARLEEN**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A61687*
*NPI: 1760412431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MADANY, GEORGE**
*License Type: MD*
*Provider ID: 205018*
*Provider Gender: Male*
*NPI: 1811968837*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 400
SAN DIEGO, CA 92123
*Phone: (858) 495-0500*
*Fax: (858) 560-4279*
*After Hours Phone: (858) 495-0500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MAHENDRAN, SRIVIDYA**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: A92173*
*NPI: 1487843454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MAHENDRAN, SRIVIDYA**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: A92173*
*NPI: 1487843454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MANRIQUEZ-CASTILLO, ERENDIRA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A75533*
*NPI: 1356397418*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**MANRIQUEZ-CASTILLO, ERENDIRA**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: A75533*
*NPI: 1356397418*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**MARTINEZ-ANDREE, INGRID**
*License Type: MD*
*Provider ID: 204379*
*Provider Gender: Female*
*NPI: 1205807203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 400
SAN DIEGO, CA 92123
*Phone: (858) 495-0500*
*Fax: (858) 560-4279*
*After Hours Phone: (858) 495-0500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**NGUYEN, JANICE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A157335*
*NPI: 1760916589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**NGUYEN, JANICE**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A157335*
*NPI: 1760916589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**PARK, TARI**
*License Type: MD*
*Provider ID: 206277*
*Provider Gender: Female*
*NPI: 1285669085*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131
*Phone: (858) 566-4444*
*Fax: (858) 566-3321*
*After Hours Phone: (858) 566-4444*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**PAVLOVICH, WENDY**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A126181*
*NPI: 1740467299*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**PAVLOVICH, WENDY**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A126181*
*NPI: 1740467299*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POWELL, STEPHANIE**
*License Type: MD*
*Provider ID: 204607*
*Provider Gender: Female*
*NPI: 1720059744*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 400
SAN DIEGO, CA 92123
*Phone: (858) 495-0500*
*Fax: (858) 560-4279*
*After Hours Phone: (858) 495-0500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# C. Primary Care Directory

**PEDIATRICS**

**PRESKILL, CATALINA**

*License Type: MD*

*Provider ID: 289863*

*Provider Gender: Female*

*License Number: G29879*

*NPI: 1598088759*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

**PEDIATRICS**

**PRESKILL, CATALINA**

*License Type: MD*

*Provider ID: 289863*

*Provider Gender: Female*

*License Number: G29879*

*NPI: 1598088759*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

*Phone: (619) 233-8500*

*After Hours Phone: (619) 233-8500*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM*

**PEDIATRICS**

**RODRIGUEZ, JAVIER**

*License Type: MD*

*Provider ID: 46039*

*Provider Gender: Male*

*License Number: A82639*

*NPI: 1013059385*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RODRIGUEZ, JAVIER**

*License Type: MD*

*Provider ID: 315861*

*Provider Gender: Male*

*License Number: A82639*

*NPI: 1013059385*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 312-0347*

*After Hours Phone: (619) 312-0347*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RODRIGUEZ, JAVIER**

*License Type: MD*

*Provider ID: 315861*

*Provider Gender: Male*
*License Number: A82639*
*NPI: 1013059385*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RODRIGUEZ, JAVIER**
*License Type: MD*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: A82639*
*NPI: 1013059385*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RUBENSTEIN, STUART**
*License Type: MD*
*Provider ID: 276967*
*Provider Gender: Male*
*NPI: 1689633844*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130
*Phone: (858) 793-1011*
*After Hours Phone: (858) 793-1011*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**PEDIATRICS**

**SAMPATH, SRIVIDYA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A132576*
*NPI: 1275892754*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**SAMPATH, SRIVIDYA**

*License Type: MD*

*Provider ID: 39198*

*Provider Gender: Female*

*License Number: A132576*

*NPI: 1275892754*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3514 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**SEBSO, JODI**

*License Type: MD*

*Provider ID: 39198*

*Provider Gender: Female*

*License Number: A103099*

*NPI: 1538484316*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3514 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*

*After Hours Phone: (619) 515-2424*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBSO, JODI**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A103099*

*NPI: 1538484316*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**SEBSO, JODI**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A103099*

*NPI: 1538484316*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**SEBSO, JODI**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A103099*
*NPI: 1538484316*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SHENOY, ASHVIN**
*License Type: MD*
*Provider ID: 206334*
*Provider Gender: Male*
*NPI: 1619262664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
*Phone: (619) 262-8624*
*Fax: (619) 262-6639*
*After Hours Phone: (619) 262-8624*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**SHETH, HASMUKH**
*License Type: MD*
*Provider ID: 217520*
*Provider Gender: Male*
*License Number: A45942*
*NPI: 1396812236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SHETH, HASMUKH**
*License Type: MD*
*Provider ID: 217520*

*Provider Gender: Male*
*License Number: A45942*
*NPI: 1396812236*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi, Urdu*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SHIAU, NANCY**
*License Type: MD*
*Provider ID: 206325*
*Provider Gender: Female*
*NPI: 1750352779*
- *Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
*Phone: (619) 265-3400*
*Fax: (619) 265-3407*
*After Hours Phone: (619) 265-3400*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*

*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 25608*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**SPITZER, MARSHA**
*License Type: MD*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: A76785*
*NPI: 1851323315*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SUBRAMANIAN, RAMA**
*License Type: MD*
*Provider ID: 304383*
*Provider Gender: Female*
*NPI: 1932593506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130
*Phone: (858) 793-1011*
*After Hours Phone: (858) 793-1011*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**SULEIMAN-QAFITI, KHAWLA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A51318*
*NPI: 1659303121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**SULEIMAN-QAFITI, KHAWLA**
*License Type: MD*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: A51318*
*NPI: 1659303121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

# C. Primary Care Directory

**PEDIATRICS**

**TAMAYO, MAITHE**

*License Type: MD*

*Provider ID: 35571*

*Provider Gender: Female*

*License Number: A80504*

*NPI: 1487748430*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

2391 ISLAND AVE
SAN DIEGO, CA 92102

- *Phone: (619) 515-2435*
- *After Hours Phone: (619) 515-2435*
- *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TAMAYO, MAITHE**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A80504*

*NPI: 1487748430*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TAMAYO, MAITHE**

*License Type: MD*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: A80504*

*NPI: 1487748430*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TAMAYO, MAITHE**

*License Type: MD*

*Provider ID: 35571*

*Provider Gender: Female*

*License Number: A80504*

*NPI: 1487748430*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

# C. Primary Care Directory

*FAMILY HEALTH CENTERS OF SAN DIEGO*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**WASSON, MINA**
*License Type: MD*
*Provider ID: 312057*
*Provider Gender: Female*
*NPI: 1366753022*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131
*Phone: (858) 566-4444*
*Fax: (858) 566-3321*
*After Hours Phone: (858) 566-4444*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**WATERS, ELIZABETH**
*License Type: MD*
*Provider ID: 205058*
*Provider Gender: Female*
*NPI: 1730477621*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
*Phone: (619) 262-8624*
*Fax: (619) 262-6639*
*After Hours Phone: (619) 262-8624*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**WEATHERLY, JACOB**
*License Type: MD*
*Provider ID: 300981*
*Provider Gender: Male*
*NPI: 1538520457*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
*Phone: (619) 265-3400*
*Fax: (619) 265-3407*
*After Hours Phone: (619) 265-3400*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8:30AM-12PM*

**PEDIATRICS**

**WONG, YOLANDA**

*License Type: MD*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: A94449*

*NPI: 1851599872*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**WONG, IAN**

*License Type: DO*

*Provider ID: 310731*

*Provider Gender: Male*

*NPI: 1174152128*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130

*Phone: (858) 793-1011*

*Fax: (858) 793-1035*

*After Hours Phone: (858) 793-1011*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**WONG, YOLANDA**

*License Type: MD*

*Provider ID: 289872*

*Provider Gender: Female*

*License Number: A94449*

*NPI: 1851599872*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**ZAHEER, AARON**

*License Type: MD*

*Provider ID: 289881*

*Provider Gender: Male*

*License Number: A61238*

*NPI: 1902882301*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Persian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ZAHEER, AARON**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A61238*
*NPI: 1902882301*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ZAHEER, AARON**
*License Type: MD*
*Provider ID: 289881*
*Provider Gender: Male*
*License Number: A61238*
*NPI: 1902882301*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ZAHEER, AARON**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: A61238*
*NPI: 1902882301*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

# C. Primary Care Directory

**ALVARADO, EDMUND**
*License Type: PA*
*Provider ID: 97440*
*Provider Gender: Male*
*License Number: PA20888*
*NPI: 1720303340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**ALVARADO, EDMUND**
*License Type: PA*
*Provider ID: 97440*
*Provider Gender: Male*
*License Number: PA20888*
*NPI: 1720303340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Male*
*License Number: PA13694*
*NPI: 1346382611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

# C. Primary Care Directory

**CASTILLO, PATRICIA**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA17220*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA17220*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA17220*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA17220*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA17220*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CONTRERAS, LORETTA**
*License Type: PA*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: PA54617*
*NPI: 1679096341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU-W 8:30AM-5PM*
*TH 8:30AM-9PM*
*F 8:30AM-5PM*

**PHYSICIANS ASSISTANT**

**CONTRERAS, LORETTA**
*License Type: PA*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: PA54617*
*NPI: 1679096341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU-W 8:30AM-5PM*
*TH 8:30AM-9PM*
*F 8:30AM-5PM*

**PHYSICIANS ASSISTANT**

**DAVID, MARVIC**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA53748*
*NPI: 1750832317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**DAVID, MARVIC**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA53748*
*NPI: 1750832317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**DRAME, SALWA**
*License Type: PA*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: PA59481*
*NPI: 1093136426*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**DRAME, SALWA**
*License Type: PA*
*Provider ID: 100648*
*Provider Gender: Female*
*License Number: PA59481*
*NPI: 1093136426*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**FINK, PATRICK**
*License Type: PA*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: PA52704*
*NPI: 1922380328*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**FINK, PATRICK**
*License Type: PA*
*Provider ID: 25608*
*Provider Gender: Male*
*License Number: PA52704*
*NPI: 1922380328*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**GARCIA, DEANA**
*License Type: PA*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: PA21042*
*NPI: 1447567995*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST

SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**GARCIA, DEANA**
*License Type: PA*
*Provider ID: 39198*
*Provider Gender: Female*
*License Number: PA21042*
*NPI: 1447567995*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HIGUERA, EDITH**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: PA51283*
*NPI: 1558782029*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, REGIONAL MEDICAL CTR OF SAN JOSE*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**HIGUERA, EDITH**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: PA51283*
*NPI: 1558782029*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, REGIONAL MEDICAL CTR OF SAN JOSE*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*License Type: PA*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: PA58505*
*NPI: 1104203454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA58505*
*NPI: 1104203454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*License Type: PA*
*Provider ID: 103499*
*Provider Gender: Female*
*License Number: PA58505*
*NPI: 1104203454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA58505*
*NPI: 1104203454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104

*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*License Type: PA*
*Provider ID: 25732*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**LLOYD, MATTHEW**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA62752*
*NPI: 1487307369*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**LLOYD, MATTHEW**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA62752*
*NPI: 1487307369*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**
*License Type: PA*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PA21385*
*NPI: 1932335080*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**

*License Type: PA*

*Provider ID: 100648*

*Provider Gender: Male*

*License Number: PA21385*

*NPI: 1932335080*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4874 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 515-2426*

*After Hours Phone: (619) 515-2426*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**

*License Type: PA*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: PA21385*

*NPI: 1932335080*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**

*License Type: PA*

*Provider ID: 100648*

*Provider Gender: Male*

*License Number: PA21385*

*NPI: 1932335080*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4874 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 515-2426*

*After Hours Phone: (619) 515-2426*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MARTINEZ-MURGUIA, IRENE**

*License Type: PA*

*Provider ID: 46039*

*Provider Gender: Female*

*License Number: PA20296*

*NPI: 1447492889*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MARTINEZ-MURGUIA, IRENE**

*License Type: PA*

*Provider ID: 46039*

*Provider Gender: Female*

*License Number: PA20296*
*NPI: 1447492889*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*License Type: PA*
*Provider ID: 46039*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

**MILLER, LAUREL**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA20378*
*NPI: 1598992133*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**MILLER, LAUREL**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA20378*
*NPI: 1598992133*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**NUNO, JOSE**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA15227*
*NPI: 1275543068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*License Type: PA*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: PA53902*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**PHYSICIANS ASSISTANT**

**NUNO, JOSE**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA15227*
*NPI: 1275543068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*License Type: PA*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: PA53902*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*License Type: PA*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: PA53902*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*License Type: PA*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: PA53902*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**PHYSICIANS ASSISTANT**

**POLLEY, SHANNON**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA60864*
*NPI: 1225608722*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**POLLEY, SHANNON**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA60864*
*NPI: 1225608722*
*Provider English Spoken: Y*

# C. Primary Care Directory

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**QUICK, ELISABETH**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA21591*
*NPI: 1790055010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**QUICK, ELISABETH**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA21591*
*NPI: 1790055010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**RALL, EMILY**
*License Type: PA*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: PA52141*
*NPI: 1407855828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**RALL, EMILY**
*License Type: PA*
*Provider ID: 37723*
*Provider Gender: Female*
*License Number: PA52141*
*NPI: 1407855828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**RASMUSSEN, DALE**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA54022*
*NPI: 1962880864*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: MERCY HOSPITAL OF FOLSOM*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**RASMUSSEN, DALE**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA54022*
*NPI: 1962880864*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: MERCY HOSPITAL OF FOLSOM*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**SCHELLIE, SCOTT**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA53288*
*NPI: 1699053843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**SCHELLIE, SCOTT**
*License Type: PA*
*Provider ID: 87122*
*Provider Gender: Male*
*License Number: PA53288*
*NPI: 1699053843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TOMASZEWSKI, DEBRA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: PA58081*
*NPI: 1215264452*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TOMASZEWSKI, DEBRA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: MT2061555*
*NPI: 1215264452*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TOMASZEWSKI, DEBRA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*

*License Number: PA58081*
*NPI: 1215264452*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TOMASZEWSKI, DEBRA**
*License Type: PA*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: MT2061555*
*NPI: 1215264452*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TREUNER, JULIE**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA17478*
*NPI: 1922013614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**TREUNER, JULIE**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA17478*
*NPI: 1922013614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**TURNER, SHEREENA**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA20396*
*NPI: 1992934988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TURNER, SHEREENA**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PA20396*
*NPI: 1992934988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**UDOH, EKAETE**
*License Type: PA*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: PA19664*
*NPI: 1841472776*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**UDOH, EKAETE**
*License Type: PA*
*Provider ID: 112894*
*Provider Gender: Male*
*License Number: PA19664*
*NPI: 1841472776*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**VARGAS, ROBERT**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA11194*
*NPI: 1972528081*
*Provider English Spoken: Y*

# C. Primary Care Directory

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**VARGAS, ROBERT**
*License Type: PA*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: PA11194*
*NPI: 1972528081*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**YOUNG-PEN, TONI**
*License Type: PA*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: PA18746*
*NPI: 1932297595*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

**YOUNG-PEN, TONI**
*License Type: PA*
*Provider ID: 289882*
*Provider Gender: Female*
*License Number: PA18746*
*NPI: 1932297595*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**PODIATRIST**

**JUAREZ, LETICIA**
*License Type: DPM*
*Provider ID: 25731*
*Provider Gender: Female*

*License Number: DPM5661*
*NPI: 1508393778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**JUAREZ, LETICIA**
*License Type: DPM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: DPM5661*
*NPI: 1508393778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**LE, DIANA**
*License Type: DPM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: DPM5734*
*NPI: 1184112864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**LE, DIANA**
*License Type: DPM*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: DPM5734*
*NPI: 1184112864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**PODIATRIST**

**LE, DIANA**

*License Type: DPM*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: DPM5734*

*NPI: 1184112864*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**LE, DIANA**

*License Type: DPM*

*Provider ID: 78906*

*Provider Gender: Female*

*License Number: DPM5734*

*NPI: 1184112864*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4725 MARKET ST
SAN DIEGO, CA 92102

- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**

*License Type: DPM*

*Provider ID: 307044*

*Provider Gender: Male*

*License Number: DPM2930*

*NPI: 1790890788*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**

*License Type: DPM*

*Provider ID: 307044*

*Provider Gender: Male*

*License Number: DPM2930*

*NPI: 1790890788*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

- *Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**PANEK, JOHN**
*License Type: DPM*
*Provider ID: 25517*
*Provider Gender: Male*
*License Number: DPM6016*
*NPI: 1295795599*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**PODIATRIST**

**PANEK, JOHN**
*License Type: DPM*
*Provider ID: 25517*
*Provider Gender: Male*
*License Number: DPM6016*
*NPI: 1295795599*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**PODIATRIST**

**SCHNEIDER, SARAH**
*License Type: DPM*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: DPM4819*
*NPI: 1326282237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PODIATRIST**

**SCHNEIDER, SARAH**
*License Type: DPM*
*Provider ID: 87122*
*Provider Gender: Female*
*License Number: DPM4819*
*NPI: 1326282237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM*

**PODIATRIST**

**SCHNEIDER, SARAH**

*License Type: DPM*

*Provider ID: 25608*

*Provider Gender: Female*

*License Number: DPM4819*

*NPI: 1326282237*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**SCHNEIDER, SARAH**

*License Type: DPM*

*Provider ID: 25608*

*Provider Gender: Female*

*License Number: DPM4819*

*NPI: 1326282237*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3705 MISSION BLVD
SAN DIEGO, CA 92109

*Phone: (619) 515-2444*

*After Hours Phone: (619) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**SCHNEIDER, SARAH**

*License Type: DPM*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: DPM4819*

*NPI: 1326282237*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**SCHNEIDER, SARAH**

*License Type: DPM*

*Provider ID: 25731*

*Provider Gender: Female*

*License Number: DPM4819*

*NPI: 1326282237*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**

*License Type: MD*

*Provider ID: 289868*

*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD

# C. Primary Care Directory

SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**HILL, LINDA**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: G41532*
*NPI: 1467434811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G70886*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 9AM-4PM*

# C. Primary Care Directory

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**

*License Type: MD*
*Provider ID: 289872*
*Provider Gender: Male*
*License Number: G70886*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**

*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G70886*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*
*8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**

*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G70886*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*
*8:30AM-5:30PM*
*SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**

*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Male*
*License Number: G70886*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

# C. Primary Care Directory

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**RISSER, JOSEPH**

*License Type: MD*

*Provider ID: 289872*

*Provider Gender: Male*

*License Number: G70886*

*NPI: 1952386765*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**

*License Type: MD*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: A93812*

*NPI: 1508912130*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 279-0377*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**

*License Type: MD*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: A93812*

*NPI: 1508912130*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 279-0377*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**

*License Type: MD*

*Provider ID: 289868*

*Provider Gender: Female*

*License Number: A93812*

*NPI: 1508912130*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*License Type: MD*
*Provider ID: 289868*
*Provider Gender: Female*
*License Number: A93812*
*NPI: 1508912130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 279-0377*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**BLOCKER, NIRIT**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT30272*
*NPI: 1457689309*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**BLOCKER, NIRIT**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT30272*
*NPI: 1457689309*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

# C. Primary Care Directory

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**CAMERON, IAN**

*License Type: PT*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: PT291088*

*NPI: 1275993560*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**CAMERON, IAN**

*License Type: PT*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: PT291088*

*NPI: 1275993560*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**

*License Type: PT*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: PT295173*

*NPI: 1497236384*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**CUMMINGS, GEORGE**

*License Type: PT*

*Provider ID: 100421*

*Provider Gender: Male*

*License Number: PT295173*

*NPI: 1497236384*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**FIELDING, JOSEPH**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT40975*
*NPI: 1235577560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**FIELDING, JOSEPH**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT40975*
*NPI: 1235577560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**HERMES, MARY**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT24707*
*NPI: 1518028547*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**HERMES, MARY**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT24707*
*NPI: 1518028547*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**LEE, RYANT**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT296601*
*NPI: 1659922177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**LEE, RYANT**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT296601*
*NPI: 1659922177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**MIGNEA, DAVID**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT293536*
*NPI: 1043736879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619)*

*515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**SALES, JAN ERIC**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: PT303890*
*NPI: 1417650169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**SALES, JAN ERIC**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Female*
*License Number: PT303890*
*NPI: 1417650169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**SCHMIDT, BRYAN**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT28061*
*NPI: 1780685032*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**SCHMIDT, BRYAN**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT28061*
*NPI: 1780685032*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE

SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**TOVAR, NICOLE**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT33914*
*NPI: 1003088063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**TOVAR, NICOLE**
*License Type: PT*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: PT33914*
*NPI: 1003088063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**VAN DYKE, JASON**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT25155*
*NPI: 1487658720*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**VAN DYKE, JASON**
*License Type: PT*
*Provider ID: 100421*
*Provider Gender: Male*
*License Number: PT25155*
*NPI: 1487658720*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE

SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 289863*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*

*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**RHEUMATOLOGY**

**REDDY, DANA**
*License Type: MD*
*Provider ID: 78906*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SPEECH PATHOLOGIST**

**MILLER, WILLIAM**
*License Type: SP*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: SP35150*
*NPI: 1972002210*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**MILLER, WILLIAM**
*License Type: SP*
*Provider ID: 25731*
*Provider Gender: Male*
*License Number: SP35150*
*NPI: 1972002210*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**WILLIAMS, JESSICA**
*License Type: SP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: SP27677*
*NPI: 1932680006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**WILLIAMS, JESSICA**
*License Type: SP*
*Provider ID: 25731*
*Provider Gender: Female*
*License Number: SP27677*
*NPI: 1932680006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## SAN MARCOS

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106

SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*License Type: NPF*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069

# C. Primary Care Directory

*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95003903*
*NPI: 1659504264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**

*License Type: NP*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP95003903*

*NPI: 1659504264*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**

*License Type: NPF*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP95002545*

*NPI: 1538319645*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**

*License Type: NPF*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP95002545*

*NPI: 1538319645*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**

*License Type: NPF*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP95002545*

*NPI: 1538319645*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**

*License Type: NPF*

*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95002545*
*NPI: 1538319645*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**
*License Type: NPF*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95002545*
*NPI: 1538319645*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**
*License Type: NPF*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP95002545*
*NPI: 1538319645*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**

*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP21368*
*NPI: 1952658445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP21368*
*NPI: 1952658445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP21368*
*NPI: 1952658445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**
*License Type: NP*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NP21368*
*NPI: 1952658445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**

*License Type: NP*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP21368*

*NPI: 1952658445*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**

*License Type: NP*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP21368*

*NPI: 1952658445*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**

*License Type: NP*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NP21368*

*NPI: 1952658445*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: NM235844*

*NPI: 1407287469*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM SA 8AM-5PM*

# C. Primary Care Directory

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**

*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**
*License Type: CRNM*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: NM235844*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NATH, DEVARSHI**
*License Type: MD*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: C54157*
*NPI: 1275630618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1598484255*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1598484255*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1811617939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1811617939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1598484255*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1598484255*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1811617939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1811617939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 289853*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**FQHC**

**TRUECARE,**
*Provider ID: 296545*
*NPI: 1245246917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GENERAL PRACTICE**

**WITCZAK, IZABELA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A71311*
*NPI: 1184735201*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Polish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*License Type: DO*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: 20A13745*
*NPI: 1194161406*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*SA 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**

*License Type: DO*

*Provider ID: 289853*

*Provider Gender: Male*

*License Number: 20A13745*

*NPI: 1194161406*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-5PM*

**INTERNAL MEDICINE**

**PARIKH, MILIND**

*License Type: DO*

*Provider ID: 289853*

*Provider Gender: Male*

*License Number: 20A13745*

*NPI: 1194161406*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-5PM*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Male*

*License Number: G74757*

*NPI: 1467485078*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Male*

*License Number: G74757*

*NPI: 1467485078*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Male*

*License Number: G74757*

*NPI: 1467485078*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: G74757*
*NPI: 1467485078*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: G74757*
*NPI: 1467485078*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: G74757*
*NPI: 1467485078*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PONIACHIK, SAMUEL**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: G74757*
*NPI: 1467485078*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A97181*
*NPI: 1154477628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**MOSTOFIAN, EIMANEH**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A97181*
*NPI: 1154477628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**POUNTNEY, MARLENE**

*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A93248*
*NPI: 1174703680*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**

*License Type: MD*
*Provider ID: 303889*
*Provider Gender: Female*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**PEDIATRICS**

**MALHOTRA, ARATI**

*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**

*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**

*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**

*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: A63903*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MONAHAN, CAROLYN**
*License Type: MD*
*Provider ID: 238093*
*Provider Gender: Female*
*NPI: 1619973666*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
1582 W SAN MARCOS BLVD STE 203
SAN MARCOS, CA 92078
*Phone: (760) 744-6710*
*Fax: (760) 744-6156*
*After Hours Phone: (760) 744-6710*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**NEVES, VANESSA**
*License Type: MD*
*Provider ID: 304036*
*Provider Gender: Female*
*NPI: 1174672547*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6797*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 303872*
*Provider Gender: Male*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*

*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**POSADAS, EMERITO**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: A48980*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**QUINTERO, CAROLYN**
*License Type: MD*
*Provider ID: 303854*
*Provider Gender: Female*
*NPI: 1023033156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Afar, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-5PM*

**PEDIATRICS**

**SEBIANE, MARIA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: G71182*
*NPI: 1740295229*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# C. Primary Care Directory

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: G71182*

*NPI: 1740295229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: G71182*

*NPI: 1740295229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: G71182*

*NPI: 1740295229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: G71182*

*NPI: 1740295229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**

*License Type: MD*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: G71182*

*NPI: 1740295229*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SEBIANE, MARIA**
*License Type: MD*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: G71182*
*NPI: 1740295229*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SOCHA, TRACI**
*License Type: DO*
*Provider ID: 224843*
*Provider Gender: Female*
*NPI: 1669478616*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1582 W SAN MARCOS BLVD STE 203
SAN MARCOS, CA 92078
*Phone: (760) 744-6710*
*Fax: (760) 744-6156*
*After Hours Phone: (760) 744-6710*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:45PM*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BERNARDO, RACHELLE**
*License Type: PA*
*Provider ID: 296545*
*Provider Gender: Female*
*License Number: PA17718*
*NPI: 1821237678*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD

SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA22667*
*NPI: 1174964001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

# C. Primary Care Directory

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA21723*
*NPI: 1518133032*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*License Type: PA*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: PA21723*

*NPI: 1518133032*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*License Type: PA*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: PA21723*

*NPI: 1518133032*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*License Type: PA*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: PA21723*

*NPI: 1518133032*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*License Type: PA*

*Provider ID: 289853*

*Provider Gender: Female*

*License Number: PA21723*

*NPI: 1518133032*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*After Hours Phone: (760) 736-6767*

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*License Type: PA*

*Provider ID: 289853*

*Provider Gender: Female*
*License Number: PA21723*
*NPI: 1518133032*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*

*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*License Type: PA*
*Provider ID: 289853*
*Provider Gender: Female*
*License Number: PA51867*
*NPI: 1295147387*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PODIATRIST**

# C. Primary Care Directory

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Bengali, Hindi,*

*Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*License Type: DPM*
*Provider ID: 296545*
*Provider Gender: Male*
*License Number: DPM5542*
*NPI: 1598129223*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SAN YSIDRO**

**CARDIOVASCULAR DISEASE**

**PONCE, SONIA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A145008*
*NPI: 1164659033*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CARDIOVASCULAR DISEASE**

**PONCE, SONIA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A145008*
*NPI: 1164659033*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL,*

*SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**CELIZ, ADRIANA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95004315*
*NPI: 1972956514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**CHAUSSE CASTRO, EKATERINA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95018617*
*NPI: 1154040418*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**CHAUSSE CASTRO, EKATERINA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95018617*
*NPI: 1154040418*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, TEDAYSHIA**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: NP95003355*
*NPI: 1659730778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, TEDAYSHIA**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: NP95003355*
*NPI: 1659730778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GUADARRAMA, IGNACIO**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: NP95003671*
*NPI: 1821331174*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GUADARRAMA, IGNACIO**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: NP95003671*
*NPI: 1821331174*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**GUADARRAMA, IGNACIO**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: NP95003671*
*NPI: 1821331174*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HACINAS, REYNALDO**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: NP95003024*
*NPI: 1215304860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HACINAS, REYNALDO**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: NP95003024*
*NPI: 1215304860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# C. Primary Care Directory

3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP12112*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KANTAS, PARIS**
*License Type: NP*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: NP18661*
*NPI: 1114329612*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**KANTAS, PARIS**
*License Type: NP*

*Provider ID: 247960*
*Provider Gender: Male*
*License Number: NP18661*
*NPI: 1114329612*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**ORDINANZA, MYLENE**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95019995*
*NPI: 1265019061*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**ORDINANZA, MYLENE**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95019995*
*NPI: 1265019061*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**PITTMAN, LILIANA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95017732*
*NPI: 1326599002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**PITTMAN, LILIANA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95017732*
*NPI: 1326599002*

# C. Primary Care Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SANCHEZ, MYRNA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95003721*
*NPI: 1548614506*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SANCHEZ, MYRNA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95003721*
*NPI: 1548614506*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VAZQUEZ-ERLBECK, MARTHA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95001960*
*NPI: 1669865960*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VAZQUEZ-ERLBECK, MARTHA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95001960*
*NPI: 1669865960*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**VAZQUEZ-ERLBECK, MARTHA**
*License Type: NP*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: NP95001960*
*NPI: 1669865960*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**OCHOA, RAUL**
*License Type: DC*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: DC33693*
*NPI: 1518401827*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**OCHOA, RAUL**
*License Type: DC*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: DC33693*
*NPI: 1518401827*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CRUZ, MICHAEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A138772*
*NPI: 1265851133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CRUZ, MICHAEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A138772*
*NPI: 1265851133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**CRUZ, MICHAEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A138772*
*NPI: 1265851133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619)*

# C. Primary Care Directory

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A167529*
*NPI: 1316310840*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A157505*
*NPI: 1588197826*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A157505*
*NPI: 1588197826*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619)*

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A157505*
*NPI: 1588197826*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A157505*
*NPI: 1588197826*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**ARRIETA, NOEMI**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: 20A11153*
*NPI: 1912223496*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ARRIETA, NOEMI**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: 20A11153*
*NPI: 1912223496*
*Provider English Spoken: Y*
*Provider Language(s)*

# C. Primary Care Directory

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**BAUM, PETER**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A14949*
*NPI: 1174919971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**BAUM, PETER**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A14949*
*NPI: 1174919971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FAMILY PRACTICE**

**BORSAN, COSMIN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A17643*
*NPI: 1679060255*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Romanian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**BORSAN, COSMIN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A17643*
*NPI: 1679060255*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Romanian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**CAMPOS, MELISSA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A138474*
*NPI: 1427475318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CAMPOS, MELISSA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A138474*
*NPI: 1427475318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**
*License Type: MD*

# C. Primary Care Directory

*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A78373*
*NPI: 1295746618*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CASTILLO, STEPHANIE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A159673*
*NPI: 1902330723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**CASTILLO, STEPHANIE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A159673*
*NPI: 1902330723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**CEVALLOS, JAMES**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A55469*
*NPI: 1720181829*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CEVALLOS, JAMES**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A55469*

# C. Primary Care Directory

*NPI: 1720181829*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORONADO, MYRNA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A112627*
*NPI: 1710147566*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORONADO, MYRNA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A112627*
*NPI: 1710147566*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORONADO, MYRNA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A112627*
*NPI: 1710147566*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CORONADO, MYRNA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A112627*
*NPI: 1710147566*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DALUGDUGAN, ESTHER**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A112511*
*NPI: 1962662718*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DALUGDUGAN, ESTHER**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A112511*
*NPI: 1962662718*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DAVIS, CHARLES**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G41219*
*NPI: 1194840231*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**DAVIS, CHARLES**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G41219*
*NPI: 1194840231*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ESTRADA, JOHANNA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A127188*
*NPI: 1255698155*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ESTRADA, JOHANNA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A127188*
*NPI: 1255698155*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**HEINRICI, ALEKA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A125329*
*NPI: 1780979120*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

# C. Primary Care Directory

**HEINRICI, ALEKA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A125329*
*NPI: 1780979120*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**HENDRIX, JEFFERSON**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A32571*
*NPI: 1235142738*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HENDRIX, JEFFERSON**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A32571*
*NPI: 1235142738*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: C42207*
*NPI: 1285782151*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*

*License Number: C42207*
*NPI: 1285782151*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: C42207*
*NPI: 1285782151*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: C42207*
*NPI: 1285782151*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KAUFHOLD, ANNE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LARA, LESLEY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A173435*
*NPI: 1184112682*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM*
*M-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*

**FAMILY PRACTICE**

**LARA, LESLEY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A173435*
*NPI: 1184112682*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM*
*M-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*

**FAMILY PRACTICE**

**LEE, JOSEPH**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A164201*
*NPI: 1417480948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST ELIZABETH HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LEE, JOSEPH**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*

*License Number: A164201*
*NPI: 1417480948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST ELIZABETH HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**LEPEZ, DAVID**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A130348*
*NPI: 1205196029*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEPEZ, DAVID**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A130348*
*NPI: 1205196029*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LEUTE, ERIC**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A80832*
*NPI: 1720171507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**LEUTE, ERIC**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A80832*
*NPI: 1720171507*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**MOYA, MARY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A80185*
*NPI: 1093844417*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MOYA, MARY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A80185*
*NPI: 1093844417*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A113624*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN, CARIE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A106103*
*NPI: 1174781132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**NGUYEN, CARIE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A106103*
*NPI: 1174781132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**NIKZAD, JASON**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A12653*

*NPI: 1508121674*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**NIKZAD, JASON**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A12653*
*NPI: 1508121674*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ORTEGA, LUIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A180886*
*NPI: 1558924936*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ORTEGA, LUIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A180886*
*NPI: 1558924936*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ORTEGA, LUIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A180886*
*NPI: 1558924936*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM*

*SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: A156607*

*NPI: 1356761571*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ORTIZ, KENNETH**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: A156607*

*NPI: 1356761571*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RAJAIPOUR, NEGIN**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: A145480*

*NPI: 1508286709*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Persian*

*Cultural Competency: N*

*Hospital Affiliation: CHULA VISTA COMM HOSP*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**RAJAIPOUR, NEGIN**

*License Type: MD*

*Provider ID: 247760*

*Provider Gender: Female*

*License Number: A145480*

*NPI: 1508286709*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Persian*

*Cultural Competency: N*

*Hospital Affiliation: CHULA VISTA COMM HOSP*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3364 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RAJAIPOUR, NEGIN**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: A145480*

*NPI: 1508286709*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Persian*

*Cultural Competency: N*

*Hospital Affiliation: CHULA VISTA COMM HOSP*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**RAJAIPOUR, NEGIN**

*License Type: MD*

*Provider ID: 247760*

*Provider Gender: Female*

*License Number: A145480*

*NPI: 1508286709*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Persian*

*Cultural Competency: N*

*Hospital Affiliation: CHULA VISTA COMM HOSP*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3364 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RITTER, STEVEN**

*License Type: DO*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: 20A7435*

*NPI: 1356556021*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RITTER, STEVEN**

*License Type: DO*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: 20A7435*

*NPI: 1356556021*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

# C. Primary Care Directory

**ROJAS, SARAH**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A139169*
*NPI: 1245645076*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ROJAS, SARAH**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A139169*
*NPI: 1245645076*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ROSENBAUM, HERBERT**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A169694*
*NPI: 1922532712*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**ROSENBAUM, HERBERT**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A169694*
*NPI: 1922532712*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**SALEM, RAMSEY**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A158364*
*NPI: 1245401298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SALEM, RAMSEY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A158364*
*NPI: 1245401298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHAHTAJI, ALAN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A11087*
*NPI: 1972751089*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SHAHTAJI, ALAN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A11087*
*NPI: 1972751089*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNYDER, CHRISTOPHER**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A7502*
*NPI: 1922041235*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNYDER, CHRISTOPHER**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A7502*
*NPI: 1922041235*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**STALEY, MICHAELA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A157772*
*NPI: 1912438250*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**STALEY, MICHAELA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A157772*
*NPI: 1912438250*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SWEET, PATRICK**

# C. Primary Care Directory

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A101827*
*NPI: 1457407702*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*
*SA 8:30AM-2PM*

**FAMILY PRACTICE**

**SWEET, PATRICK**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A101827*
*NPI: 1457407702*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*
*SA 8:30AM-2PM*

**FAMILY PRACTICE**

**TALAVERA, GREGORY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A40061*
*NPI: 1740337161*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*

**FAMILY PRACTICE**

**TALAVERA, GREGORY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A40061*
*NPI: 1740337161*

# C. Primary Care Directory

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*

**FAMILY PRACTICE**

**TAN, LO FU**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: C170935*
*NPI: 1356314835*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TREJO, RAUL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A77936*
*NPI: 1174534184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TAN, LO FU**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: C170935*
*NPI: 1356314835*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TREJO, RAUL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A77936*
*NPI: 1174534184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**TREJO, RAUL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A77936*
*NPI: 1174534184*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**UTZ, JACK**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A183145*
*NPI: 1194353094*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**UTZ, JACK**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A183145*
*NPI: 1194353094*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VAN HOLLEBEKE, RACHEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A177337*
*NPI: 1497217756*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**VAN HOLLEBEKE, RACHEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A177337*
*NPI: 1497217756*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A71304*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**WEN, AKI**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A12555*
*NPI: 1205126505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**WEN, AKI**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A12555*
*NPI: 1205126505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173

# C. Primary Care Directory

*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,**
*Provider ID: 47414*
*NPI: 1558852947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1967*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,**
*Provider ID: 47414*
*NPI: 1558852947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1967*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,**
*Provider ID: 247960*
*NPI: 1952364747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*
*SA 8:30AM-2PM*

**FQHC**

**SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,**
*Provider ID: 247960*
*NPI: 1952364747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*
*SA 8:30AM-2PM*

**FQHC**

**SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,**
*Provider ID: 247760*

*NPI: 1801438239*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,**
*Provider ID: 247760*
*NPI: 1801438239*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GENERAL PRACTICE**

**REYNAGA, JOSUE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A181644*
*NPI: 1356929111*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**GENERAL PRACTICE**

**REYNAGA, JOSUE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A181644*
*NPI: 1356929111*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**GENERAL PRACTICE**

**TEJEDA, FRANCISCO**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*

# C. Primary Care Directory

*License Number: A66885*
*NPI: 1407940075*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## GENERAL PRACTICE

**TEJEDA, FRANCISCO**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A66885*
*NPI: 1407940075*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## GYNECOLOGY

**CALDERON, JORGE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A40480*
*NPI: 1407800881*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMPOC VALLEY MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## GYNECOLOGY

**CALDERON, JORGE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A40480*
*NPI: 1407800881*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMPOC VALLEY MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## INFECTIOUS DISEASE

**PROMER, KATHERINE**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A131952*
*NPI: 1306280607*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INFECTIOUS DISEASE**

**PROMER, KATHERINE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A131952*
*NPI: 1306280607*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**ALDOUS, JEANNETTE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A101017*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ALDOUS, JEANNETTE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A101017*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CHEN, TSUH-YIN**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C55563*
*NPI: 1093803520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CHEN, TSUH-YIN**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C55563*
*NPI: 1093803520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DE LA ROSA, JOSE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A49267*
*NPI: 1689646572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DE LA ROSA, JOSE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A49267*

# C. Primary Care Directory

*NPI: 1689646572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DILLON, BENEDICT**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A111118*
*NPI: 1710142708*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DILLON, BENEDICT**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A111118*
*NPI: 1710142708*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**HURST, MICHAEL**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A8081*
*NPI: 1205893104*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SUTTER TRACY COMMUNITY HOSP, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

# C. Primary Care Directory

*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**HURST, MICHAEL**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A8081*
*NPI: 1205893104*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SUTTER TRACY COMMUNITY HOSP, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*

**INTERNAL MEDICINE**

**KAUFER, DAVID**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G80107*
*NPI: 1710082789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**KAUFER, DAVID**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: G80107*
*NPI: 1710082789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**KAUFER, DAVID**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G80107*
*NPI: 1710082789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**KAUFER, DAVID**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: G80107*
*NPI: 1710082789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MAY, LOUIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A138568*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*

# C. Primary Care Directory

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MAY, LOUIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A138568*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PARK, DANIEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A99433*
*NPI: 1538371844*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**PARK, DANIEL**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A99433*
*NPI: 1538371844*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**

**POAST, JENNIFER**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: 20A8245*
*NPI: 1164435681*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**POAST, JENNIFER**

*License Type: DO*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: 20A8245*

*NPI: 1164435681*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RAMIREZ SANCHEZ, CLAUDIA**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: A160493*

*NPI: 1659720555*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RAMIREZ SANCHEZ, CLAUDIA**

*License Type: MD*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: A160493*

*NPI: 1659720555*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**REDDY, SAMATHHA**

*License Type: MD*

*Provider ID: 247760*

*Provider Gender: Female*

*License Number: A120797*

*NPI: 1659620854*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

# C. Primary Care Directory

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**REDDY, SAMATHHA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A120797*
*NPI: 1659620854*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SALERNO, MARIANA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A131021*
*NPI: 1598921645*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence St. Joseph Hospital Eureka*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SALERNO, MARIANA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A131021*
*NPI: 1598921645*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Providence St. Joseph Hospital Eureka*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SCHNEIDER-MUNOZ, MARGARITA**
*License Type: MD*
*Provider ID: 247960*

*Provider Gender: Female*
*License Number: G81461*
*NPI: 1821299520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SCHNEIDER-MUNOZ, MARGARITA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: G81461*
*NPI: 1821299520*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SHEIKH MOHAMED, AMIRA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A153975*
*NPI: 1831583079*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**SHEIKH MOHAMED, AMIRA**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: A153975*
*NPI: 1831583079*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**SY, RAMON**

*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A51843*
*NPI: 1982617403*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**SY, RAMON**

*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A51843*
*NPI: 1982617403*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VELAZQUEZ CAMARENA, MARIA**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A56153*
*NPI: 1518965714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**VELAZQUEZ CAMARENA, MARIA**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A56153*
*NPI: 1518965714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA*

*VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**
**GERIATRIC MEDICINE**

**PANDIT, IVY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C53735*
*NPI: 1891796165*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL RIVERSIDE, RIVERSIDE COUNTY REGIONAL MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 205-1950*
*After Hours Phone: (619) 205-1950*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERNAL MEDICINE**
**GERIATRIC MEDICINE**

**PANDIT, IVY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C53735*
*NPI: 1891796165*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL RIVERSIDE, RIVERSIDE COUNTY REGIONAL MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 205-1950*
*After Hours Phone: (619) 205-1950*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ANDERSON, MANDY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A113914*
*NPI: 1982812392*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ANDERSON, MANDY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A113914*
*NPI: 1982812392*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ANDERSON, MANDY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A113914*
*NPI: 1982812392*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**BERGGREN, ERICA**

*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: C158543*
*NPI: 1912159674*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**BERGGREN, ERICA**

*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: C158543*
*NPI: 1912159674*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARR, MIANDA**

*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# C. Primary Care Directory

**OBSTETRICS / GYNECOLOGY**

**CARR, MIANDA**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARR, MIANDA**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARR, MIANDA**

*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARSON, LATISA**

*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A72235*
*NPI: 1245229129*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD

# C. Primary Care Directory

SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARSON, LATISA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A72235*
*NPI: 1245229129*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DANESHMAND, SHAHRAM**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A63844*
*NPI: 1891867412*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**DANESHMAND, SHAHRAM**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A63844*
*NPI: 1891867412*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND*

*NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**DANESHMAND, SHAHRAM**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A63844*
*NPI: 1891867412*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**DANESHMAND, SHAHRAM**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A63844*
*NPI: 1891867412*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

*SA 8:30AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: 20A9907*
*NPI: 1316146996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: 20A9907*
*NPI: 1316146996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: 20A9907*
*NPI: 1316146996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

*License Type: DO*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: 20A9907*
*NPI: 1316146996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**GOLDSTEIN, EDWARD**

*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: G20087*
*NPI: 1982617494*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR,*

*SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**GOLDSTEIN, EDWARD**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: G20087*
*NPI: 1982617494*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619)*

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**OBSTETRICS / GYNECOLOGY**

**JENKINS, ENCHANTA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: C143625*
*NPI: 1285604702*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**JENKINS, ENCHANTA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*

*License Number: C143625*
*NPI: 1285604702*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A47906*
*NPI: 1437181922*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**MENDEZ, DIEGO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A47906*
*NPI: 1437181922*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SEFA-BOAKYE, KOFI**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G59670*
*NPI: 1902993660*
- *Provider English Spoken: Y*
- *Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SEFA-BOAKYE, KOFI**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G59670*
*NPI: 1902993660*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SHORT, ABIADE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A114893*
*NPI: 1750559589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SHORT, ABIADE**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A114893*
*NPI: 1750559589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619)*

*662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

**SKAF, AYHAM**
*License Type: MD*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: A120584*
*NPI: 1285888628*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ACEVEDO, SUSANA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A74960*
*NPI: 1801971569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ACEVEDO, SUSANA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A74960*
*NPI: 1801971569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD

SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BARBADILLO, FERDINAND**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A49307*
*NPI: 1982662193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BARBADILLO, FERDINAND**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A49307*
*NPI: 1982662193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*

**PEDIATRICS**

**BARBADILLO, FERDINAND**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A49307*
*NPI: 1982662193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**BARBADILLO, FERDINAND**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A49307*
*NPI: 1982662193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*

**PEDIATRICS**

**CABARLO, JEHRIB**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A8516*
*NPI: 1770661340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CABARLO, JEHRIB**
*License Type: DO*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: 20A8516*
*NPI: 1770661340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHAIT LLAMAS, LWBBA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A138938*
*NPI: 1134567530*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CHAIT LLAMAS, LWBBA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A138938*
*NPI: 1134567530*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FUJII, CINDY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: G52183*
*NPI: 1871664821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 247960*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**FUJII, CINDY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: G52183*
*NPI: 1871664821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**HERMAN, ANDREA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A72721*
*NPI: 1518970037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**HERMAN, ANDREA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A72721*
*NPI: 1518970037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**NISSAN, BETI**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A64487*
*NPI: 1396705299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**NISSAN, BETI**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A64487*
*NPI: 1396705299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**PIANSAY, MARIA CORAZON**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A93785*
*NPI: 1669680351*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**PIANSAY, MARIA CORAZON**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: A93785*
*NPI: 1669680351*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A134995*

*NPI: 1508209651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A134995*
*NPI: 1508209651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RUELAS, ROBERTO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A170141*
*NPI: 1194257386*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**RUELAS, ROBERTO**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: A170141*
*NPI: 1194257386*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SAHMS, TIMOTHY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: G51462*
*NPI: 1780697276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SAHMS, TIMOTHY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G51462*
*NPI: 1780697276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-7:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**SAHMS, TIMOTHY**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: G51462*
*NPI: 1780697276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-7:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**SAHMS, TIMOTHY**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Male*
*License Number: G51462*
*NPI: 1780697276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# C. Primary Care Directory

**PEDIATRICS**

**SHAHIDYAZDANI, TINA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A94813*
*NPI: 1891924858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SHAHIDYAZDANI, TINA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A94813*
*NPI: 1891924858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**SULLIVAN, ELISSA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A169577*
*NPI: 1790216422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**PEDIATRICS**

**SULLIVAN, ELISSA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A169577*
*NPI: 1790216422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**PEDIATRICS**

**TAYLOR, TASHA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A82187*
*NPI: 1528144433*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL*

# C. Primary Care Directory

*CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TAYLOR, TASHA**
*License Type: MD*
*Provider ID: 47414*
*Provider Gender: Female*
*License Number: A82187*
*NPI: 1528144433*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-1948*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BUCKNER, JOSEPH**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA18363*
*NPI: 1215909205*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BUCKNER, JOSEPH**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA18363*
*NPI: 1215909205*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**GI, HUNG**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA16994*
*NPI: 1023207404*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**GI, HUNG**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA16994*
*NPI: 1023207404*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HARMIS, NATASHA**
*License Type: PA*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: PA58672*
*NPI: 1013516996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**HARMIS, NATASHA**
*License Type: PA*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: PA58672*
*NPI: 1013516996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**KAMOTO, LYNN**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: PA17162*
*NPI: 1447326459*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Primary Care Directory

*PROVIDER*

**PHYSICIANS ASSISTANT**

**KAMOTO, LYNN**

*License Type: PA*

*Provider ID: 247960*

*Provider Gender: Female*

*License Number: PA17162*

*NPI: 1447326459*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PORTO MADURSKI, KRISTINE**

*License Type: PA*

*Provider ID: 47414*

*Provider Gender: Female*

*License Number: PA16269*

*NPI: 1053403782*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PORTO MADURSKI, KRISTINE**

*License Type: PA*

*Provider ID: 47414*

*Provider Gender: Female*

*License Number: PA16269*

*NPI: 1053403782*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ROSS, COLLIN**

*License Type: PA*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: PA16058*

*NPI: 1629182050*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4004 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**ROSS, COLLIN**

*License Type: PA*

*Provider ID: 247960*

*Provider Gender: Male*

*License Number: PA16058*

*NPI: 1629182050*

*Provider English Spoken: Y*

*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: PA20490*
*NPI: 1619100237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SMITH, DOUGLAS**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA12304*
*NPI: 1902016611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SMITH, DOUGLAS**
*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA12304*
*NPI: 1902016611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**PHYSICIANS ASSISTANT**

**SUNA-SITTO, MOHEEN**

*License Type: PA*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: PA22855*
*NPI: 1497196729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SUNA-SITTO, MOHEEN**

*License Type: PA*
*Provider ID: 247760*
*Provider Gender: Female*
*License Number: PA22855*
*NPI: 1497196729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TRUJILLO, MIGUEL**

*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA15656*
*NPI: 1285806794*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TRUJILLO, MIGUEL**

*License Type: PA*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: PA15656*
*NPI: 1285806794*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**

*License Type: DPM*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**
*License Type: DPM*
*Provider ID: 247760*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**
*License Type: DPM*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**MANCHEL, BRUCE**
*License Type: DPM*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**SHAUF, JOANN**

*License Type: PT*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: PT296607*
*NPI: 1134732522*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

**SHAUF, JOANN**
*License Type: PT*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: PT296607*
*NPI: 1134732522*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**HILL, CARLA**
*License Type: SP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: SP9075*
*NPI: 1043950751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SPEECH PATHOLOGIST**

**HILL, CARLA**
*License Type: SP*
*Provider ID: 247960*
*Provider Gender: Female*
*License Number: SP9075*
*NPI: 1043950751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SURGERY GENERAL**

**OKWUOSA, CHRIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A170738*
*NPI: 1114336260*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Mary Medical Center*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**SURGERY GENERAL**

**OKWUOSA, CHRIS**
*License Type: MD*
*Provider ID: 247960*
*Provider Gender: Male*
*License Number: A170738*
*NPI: 1114336260*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Mary Medical Center*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

## SANTEE

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**
*License Type: NP*
*Provider ID: 275285*
*Provider Gender: Female*
*License Number: NP95005999*
*NPI: 1316478092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 445-6687*
*After Hours Phone: (619) 445-6687*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10:30AM-11:45AM*

**CERTIFIED NURSE PRACTITIONER**

**TODD, MIKAYLA**
*License Type: NP*
*Provider ID: 275285*
*Provider Gender: Female*
*License Number: NP95005999*
*NPI: 1316478092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 445-6687*
*After Hours Phone: (619) 445-6687*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10:30AM-11:45AM*

**CHIROPRACTOR**

**KELCHNER, MATTHEW**
*License Type: DC*
*Provider ID: 275285*
*Provider Gender: Male*
*License Number: DC22733*
*NPI: 1174656755*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10:30AM-11:45AM*

**CHIROPRACTOR**

**KELCHNER, MATTHEW**
*License Type: DC*
*Provider ID: 275285*
*Provider Gender: Male*
*License Number: DC22733*
*NPI: 1174656755*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10:30AM-11:45AM*

**FAMILY PRACTICE**

**BAIOU, MOHAMED**
*License Type: MD*
*Provider ID: 275285*
*Provider Gender: Male*
*License Number: A149492*
*NPI: 1447542659*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**BAIOU, MOHAMED**
*License Type: MD*
*Provider ID: 275285*
*Provider Gender: Male*
*License Number: A149492*
*NPI: 1447542659*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,**
*Provider ID: 275285*
*NPI: 1376184911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 873-3476*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# C. Primary Care Directory

**FQHC**

**SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,**

*Provider ID: 275285*

*NPI: 1376184911*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

120 TOWN CENTER PKWY SANTEE, CA 92071

*Phone: (619) 662-4100*

*Fax: (619) 873-3476*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**CORBIN, DAVID**

*License Type: MD*

*Provider ID: 275285*

*Provider Gender: Male*

*License Number: C169916*

*NPI: 1275627200*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hungarian*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

120 TOWN CENTER PKWY SANTEE, CA 92071

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**CORBIN, DAVID**

*License Type: MD*

*Provider ID: 275285*

*Provider Gender: Male*

*License Number: C169916*

*NPI: 1275627200*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hungarian*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

120 TOWN CENTER PKWY SANTEE, CA 92071

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**GUERRA, JACQUELINE**

*License Type: MD*

*Provider ID: 275285*

*Provider Gender: Female*

*License Number: A151449*

*NPI: 1649685074*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

120 TOWN CENTER PKWY SANTEE, CA 92071

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 10:30AM-11:45AM*

**INTERNAL MEDICINE**

**GUERRA, JACQUELINE**

*License Type: MD*
*Provider ID: 275285*
*Provider Gender: Female*
*License Number: A151449*
*NPI: 1649685074*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10:30AM-11:45AM*

**PEDIATRICS**

**ARLATA, TAMANTHA**

*License Type: MD*
*Provider ID: 297749*
*Provider Gender: Female*
*NPI: 1568721934*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
*Phone: (619) 749-2150*
*Fax: (619) 456-9744*
*After Hours Phone: (619) 749-2150*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**IKE, ERICA**

*License Type: DO*
*Provider ID: 275285*
*Provider Gender: Female*
*License Number: 20A16603*
*NPI: 1821413907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST JOHNS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**IKE, ERICA**

*License Type: DO*
*Provider ID: 275285*
*Provider Gender: Female*
*License Number: 20A16603*
*NPI: 1821413907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST JOHNS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MANGINE, REGINA**

*License Type: MD*

*Provider ID: 204821*

*Provider Gender: Female*

*NPI: 1417177577*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9600 CUYAMACA ST STE 101
SANTEE, CA 92071

*Phone: (619) 749-2150*

*Fax: (619) 456-9744*

*After Hours Phone: (619) 749-2150*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**SPRING VALLEY**

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**

*License Type: NP*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: NP10943*

*NPI: 1285772392*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LEONARD, BEVERLY**

*License Type: NP*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: NP10943*

*NPI: 1285772392*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**

*License Type: NP*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: NP95013978*

*NPI: 1881727386*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

# C. Primary Care Directory

*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*License Type: NP*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BACHARACH, REBECCA**
*License Type: DO*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: 20A15459*
*NPI: 1225442643*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**BACHARACH, REBECCA**
*License Type: DO*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: 20A15459*
*NPI: 1225442643*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARDONES, ARTHUR**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A55932*
*NPI: 1962436451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619)*

# C. Primary Care Directory

*515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CARDONES, ARTHUR**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A55932*
*NPI: 1962436451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CONSTANTINO, STEPHANIE**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A149063*
*NPI: 1366824971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**CONSTANTINO, STEPHANIE**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A149063*
*NPI: 1366824971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**ROSE, PATRICIA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A76059*
*NPI: 1588677314*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF*

# C. Primary Care Directory

*SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**ROSE, PATRICIA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A76059*
*NPI: 1588677314*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**FQHC**

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,**
*Provider ID: 25735*
*NPI: 1508801069*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*Fax: (619) 462-5584*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,**
*Provider ID: 25735*
*NPI: 1508801069*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*Fax: (619) 462-5584*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN*

*AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A68463*
*NPI: 1376663831*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A113001*
*NPI: 1225231582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A163464*
*NPI: 1326531401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: A108228*
*NPI: 1629277322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A178499*
*NPI: 1033613732*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp*

*Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A72005*
*NPI: 1649208711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**

*License Type: MD*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: A164859*

*NPI: 1952751711*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**

*License Type: DO*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: 20A13958*

*NPI: 1932269198*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**

*License Type: DO*

*Provider ID: 25735*

*Provider Gender: Female*

*License Number: 20A13958*

*NPI: 1932269198*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**

*License Type: MD*

*Provider ID: 25735*

*Provider Gender: Male*

*License Number: G78814*

*NPI: 1699790634*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**JI, AMANDA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A169342*
*NPI: 1750745493*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**JI, AMANDA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A169342*
*NPI: 1750745493*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JI, AMANDA**
*License Type: MD*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: A169342*
*NPI: 1750745493*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**
*License Type: PA*
*Provider ID: 25735*

*Provider Gender: Male*
*License Number: PA21385*
*NPI: 1932335080*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM W-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**
*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: PA21385*
*NPI: 1932335080*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM W-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TRAN, TU-UYEN**
*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: PA54588*
*NPI: 1598293748*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM W-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TRAN, TU-UYEN**
*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: PA54588*
*NPI: 1598293748*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM TU 8:30AM-7PM W-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TRAN, TU-UYEN**
*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Female*
*License Number: PA54588*
*NPI: 1598293748*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM TU 8:30AM-7PM W-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, ERIC**

# C. Primary Care Directory

*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: PA55067*
*NPI: 1669756128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, ERIC**
*License Type: PA*
*Provider ID: 25735*
*Provider Gender: Male*
*License Number: PA55067*
*NPI: 1669756128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

## VALLEY CENTER

**CLINIC OUTPATIENT**

**NEIGHBORHOOD HEALTHCARE,**
*Provider ID: 304652*
*NPI: 1437335148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CLINIC OUTPATIENT**

**NEIGHBORHOOD HEALTHCARE,**
*Provider ID: 304652*
*NPI: 1437335148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**AYON MARTINEZ, CARLOS**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Male*
*License Number: A114419*
*NPI: 1154583128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**AYON MARTINEZ, CARLOS**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Male*
*License Number: A114419*
*NPI: 1154583128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9912*
*After Hours Phone: (760) 742-9912*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9912*
*After Hours Phone: (760) 742-9912*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,*

# C. Primary Care Directory

*PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SCHULTZ, JAMES**
*License Type: MD*
*Provider ID: 304652*
*Provider Gender: Male*
*License Number: G61829*
*NPI: 1356376164*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Modern Greek, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**NEIGHBORHOOD HEALTHCARE,**
*Provider ID: 304652*
*NPI: 1437335148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

**NEIGHBORHOOD HEALTHCARE,**
*Provider ID: 304652*
*NPI: 1437335148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**CRAYCHEE, LEO**
*License Type: MD*
*Provider ID: 205034*
*Provider Gender: Male*
*NPI: 1265432710*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
28714 VALLEY CENTER RD

STE L
VALLEY CENTER, CA 92082
*Phone: (760) 749-7770*
*Fax: (760) 751-9988*
*After Hours Phone: (760) 749-7770*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

## VISTA

### CERTIFIED NURSE PRACTITIONER

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289896*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**HALGEDAHL, YI TING**
*License Type: NP*
*Provider ID: 289896*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

### CERTIFIED NURSE PRACTITIONER

**KELLEHER, BRIDGET**
*License Type: NP*
*Provider ID: 289896*
*Provider Gender: Female*
*License Number: NP95003447*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

### CERTIFIED NURSE

# C. Primary Care Directory

**PRACTITIONER**

**KELLEHER, BRIDGET**

*License Type: NP*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: NP95003447*

*NPI: 1245695006*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, JINA**

*License Type: NP*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: NP95020624*

*NPI: 1225500259*

- *Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, JINA**

*License Type: NP*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: NP95020624*

*NPI: 1225500259*

- *Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**JU, NATHANIEL**

*License Type: DC*

*Provider ID: 289896*

*Provider Gender: Male*

*License Number: DC32054*

*NPI: 1972883882*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-5PM TU 10:30AM-7:30PM*

*W-F 8AM-5PM*

**CHIROPRACTOR**

**JU, NATHANIEL**

*License Type: DC*

*Provider ID: 289896*

*Provider Gender: Male*

*License Number: DC32054*

*NPI: 1972883882*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

*License Type: DO*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: 20A12958*

*NPI: 1003172016*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*License Type: MD*

*Provider ID: 289896*

*Provider Gender: Male*

*License Number: A135564*

*NPI: 1699038125*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE*

# C. Primary Care Directory

*INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*License Type: MD*

*Provider ID: 289896*

*Provider Gender: Male*

*License Number: A135564*

*NPI: 1699038125*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation:*

*SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**FQHC**

**VCC DURIAN,**

*Provider ID: 289898*

*NPI: 1851300123*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

105 DURIAN ST STE A
VISTA, CA 92083

*Phone: (844) 308-5003*

*Fax: (760) 414-3892*

*After Hours Phone: (844) 308-5003*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5PM*
*TH-F 8:30AM-5PM*

**FQHC**

**VCC DURIAN,**

*Provider ID: 289898*

*NPI: 1851300123*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

105 DURIAN ST STE A
VISTA, CA 92083

*Phone: (844) 308-5003*

*Fax: (760) 414-3892*

*After Hours Phone: (844) 308-5003*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5PM*
*TH-F 8:30AM-5PM*

**FQHC**

# C. Primary Care Directory

**VISTA COMMUNITY CLINIC GRAPEVINE,**
*Provider ID: 289896*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**FQHC**

**VISTA COMMUNITY CLINIC GRAPEVINE,**
*Provider ID: 289896*
*NPI: 1851300123*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**INTERNAL MEDICINE**

**COPELAND, ARDETH**
*License Type: MD*
*Provider ID: 310657*
*Provider Gender: Female*
*NPI: 1699704338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**AMBO, STANLEY**
*License Type: MD*
*Provider ID: 204366*
*Provider Gender: Male*
*NPI: 1891735676*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**HARTFORD, NICOLE**
*License Type: DO*

*Provider ID: 289898*
*Provider Gender: Female*
*License Number: 20A14390*
*NPI: 1346530466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE A
VISTA, CA 92083
*Phone: (844) 308-5003*
*After Hours Phone: (844) 308-5003*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**HARTFORD, NICOLE**
*License Type: DO*
*Provider ID: 289898*
*Provider Gender: Female*
*License Number: 20A14390*
*NPI: 1346530466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE A
VISTA, CA 92083
*Phone: (844) 308-5003*
*After Hours Phone: (844) 308-5003*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**KRAK, MICHAEL**
*License Type: MD*
*Provider ID: 302573*
*Provider Gender: Male*
*NPI: 1003989419*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 280
VISTA, CA 92083
*Phone: (760) 941-3630*
*Fax: (760) 941-1214*
*After Hours Phone: (760) 941-3630*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-6PM SA 9AM-1PM*

**PEDIATRICS**

**LUSCHWITZ, BRIAN**
*License Type: MD*
*Provider ID: 289896*
*Provider Gender: Male*
*License Number: A60517*
*NPI: 1205868510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM*

# C. Primary Care Directory

**PEDIATRICS**

**LUSCHWITZ, BRIAN**

*License Type: MD*
*Provider ID: 289896*
*Provider Gender: Male*
*License Number: A60517*
*NPI: 1205868510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**PEDIATRICS**

**NAUDIN, VERONICA**

*License Type: MD*
*Provider ID: 204706*
*Provider Gender: Female*
*NPI: 1093755878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**NISHIKAWA, MOENA**

*License Type: MD*
*Provider ID: 310501*
*Provider Gender: Female*
*NPI: 1407434533*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**PERTL, URSULA**

*License Type: MD*
*Provider ID: 291211*
*Provider Gender: Female*
*NPI: 1609947464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS*

# C. Primary Care Directory

*ANGELES, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-2PM*
*M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289896*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**PEDIATRICS**

**RONAN, KEVIN**
*License Type: MD*
*Provider ID: 289896*
*Provider Gender: Male*
*License Number: G77176*
*NPI: 1225017353*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**WEAVER, APRIL**
*License Type: PA*
*Provider ID: 289896*
*Provider Gender: Female*
*License Number: PA20775*
*NPI: 1063552800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-2PM*

*F 8AM-5PM*
*SA 8AM-4PM*

**PHYSICIANS ASSISTANT**

**WEAVER, APRIL**

*License Type: PA*

*Provider ID: 289896*

*Provider Gender: Female*

*License Number: PA20775*

*NPI: 1063552800*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 134 GRAPEVINE RD
  VISTA, CA 92083
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 9AM-2PM*
  *F 8AM-5PM*
  *SA 8AM-4PM*

# D. Specialist Provider Directory

**DOULA**

**ARROYO, ELYDE**

*Board Certified Specialty: No*

*FOR THE VILLAGE INC*

*,*

*Phone: (619) 657-3384*

*After Hours Phone: (619) 657-3384*

*Provider Gender: Female*

*NPI: 1841985348*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 5PM-9AM TH-F 9AM-5PM*

*Website: www.forthevillage.org*

**DOULA**

**CARAWAY, ARLENE**

*Board Certified Specialty: No*

*FOR THE VILLAGE INC*

*,*

*Phone: (619) 657-3384*

*After Hours Phone: (619) 657-3384*

*Provider Gender: Female*

*NPI: 1205662665*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 5PM-9AM TH-F 9AM-5PM*

*Website: www.forthevillage.org*

**DOULA**

**CARTER, LEXXUS**

*Board Certified Specialty: No*

*FOR THE VILLAGE INC*

*,*

*Phone: (619) 657-3384*

*After Hours Phone: (619) 657-3384*

*Provider Gender: Female*

*NPI: 1093413304*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 5PM-9AM TH-F 9AM-5PM*

*Website: www.forthevillage.org*

**DOULA**

**CENTENO QUIEL, JULISSA**

*Board Certified Specialty: No*

*FOR THE VILLAGE INC*

*,*

*Phone: (619) 657-3384*

*After Hours Phone: (619) 657-3384*

*Provider Gender: Female*

*NPI: 1871327684*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 5PM-9AM TH-F 9AM-5PM*

*Website: www.forthevillage.org*

**DOULA**

**CORLEY MILNER, JANTENEE**

*Board Certified Specialty: No*

*FOR THE VILLAGE INC*

*,*

*Phone: (619) 657-3384*

*After Hours Phone: (619) 657-3384*

*Provider Gender: Female*

*NPI: 1194423194*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**FOR THE VILLAGE INC,**

*, Phone: (619) 657-3384*
*Fax: (619) 374-2418*
*After Hours Phone: (619) 657-3384*
*NPI: 1366156952*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**GRANT, PERRIETTE**

*Board Certified Specialty: No*
*FOR THE VILLAGE INC*

*, Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1740060466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**KNOX, LATANIA**

*Board Certified Specialty: No*
*FOR THE VILLAGE INC*

*, Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1356047153*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**MERCADO FORSECK, ALEJANDRA**

*Board Certified Specialty: No*
*FOR THE VILLAGE INC*

*, Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1538996632*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**OMAE, ILANA**

*Board Certified Specialty: No*
*FOR THE VILLAGE INC*

*, Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1548024821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**VARGAS, BRIANDA**
*Board Certified Specialty: No*
*FOR THE VILLAGE INC*
,
*Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1942025721*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

**DOULA**

**WASHINGTON, KRYSTAL**
*Board Certified Specialty: No*
*FOR THE VILLAGE INC*
,
*Phone: (619) 657-3384*
*After Hours Phone: (619) 657-3384*
*Provider Gender: Female*
*NPI: 1982468427*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 5PM-9AM TH-F 9AM-5PM*
*Website: www.forthevillage.org*

## ALPINE

**CHIROPRACTOR**

**PHILLIPS, KATHERINE**
*Provider ID: 310866*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1063927242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TORRES, RANDALL**
*Provider ID: 306854*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1871696435*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## BRAWLEY

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**

*Provider ID: 256218*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
207 W LEGION RD
BRAWLEY, CA 92227
*Phone: (760) 351-3291*
*After Hours Phone: (760) 351-3291*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**
*Provider ID: 256195*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
207 W LEGION RD
BRAWLEY, CA 92227
*Phone: (760) 351-7643*
*After Hours Phone: (760) 351-7643*
*Provider Gender: Male*
*NPI: 1598979593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## CAMPO

**FAMILY PRACTICE**

**BAUM, PETER**
*Provider ID: 296383*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 824-9071*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1174919971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**CAMPOS, PRISCILLA**
*Provider ID: 314402*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 824-9071*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1508217399*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ROGERS, MATTHEW**
*Provider ID: 294843*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 824-9071*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1639606130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CARLSBAD

**CERTIFIED NURSE PRACTITIONER**

**RICE, ELIZABETH**
*Provider ID: 304664*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Female*
*NPI: 1902470537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**DERMATOLOGY**

**ZUBAIR, RAHEEL**
*Provider ID: 306519*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD STE 120
CARLSBAD, CA 92011
*Phone: (760) 448-4484*
*Fax: (760) 448-4404*
*After Hours Phone: (760) 448-4484*
*Provider Gender: Male*
*NPI: 1326493024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**FAMILY PRACTICE**

**CHAVEZ SANTOS, MARIA**
*Provider ID: 307651*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1780061440*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268654*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1820 MARRON RD STE 102
CARLSBAD, CA 92008
*Phone: (760) 434-0125*
*Fax: (760) 434-4531*
*After Hours Phone: (760) 434-0125*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEPHROLOGY**

**HAMILTON, ROSS**
*Provider ID: 310675*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Male*
*NPI: 1538587852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**DROKER, BRIAN**
*Provider ID: 306953*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 270-9534*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Male*
*NPI: 1801112669*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*W 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OTOLARYNGOLOGY**

**CHANG, EDWARD**
*Provider ID: 309534*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2390 FARADAY AVE
CARLSBAD, CA 92008
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Male*
*NPI: 1528146008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OTOLARYNGOLOGY**

**DONALDSON, CHADWICK**
*Provider ID: 268146*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2390 FARADAY AVE
CARLSBAD, CA 92008
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Male*
*NPI: 1891743910*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, TEMECULA VALLEY HOSPITAL INC, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**HERMANSON, KATHLEEN**
*Provider ID: 269004*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Female*
*NPI: 1598160343*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**INOCELDA, ANDREW**
*Provider ID: 269089*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Male*
*NPI: 1497950208*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**SHIMIZU, KELSIE**
*Provider ID: 296819*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2390 FARADAY AVE
CARLSBAD, CA 92008
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*

*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1972107811*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: USC Arcadia Hospital, KECK HOSPITAL OF USC, USC KENNETH NORRIS JR CANCER HOSPITAL, USC VERDUGO HILLS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**WILAND, WINONA**
*Provider ID: 296809*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2390 FARADAY AVE
CARLSBAD, CA 92008
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1043967383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**AMBROSE, CHRISTOPHER**
*Provider ID: 248010*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3070 MADISON ST
CARLSBAD, CA 92008
*Phone: (760) 434-6100*
*Fax: (760) 471-5139*
*After Hours Phone: (760) 591-7750*
*Provider Gender: Male*
*NPI: 1114977535*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 8\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-5PM*
*W 7AM-7PM*
*TH 7AM-5PM*
*F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**MCGEE, JACQUELINE**
*Provider ID: 252472*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3070 MADISON ST
CARLSBAD, CA 92008
*Phone: (760) 434-6100*
*Fax: (760) 434-4583*
*After Hours Phone: (760) 434-6100*
*Provider Gender: Female*
*NPI: 1194217133*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 8\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**SURGERY NEUROLOGICAL**

**BEN-HAIM, SHARONA**
*Provider ID: 244069*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942469663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BLASKIEWICZ, DONALD**
*Provider ID: 270283*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1215176839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 299996*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**PHAM, MARTIN**
*Provider ID: 203510*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
*Phone: (619) 543-5540*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Male*
*NPI: 1609130921*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

## CHULA VISTA

### ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**

*Provider ID: 299879*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

340 4TH AVE STE 19
CHULA VISTA, CA 91910

*Phone: (619) 761-5308*

*Fax: (619) 591-1910*

*After Hours Phone: (619) 761-5308*

*Provider Gender: Male*

*NPI: 1689092470*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\100*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**

*Provider ID: 300088*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

340 4TH AVE STE 19
CHULA VISTA, CA 91910

*Phone: (619) 761-5308*

*Fax: (619) 591-1910*

*After Hours Phone: (619) 761-5308*

*Provider Gender: Male*

*NPI: 1689092470*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### CERTIFIED ACUPUNCTURIST

**LAM, KHANH**

*Provider ID: 295381*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

340 4TH AVE STE 19
CHULA VISTA, CA 91910

*Phone: (619) 761-5308*

*Fax: (619) 591-1910*

*After Hours Phone: (619) 761-5308*

*Provider Gender: Male*

*NPI: 1649594979*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, French, Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### CERTIFIED ACUPUNCTURIST

**WILCOX, WENONAH**

*Provider ID: 290591*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*Fax: (619) 425-1184*

*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*

*NPI: 1598037178*

*Provider English Spoken: Y*

*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ARMSTON, LINDSEY**
*Provider ID: 309664*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1841851375*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CARRION-GELABERT, ANA**
*Provider ID: 302402*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1023178233*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CELIZ, ADRIANA**
*Provider ID: 314438*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
880 3RD AVE STE A
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 618-2035*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1972956514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DE DIOS, SARAH JANE**
*Provider ID: 302418*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*

*Fax: (619) 369-4880*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1528632742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DE LA CRUZ, ALEKSANDRYA**
*Provider ID: 309695*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1336625524*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 308352*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 3RD AVE STE 2220
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KEUM, SARAH**
*Provider ID: 312108*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 311
CHULA VISTA, CA 91910
*Phone: (619) 371-9156*
*Fax: (619) 872-0997*
*After Hours Phone: (619) 371-9156*
*Provider Gender: Female*
*NPI: 1053183525*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

# D. Specialist Provider Directory

**LANE, KIMBERLY**
*Provider ID: 301598*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
752 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
*Phone: (619) 397-4500*
*Fax: (858) 429-7931*
*After Hours Phone: (619) 397-4500*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED NURSE PRACTITIONER

**TRESSLAR, PERI**
*Provider ID: 312028*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
*Phone: (619) 567-7007*
*Fax: (619) 567-7775*
*After Hours Phone: (619) 567-7007*
*Provider Gender: Female*
*NPI: 1548021512*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## EMERGENCY MEDICINE

**PHAM, LILY**
*Provider ID: 304935*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1811423072*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## ENDOCRINOLOGY METABOLISM DIABETES

**CARRILLO, MARITZA**
*Provider ID: 290970*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1649628587*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BECERRA, MAURA**
*Provider ID: 313437*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1710561279*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SPAK, DARYL**
*Provider ID: 310870*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1285128025*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*Provider ID: 299164*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**CHAVEZ, LUIS**
*Provider ID: 311342*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
296 H ST STE 301
CHULA VISTA, CA 91910
*Phone: (619) 416-3510*
*Fax: (619) 243-3216*
*After Hours Phone: (619) 416-3510*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS*

*MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**WIENER, GREGORY**
*Provider ID: 257480*
*Board Certified Specialty: Yes*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
*Phone: (619) 585-8883*
*Fax: (619) 585-0166*
*After Hours Phone: (619) 585-8883*
*Provider Gender: Male*
*NPI: 1811099534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**WIENER, GREGORY**
*Provider ID: 290741*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
*Phone: (619) 585-8883*
*Fax: (619) 585-0166*
*After Hours Phone: (619) 585-8883*
*Provider Gender: Male*
*NPI: 1811099534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268688*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
310 3RD AVE STE C11
CHULA VISTA, CA 91910
*Phone: (619) 426-0841*
*Fax: (619) 426-9197*
*After Hours Phone: (619) 426-0841*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268651*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
310 3RD AVE STE C11
CHULA VISTA, CA 91910
*Phone: (619) 426-0841*
*Fax: (619) 426-9197*
*After Hours Phone: (619) 426-0841*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEMATOLOGY / ONCOLOGY**

**KANDAHARI, MASOOM**
*Provider ID: 315278*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 311
CHULA VISTA, CA 91910
*Phone: (619) 371-9156*
*Fax: (619) 872-0997*
*After Hours Phone: (619) 371-9156*
*Provider Gender: Male*
*NPI: 1467448100*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 245576*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 309249*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
865 3RD AVE STE 133
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**NAGHI, JESSE**
*Provider ID: 247625*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
*Phone: (619) 867-0557*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 867-0557*
*Provider Gender: Male*
*NPI: 1386896736*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**SHEREV, DIMITRI**
*Provider ID: 268950*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
*Phone: (619) 582-4490*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 582-4490*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 296051*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*

*After Hours Phone: (619) 616-2100*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 295846*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 309098*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
865 3RD AVE STE 133
CHULA VISTA, CA 91911
*Phone: (760) 294-0480*
*Fax: (760) 294-0481*
*After Hours Phone: (760) 294-0480*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**MATERNAL AND FETAL MEDICINE**

**MCCULLOUGH, DEIRDRE**
*Provider ID: 277263*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1639153018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296993*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294653*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 264687*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## MATERNAL AND FETAL MEDICINE

**WESTERMANN, MELISSA**
*Provider ID: 242523*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEONATAL / PERINATAL MEDICINE

**FLEMING, SARAH**
*Provider ID: 205646*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
435 H ST
CHULA VISTA, CA 91910
*Phone: (619) 691-7000*
*After Hours Phone: (619) 691-7000*
*Provider Gender: Female*
*NPI: 1679809826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEONATAL / PERINATAL MEDICINE

**MATOBA, NANA**
*Provider ID: 297976*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
435 H ST
CHULA VISTA, CA 91910
*Phone: (619) 691-7000*
*Fax: (619) 260-7055*
*After Hours Phone: (619) 691-7000*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NIEMI, ANNA-KAISA**

*Provider ID: 262159*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

435 H ST
CHULA VISTA, CA 91910

*Phone: (858) 966-5818*

*Fax: (858) 966-7483*

*After Hours Phone: (858) 966-5818*

*Provider Gender: Female*

*NPI: 1497941397*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**

*Provider ID: 301823*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

435 H ST
CHULA VISTA, CA 91910

*Phone: (619) 691-7000*

*Fax: (619) 260-7055*

*After Hours Phone: (619) 691-7000*

*Provider Gender: Female*

*NPI: 1003260951*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SPEZIALE, MARK**

*Provider ID: 304829*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

435 H ST
CHULA VISTA, CA 91910

*Phone: (619) 691-7000*

*Fax: (619) 260-7055*

*After Hours Phone: (619) 691-7000*

*Provider Gender: Male*

*NPI: 1801978143*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GUPTA, MONIKA**
*Provider ID: 307937*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1922243401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**HOSSEIN ZADEH MALEKI, ANA**
*Provider ID: 304999*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 485-5440*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1316471485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Persian*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MANDEVILLE, ROSS**
*Provider ID: 309932*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Male*
*NPI: 1205084183*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS MEMORIAL HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MAREK, MAKSYM**
*Provider ID: 306707*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Male*
*NPI: 1881182079*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MOHAMMAD, AHMAD SHAH**
*Provider ID: 127244*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
750 MEDICAL CENTER CT STE 6
CHULA VISTA, CA 91911
*Phone: (619) 337-7900*
*Fax: (619) 337-7902*
*After Hours Phone: (619) 337-7900*
*Provider Gender: Male*
*NPI: 1902973472*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Farsi, French, German, Pashto, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**SORIA LOPEZ, JOSE**
*Provider ID: 295744*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 485-5440*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Male*
*NPI: 1225474034*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**ATIGA, SCHUBERT**
*Provider ID: 268953*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
*Phone: (619) 482-8406*
*Fax: (619) 482-6656*

*After Hours Phone: (619) 482-8406*
*Provider Gender: Male*
*NPI: 1033138714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM F 8AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OBSTETRICS / GYNECOLOGY

**ATIGA, SCHUBERT**
*Provider ID: 290331*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
*Phone: (619) 482-8406*
*Fax: (619) 482-6656*
*After Hours Phone: (619) 482-8406*
*Provider Gender: Male*
*NPI: 1033138714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM F 8AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OCCUPATIONAL THERAPIST

**MORRIS, SHEILA**
*Provider ID: 268926*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1020 TIERRA DEL REY STE A
CHULA VISTA, CA 91910
*Phone: (619) 585-7104*
*Fax: (619) 585-7106*
*After Hours Phone: (619) 585-7104*
*Provider Gender: Female*
*NPI: 1689039877*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM SA 7AM-2PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## OPHTHALMOLOGY

**GOLDMAN, DAVID**
*Provider ID: 308450*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1629185467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OPHTHALMOLOGY

**GOLDMAN, DAVID**
*Provider ID: 308604*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1629185467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OPHTHALMOLOGY

**SHAH, SONA**
*Provider ID: 314736*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Female*
*NPI: 1750943403*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KECK HOSPITAL OF USC, USC KENNETH NORRIS JR CANCER HOSPITAL, USC VERDUGO HILLS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OPHTHALMOLOGY

**SHUMWAY, CALEB**
*Provider ID: 310744*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1225698814*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## OPTOMETRIST

**AMINI, AFSANEH**
*Provider ID: 313446*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 THIRD AVE
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1790099943*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**CHAIN, PEI CHI**
*Provider ID: 297621*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 422-2025*
*After Hours Phone: (619) 422-1471*
*Provider Gender: Female*
*NPI: 1730676727*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**HO, AMIEE**
*Provider ID: 297633*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 422-0450*
*After Hours Phone: (619) 422-1471*
*Provider Gender: Female*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 304830*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 304537*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
835 3RD AVE STE A
CHULA VISTA, CA 91911
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC,*

*IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**

*Provider ID: 306902*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

835 3RD AVE STE A
CHULA VISTA, CA 91911

*Phone: (619) 425-7755*

*Fax: (619) 425-2138*

*After Hours Phone: (619) 425-7755*

*Provider Gender: Female*

*NPI: 1669825667*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**RICHARDSON, JULIA**

*Provider ID: 297645*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

342 F ST
CHULA VISTA, CA 91910

*Phone: (619) 422-1471*

*Fax: (619) 422-2025*

*After Hours Phone: (619) 422-1471*

*Provider Gender: Female*

*NPI: 1770154528*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**SCOVILL, ALEXANDRA**

*Provider ID: 297625*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

342 F ST
CHULA VISTA, CA 91910

*Phone: (619) 422-1471*

*Fax: (619) 422-0114*

*After Hours Phone: (619) 422-1471*

*Provider Gender: Female*

*NPI: 1184146094*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**

*Provider ID: 310877*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

*Phone: (619) 662-4100*

*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*

*NPI: 1053841478*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**

*Provider ID: 310536*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

835 3RD AVE STE A
CHULA VISTA, CA 91911

*Phone: (619) 425-7755*

*Fax: (619) 425-2138*

*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 312234*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
835 3RD AVE STE A
CHULA VISTA, CA 91911
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**CHANG, EDWARD**
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
577 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 426-5181*
*Fax: (619) 426-0714*
*After Hours Phone: (619) 426-5181*
*Provider Gender: Male*
*NPI: 1528146008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PEDIATRIC EMERGENCY MEDICINE**

**AGHILI, ROXANA**
*Provider ID: 303782*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CRAWFORD, MICHAEL**
*Provider ID: 311161*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202

CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1366622078*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**
*Provider ID: 275787*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1316162324*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**
*Provider ID: 295669*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHERER, KIMBERLY**
*Provider ID: 311933*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1992202964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 289411*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**ROWHANI, NAGHMEH**
*Provider ID: 306065*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1992876759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\17*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICAL MEDICINE / REHABILITATION**

**RICHARDSON, HENRY**
*Provider ID: 295275*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
340 4TH AVE STE 19

CHULA VISTA, CA 91910
*Phone: (619) 761-5308*
*Fax: (619) 591-1910*
*After Hours Phone: (619) 761-5308*
*Provider Gender: Male*
*NPI: 1407052459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**GI, HUNG**
*Provider ID: 302126*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1023207404*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**GUTH, CARA**
*Provider ID: 299110*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
480 4TH AVE STE 501
CHULA VISTA, CA 91910
*Phone: (619) 425-9510*
*Fax: (858) 455-7197*
*After Hours Phone: (619) 425-9510*
*Provider Gender: Female*
*NPI: 1992177182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*Provider ID: 265072*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 434-0204*
*Fax: (619) 337-0191*
*After Hours Phone: (619) 434-0204*
*Provider Gender: Female*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

# D. Specialist Provider Directory

**INDA, PRISCILLA**
*Provider ID: 309072*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
429 BROADWAY
CHULA VISTA, CA 91910
*Phone: (619) 434-0204*
*Fax: (619) 337-0191*
*After Hours Phone: (619) 434-0204*
*Provider Gender: Female*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**MARISCAL, MIGUEL**
*Provider ID: 308408*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 3RD AVE STE 2200
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1760508923*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**
*Provider ID: 295828*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2452 FENTON ST STE C203
CHULA VISTA, CA 91914
*Phone: (619) 600-5309*
*Fax: (619) 655-4700*
*After Hours Phone: (619) 600-5309*
*Provider Gender: Male*
*NPI: 1922505775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**
*Provider ID: 295945*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2452 FENTON ST STE C101
CHULA VISTA, CA 91914
*Phone: (619) 600-5309*
*Fax: (619) 655-4700*
*After Hours Phone: (619) 600-5309*
*Provider Gender: Male*
*NPI: 1922505775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**
*Provider ID: 268744*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2452 FENTON ST STE C203
CHULA VISTA, CA 91914
*Phone: (619) 600-5309*
*Fax: (619) 655-4700*
*After Hours Phone: (619) 600-5309*
*Provider Gender: Male*
*NPI: 1922505775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**BRAZIER, SETH**
*Provider ID: 306399*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
*Phone: (619) 880-5057*
*Fax: (858) 485-1515*
*After Hours Phone: (619) 880-5057*
*Provider Gender: Male*
*NPI: 1033554324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308636*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
345 F ST STE 100
CHULA VISTA, CA 91910
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**

*Provider ID: 308211*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
345 F ST STE 100
CHULA VISTA, CA 91910
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 129545*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
345 F ST STE 100
CHULA VISTA, CA 91910
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1689069874*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 312175*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
345 F ST STE 100
CHULA VISTA, CA 91910
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1689069874*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 296655*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
*Phone: (619) 631-4033*

*Fax: (619) 880-5057*
*After Hours Phone: (619) 631-4033*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PSYCHOLOGIST**

**BAYLON, ALDO**
*Provider ID: 290243*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1649429150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**CELAYA, PATRICIA**
*Provider ID: 294875*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1952656902*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GOULD, HILARY**
*Provider ID: 290467*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1104297696*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**WIJAYARATNE, IMANIE**
*Provider ID: 290092*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 245-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1932358355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**RADIATION ONCOLOGY**

**CARMONA, RUBEN**
*Provider ID: 303101*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
*Phone: (858) 939-5010*
*Fax: (619) 740-8499*
*After Hours Phone: (858) 939-5010*
*Provider Gender: Male*
*NPI: 1275929242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**COLEMAN, LORI**
*Provider ID: 206393*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
*Phone: (619) 502-5851*
*Fax: (619) 502-5865*
*After Hours Phone: (619) 502-5851*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 19\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED DIETITIAN / NUTRITIONIST**

**LEWIS, KATHY**
*Provider ID: 311656*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
340 4TH AVE STE 4
CHULA VISTA, CA 91910
*Phone: (619) 427-1144*
*Fax: (619) 427-1185*
*After Hours Phone: (619) 427-1144*
*Provider Gender: Female*
*NPI: 1790304822*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED DIETITIAN /**

# D. Specialist Provider Directory

## NUTRITIONIST

**LEWIS, KATHY**

*Provider ID: 312557*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

855 3RD AVE STE 2210
CHULA VISTA, CA 91911

*Phone: (619) 427-1144*

*Fax: (619) 427-1185*

*After Hours Phone: (619) 427-1144*

*Provider Gender: Female*

*NPI: 1790304822*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## REGISTERED DIETITIAN / NUTRITIONIST

**LEWIS, KATHY**

*Provider ID: 313088*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

855 3RD AVE STE 2210
CHULA VISTA, CA 91911

*Phone: (619) 427-1144*

*Fax: (619) 427-1185*

*After Hours Phone: (619) 427-1144*

*Provider Gender: Female*

*NPI: 1790304822*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## REGISTERED PHYSICAL THERAPIST

**CHENG, BRANDON**

*Provider ID: 310337*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

386 E H ST STE 203
CHULA VISTA, CA 91910

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1336894724*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-1PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## REGISTERED PHYSICAL THERAPIST

**CHENG, BRANDON**

*Provider ID: 304529*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1336894724*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-1PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**REGISTERED PHYSICAL THERAPIST**

**CHENG, BRANDON**

*Provider ID: 307786*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1336894724*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-1PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CHUNG, PETER**

*Provider ID: 314477*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1023837887*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM*
*F 7AM-12PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**CHUNG, PETER**

*Provider ID: 314478*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

386 E H ST STE 203
CHULA VISTA, CA 91910

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1023837887*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM*
*F 7AM-12PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**JAIN, ALEXANDRA**

*Provider ID: 305150*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

880 3RD AVE STE A
CHULA VISTA, CA 91911

*Phone: (619) 205-4585*

*Fax: (619) 271-3183*

*After Hours Phone: (619) 205-4585*

*Provider Gender: Female*

*NPI: 1063170603*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 55\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 299889*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 310382*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**
*Provider ID: 310746*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1699357525*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**
*Provider ID: 287100*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1699357525*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**
*Provider ID: 301380*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1699357525*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305013*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 310381*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305014*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 301994*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 286782*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 310722*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**PASCUAL, CHRISTOPHER**
*Provider ID: 314203*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619)*

*482-3000*
*Provider Gender: Male*
*NPI: 1093328064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**PASCUAL, CHRISTOPHER**
*Provider ID: 314202*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1093328064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 129142*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 310371*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 301108*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**
*Provider ID: 305424*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1760194302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**
*Provider ID: 301418*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1760194302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**
*Provider ID: 310409*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1760194302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**

*Provider ID: 310419*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**VAISMAN, SAMANTHA**
*Provider ID: 311836*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457022071*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310405*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310406*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**
*Provider ID: 301532*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913

*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1063046878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## RHEUMATOLOGY

**CHWA, JEFFREY**
*Provider ID: 268780*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
*Phone: (619) 623-3000*
*Fax: (619) 623-3001*
*After Hours Phone: (619) 623-3000*
*Provider Gender: Male*
*NPI: 1285989236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## SPEECH PATHOLOGIST

**DURNAN, CASSANDRA**
*Provider ID: 307884*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
333 H ST STE 5000
CHULA VISTA, CA 91910
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SURGERY GENERAL

**CASILLAS BERUMEN, SERGIO**
*Provider ID: 304607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
*Phone: (619) 576-7007*
*Fax: (619) 567-7775*
*After Hours Phone: (619) 576-7007*
*Provider Gender: Male*
*NPI: 1437470762*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

## CORONADO

### CERTIFIED NURSE PRACTITIONER

**LANE, KIMBERLY**

*Provider ID: 301599*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

230 PROSPECT PL STE 210
CORONADO, CA 92118

*Phone: (619) 299-0670*

*Fax: (858) 429-7929*

*After Hours Phone: (619) 299-0670*

*Provider Gender: Female*

*NPI: 1457670119*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### HEARING AID DEALER / SUPPLIER

**DAVIS, KELLE**

*Provider ID: 268655*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

801 ORANGE AVE
CORONADO, CA 92118

*Phone: (619) 437-8154*

*Fax: (310) 989-3092*

*After Hours Phone: (619) 437-8154*

*Provider Gender: Female*

*NPI: 1902853344*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

### SURGERY GENERAL

**BORTZ, PASCAL**

*Provider ID: 313996*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

230 PROSPECT PL STE 340
CORONADO, CA 92118

*Phone: (858) 457-4917*

*Fax: (858) 646-0019*

*After Hours Phone: (858) 457-4917*

*Provider Gender: Male*

*NPI: 1821330796*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

## EL CAJON

### CERTIFIED ACUPUNCTURIST

**CRAFT, KEVIN**

*Provider ID: 290945*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

855 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 440-2751*

*Fax: (360) 462-2746*

*After Hours Phone: (619) 440-2751*

*Provider Gender: Male*

*NPI: 1659745610*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: TU-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**CERTIFIED NURSE PRACTITIONER**

**ALVA, WENDY**

*Provider ID: 311724*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

5442 SYCUAN RD
EL CAJON, CA 92019

*Phone: (619) 445-0707*

*Fax: (619) 445-9764*

*After Hours Phone: (619) 445-0707*

*Provider Gender: Female*

*NPI: 1023085560*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**ARMSTON, LINDSEY**

*Provider ID: 312119*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

892 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 737-1117*

*Fax: (619) 880-8535*

*After Hours Phone: (619) 737-1117*

*Provider Gender: Female*

*NPI: 1841851375*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CARRION-GELABERT, ANA**

*Provider ID: 312136*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

892 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 737-1117*

*Fax: (619) 880-8535*

*After Hours Phone: (619) 737-1117*

*Provider Gender: Female*

*NPI: 1023178233*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DE DIOS, SARAH JANE**

*Provider ID: 312113*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

892 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 737-1117*

*Fax: (619) 880-8535*

*After Hours Phone: (619) 737-1117*

*Provider Gender: Female*

*NPI: 1528632742*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DE LA CRUZ, ALEKSANDRYA**
*Provider ID: 312156*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Female*
*NPI: 1336625524*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DOWNEY, NANCY**
*Provider ID: 311826*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1578051017*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, CATALINA**
*Provider ID: 311391*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1659148104*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
*Provider ID: 302295*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1164812293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**NGUYEN, VANESSA**
*Provider ID: 312138*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Female*
*NPI: 1376219246*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PIRTLE, KEYSHONE**
*Provider ID: 284244*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5442 SYCUAN RD
EL CAJON, CA 92019
*Phone: (619) 445-0707*
*Fax: (619) 445-9764*
*After Hours Phone: (619) 445-0707*
*Provider Gender: Male*
*NPI: 1417567827*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 308218*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
222 W MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 579-5115*
*Fax: (619) 749-6174*
*After Hours Phone: (619) 579-5115*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 306321*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
222 W MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 579-5115*
*Fax: (619) 749-6174*
*After Hours Phone: (619) 579-5115*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**CHAVEZ, LUIS**
*Provider ID: 311341*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
*Phone: (619) 416-3510*
*Fax: (619) 243-3216*
*After Hours Phone: (619) 416-3510*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**NOVO, MEGAN**
*Provider ID: 296067*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
*Phone: (619) 266-3332*
*Fax: (619) 266-6000*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1770961971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268692*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1767 E MAIN ST
EL CAJON, CA 92021
*Phone: (619) 440-6516*
*Fax: (619) 440-6547*
*After Hours Phone: (619) 440-6516*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268650*

*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1767 E MAIN ST
EL CAJON, CA 92021
*Phone: (619) 440-6516*
*Fax: (619) 440-6547*
*After Hours Phone: (619) 440-6516*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## INTERNAL MEDICINE

**MAY, LOUIS**
*Provider ID: 294916*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERNAL MEDICINE

**MICHAEL, RAMI**
*Provider ID: 294908*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1467871673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERVENTIONAL CARDIOLOGY

**MOHAMEDALI, BURHAN**
*Provider ID: 309247*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1625 E MAIN ST STE 201
EL CAJON, CA 92021
*Phone: (619) 486-6512*
*Fax: (619) 486-6470*
*After Hours Phone: (619) 486-6512*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

# D. Specialist Provider Directory

**INTERVENTIONAL CARDIOLOGY**

**SHEREV, DIMITRI**

*Provider ID: 302988*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1380 EL CAJON BLVD
EL CAJON, CA 92020

*Phone: (619) 867-0557*

*Fax: (619) 867-0558*

*After Hours Phone: (619) 867-0557*

*Provider Gender: Male*

*NPI: 1154323996*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**

*Provider ID: 309095*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1625 E MAIN ST STE 201
EL CAJON, CA 92021

*Phone: (619) 486-6512*

*Fax: (619) 486-6470*

*After Hours Phone: (619) 486-6512*

*Provider Gender: Female*

*NPI: 1811307051*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 15\99*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**

*Provider ID: 295843*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1625 E MAIN ST STE 201
EL CAJON, CA 92021

*Phone: (619) 486-6512*

*Fax: (619) 486-6470*

*After Hours Phone: (619) 486-6512*

*Provider Gender: Female*

*NPI: 1811307051*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 15\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEUROLOGY**

**GUPTA, MONIKA**

*Provider ID: 312122*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Female*
*NPI: 1922243401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**HOSSEIN ZADEH MALEKI, ANA**
*Provider ID: 312128*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Female*
*NPI: 1316471485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Persian*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MANDEVILLE, ROSS**
*Provider ID: 312140*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Male*
*NPI: 1205084183*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS MEMORIAL HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MAREK, MAKSYM**
*Provider ID: 312137*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Male*
*NPI: 1881182079*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Tagalog*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 9AM-12:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**SORIA LOPEZ, JOSE**
*Provider ID: 312118*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
892 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 737-1117*
*Fax: (619) 880-8535*
*After Hours Phone: (619) 737-1117*
*Provider Gender: Male*
*NPI: 1225474034*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 306904*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
231 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 310538*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
231 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 312236*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*

231 W MAIN ST
EL CAJON, CA 92020
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PEDIATRICS**

**MURADIAN-MOORE, SARAH**
*Provider ID: 311838*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (833) 867-4642*
*Fax: (360) 462-2746*
*After Hours Phone: (833) 867-4642*
*Provider Gender: Female*
*NPI: 1700205895*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**ACOSTA, ANGELICA**
*Provider ID: 310413*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1952513517*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*Provider ID: 265073*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
*Phone: (619) 930-9404*
*Fax: (619) 930-9426*
*After Hours Phone: (619) 930-9404*
*Provider Gender: Female*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**LE, TAYLOR**
*Provider ID: 304574*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE

EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1396478400*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RAMOS, JACQUELYN**
*Provider ID: 301106*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1003515131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**ARAIZA, ERNESTINA**
*Provider ID: 290286*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1568608636*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**WHEELER, KIM**
*Provider ID: 302144*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 785-3356*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1700577434*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 11\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CAMPA, PATRICIA**
*Provider ID: 312107*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
860 JAMACHA RD STE 203
EL CAJON, CA 92019
*Phone: (619) 573-6373*
*Fax: (619) 378-6578*
*After Hours Phone: (619) 573-6373*
*Provider Gender: Female*
*NPI: 1528079357*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CAMPA, PATRICIA**
*Provider ID: 302398*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
860 JAMACHA RD STE 203
EL CAJON, CA 92019
*Phone: (619) 573-6373*
*Fax: (619) 378-6578*
*After Hours Phone: (619) 573-6373*
*Provider Gender: Female*
*NPI: 1528079357*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**MORRIS, CHAD**
*Provider ID: 312164*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
860 JAMACHA RD STE 203
EL CAJON, CA 92019
*Phone: (619) 573-6373*
*Fax: (619) 378-6578*
*After Hours Phone: (619) 573-6373*
*Provider Gender: Male*
*NPI: 1841307063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**MORRIS, CHAD**
*Provider ID: 302403*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
860 JAMACHA RD STE 203
EL CAJON, CA 92019
*Phone: (619) 573-6373*
*Fax: (619) 378-6578*
*After Hours Phone: (619) 573-6373*
*Provider Gender: Male*
*NPI: 1841307063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**WILKINS, MARJORIE**
*Provider ID: 313820*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
860 JAMACHA RD STE 203
EL CAJON, CA 92019
*Phone: (619) 573-6373*
*Fax: (619) 378-6578*
*After Hours Phone: (619) 573-6373*
*Provider Gender: Female*
*NPI: 1699781062*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## EL CENTRO

### ANESTHESIOLOGY

**HYLTON, DIANA**
*Provider ID: 277248*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

### ANESTHESIOLOGY

**KRAUSE, MARTIN**
*Provider ID: 287653*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417243239*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

### ANESTHESIOLOGY

**MINOKADEH, ANUSHIRVAN**
*Provider ID: 277351*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053339093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**RODRIGUEZ-MINETTE, JESSICA**
*Provider ID: 277410*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164809950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PITTMAN, LILIANA**
*Provider ID: 285963*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1326599002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TABAREZ, NORMA**
*Provider ID: 272979*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (866) 803-2262*
*After Hours Phone: (866) 803-2262*
*Provider Gender: Female*
*NPI: 1538535570*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HORNBEAK, KIRSTEN**
*Provider ID: 240024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (760) 339-7100*
*After Hours Phone: (760) 339-7100*
*Provider Gender: Female*
*NPI: 1205214442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

## EMERGENCY MEDICINE

**HUTCHISON, HEIDI**

*Provider ID: 272661*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (760) 339-7100*

*Fax: (760) 352-7612*

*After Hours Phone: (760) 339-7100*

*Provider Gender: Female*

*NPI: 1417483587*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: ADVENTIST HEALTH SIERRA VISTA, TWIN CITIES COMMUNITY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## EMERGENCY MEDICINE

**RUDOLF, FRANCES**

*Provider ID: 240161*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (760) 339-7000*

*After Hours Phone: (760) 339-7000*

*Provider Gender: Female*

*NPI: 1821487430*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## EMERGENCY MEDICINE

**TANAKA, HIDEAKI**

*Provider ID: 239824*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 826-8273*

*After Hours Phone: (800) 826-8273*

*Provider Gender: Male*

*NPI: 1124280730*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 8AM-8PM*
*M-F 8AM-5PM*
*SA 8AM-8PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## INFECTIOUS DISEASE

**AKRAMI, KEVAN**

*Provider ID: 277342*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1225364052*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR,*

*SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**SWEENEY, DANIEL**
*Provider ID: 277369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497892954*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AMANN, CHRISTOPHER**
*Provider ID: 277245*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134326895*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 277388*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

# D. Specialist Provider Directory

**CRITICAL CARE MEDICINE**

**GOWDA, ASHWIN**

*Provider ID: 277348*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1366736092*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

---

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**PAGE, BRADY**

*Provider ID: 307660*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1528557550*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

---

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**RAMNATH, VENKTESH**

*Provider ID: 277358*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (760) 339-7202*

*After Hours Phone: (760) 339-7202*

*Provider Gender: Male*

*NPI: 1215911730*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Hindi, Kannada, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR, HEALDSBURG HOSPITAL, Providence Redwood Memorial Hospital, Providence Redwood Memorial Hospital, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

---

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**

*Provider ID: 277391*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**WARDI, GABRIEL**
*Provider ID: 277341*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (760) 339-7202*
*After Hours Phone: (760) 339-7202*
*Provider Gender: Male*
*NPI: 1720346083*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**LEVERONE, NICHOLAS**
*Provider ID: 313306*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1407388564*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BARBA, DAVID**
*Provider ID: 244089*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1671 W MAIN ST STE B
EL CENTRO, CA 92243
*Phone: (855) 543-0555*
*Fax: (888) 539-8781*
*After Hours Phone: (855) 543-0555*
*Provider Gender: Male*
*NPI: 1093730251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## ENCINITAS

### CARDIOVASCULAR DISEASE

**DURAN, EDWARD**
*Provider ID: 310052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578903936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CARDIOVASCULAR DISEASE

**RAMSIS, MATTHEUS**
*Provider ID: 310449*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609225135*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**
*Provider ID: 304139*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CERTIFIED ACUPUNCTURIST

**DISTEFANO, KIMBERLY**
*Provider ID: 311061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304133*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CARDINELL, ANNA**
*Provider ID: 291412*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306978614*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHAMBERS, KATRINA**
*Provider ID: 303521*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
*Phone: (760) 183-0441*
*Fax: (760) 635-5972*
*After Hours Phone: (760) 183-0441*
*Provider Gender: Female*
*NPI: 1710695143*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**DWYER, ERIN**
*Provider ID: 301447*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1003260894*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 268657*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KORMANIK, PATRICIA**
*Provider ID: 282071*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093895047*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301602*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PAKENHAM, KATE**
*Provider ID: 296268*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*

*Provider Gender: Female*
*NPI: 1578299343*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-8PM*
*M-F 8AM-8PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SRILASAK, MICHELE**
*Provider ID: 281856*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265487326*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**YEO, ALEXANDRIA**
*Provider ID: 299940*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902368319*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WOODIN, KAREN**
*Provider ID: 310372*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
*Phone: (616) 361-8292*
*Fax: (940) 478-8378*
*After Hours Phone: (616) 361-8292*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**ENDOCRINOLOGY METABOLISM DIABETES**

**HUPFELD, CHRISTOPHER**
*Provider ID: 277111*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568429165*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## FAMILY PRACTICE

**SHAH, NIYATI**
*Provider ID: 312273*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1891136354*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GASTROENTEROLOGY

**PATEL, JANKI**
*Provider ID: 305301*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
*Phone: (760) 783-0441*
*Fax: (760) 635-5972*
*After Hours Phone: (760) 783-0441*
*Provider Gender: Female*
*NPI: 1548606668*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GYNECOLOGIC ONCOLOGY

**ESKANDER, RAMEZ**
*Provider ID: 282164*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
*Phone: (858) 249-2560*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 249-2560*
*Provider Gender: Male*
*NPI: 1144486929*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
*Provider ID: 245575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 100
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
*Provider ID: 282127*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**BALLAS, JERASIMOS**
*Provider ID: 209562*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Male*
*NPI: 1871767384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**HULL, ANDREW**
*Provider ID: 209483*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Male*
*NPI: 1902862121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**LAURENT, LOUISE**
*Provider ID: 208641*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Female*
*NPI: 1770532707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**NHAN-CHANG, CHIA-LING**
*Provider ID: 312714*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265686794*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 277315*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL BLDG D STE 302
ENCINITAS, CA 92024
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 314184*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL BLDG D
ENCINITAS, CA 92024
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WOELKERS, DOUGLAS**
*Provider ID: 209384*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Male*
*NPI: 1013965748*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**WOLF, RICHARD**
*Provider ID: 209254*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Male*
*NPI: 1497713846*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEONATAL / PERINATAL MEDICINE**

**BAI-TONG, SHIYU**
*Provider ID: 283286*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 633-6120*
*After Hours Phone: (760) 633-6120*
*Provider Gender: Female*
*NPI: 1528454188*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301821*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 633-6120*
*Fax: (760) 633-7385*
*After Hours Phone: (760) 633-6120*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 303905*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 633-6120*
*Fax: (760) 633-7385*
*After Hours Phone: (760) 633-6120*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**BUI, JONATHAN**
*Provider ID: 269966*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-6377*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-6377*
*Provider Gender: Male*
*NPI: 1730247974*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**JINDAL, ANUJA**
*Provider ID: 206264*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**SCHORR, EMILY**
*Provider ID: 305022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255862041*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## NEUROLOGY CHILD

**KIM MCMANUS, OLIVIA**

*Provider ID: 206258*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL BLDG D STE 302
ENCINITAS, CA 92024

*Phone: (760) 944-5545*

*Fax: (760) 944-3927*

*After Hours Phone: (760) 944-5545*

*Provider Gender: Female*

*NPI: 1174870067*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## OBSTETRICS / GYNECOLOGY

**ASHAK, DANI**

*Provider ID: 311188*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1790149425*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## OBSTETRICS / GYNECOLOGY

**DELCORE, LAURA**

*Provider ID: 291325*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## OBSTETRICS / GYNECOLOGY

**DRIEBE, AMY**

*Provider ID: 293447*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024

*Phone: (800) 926-8372*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8372*

*Provider Gender: Female*

*NPI: 1730507567*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291336*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 293448*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
*Provider ID: 208682*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**
*Provider ID: 303061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311111*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 205617*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (760) 944-3927*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
*Provider ID: 267315*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297012*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 205507*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**
*Provider ID: 216413*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
BLD D STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

*Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 205886*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**YAMANE, MAYA**
*Provider ID: 311887*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPTOMETRIST**

**ZAIDI, NOORINA**
*Provider ID: 310607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Provider Gender: Female*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 206085*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310280*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**
*Provider ID: 244900*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**LEUIN, SHELBY**
*Provider ID: 206112*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1124230909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297035*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## OTOLARYNGOLOGY

**QIAN, ZHEN**
*Provider ID: 311004*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC ALLERGY / IMMUNOLOGY

**GREINER, ALEXANDER**
*Provider ID: 205696*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 966-4900*
*Fax: (760) 944-3927*
*After Hours Phone: (858) 966-4900*
*Provider Gender: Male*
*NPI: 1609801299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**HALEY, JESSICA**
*Provider ID: 205688*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LASALLE, ELIZABETH**
*Provider ID: 313254*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1235634015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
*Provider ID: 239115*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1376705707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**
*Provider ID: 206299*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**
*Provider ID: 314199*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
BLDG D
ENCINITAS, CA 92024

*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311396*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
*Provider ID: 301641*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310620*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*

*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC GASTROENTEROLOGY

**YOUNG, JOCELYN**
*Provider ID: 294676*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1306227491*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC NEPHROLOGY

**RASCHKE, ROBIN**
*Provider ID: 310302*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC PULMONOLOGY

**CERNELC-KOHAN, MATEJKA**
*Provider ID: 243043*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1871752451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LENHART-PENDERGRASS, PATRICIA**
*Provider ID: 294642*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1144615659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**CHANG, JOHANNA**
*Provider ID: 246395*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1821242199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287134*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LANDIS, SARAH**
*Provider ID: 313723*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1144733676*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293443*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302454*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-5545*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SUTTON, BRIAN**
*Provider ID: 272241*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
*Phone: (760) 598-1776*
*Fax: (760) 598-5744*
*After Hours Phone: (760) 598-1776*
*Provider Gender: Male*
*NPI: 1629174727*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**VANETSKY, GARY**
*Provider ID: 269152*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
*Phone: (760) 436-2300*
*Fax: (760) 436-5482*
*After Hours Phone: (760)*

436-2300
Provider Gender: Male
NPI: 1417034489
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

## PODIATRIST

**DUSTIN, ADAM**
Provider ID: 275800
Board Certified Specialty: No
UCSD MEDICAL GROUP
326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
Phone: (760) 436-5533
Fax: (760) 436-0611
After Hours Phone: (760) 436-5533
Provider Gender: Male
NPI: 1043389026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

## PSYCHOLOGIST

**GOMEZ, JUANITA**
Provider ID: 291423
Board Certified Specialty: No
UCSD MEDICAL GROUP
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790915759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

## SURGERY COLON SURGERY

**PARRY, LISA**
Provider ID: 278552
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

## SURGERY GENERAL

**ARMANI, AVA**
Provider ID: 282143
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY GENERAL

**JACOBSEN, GARTH**
*Provider ID: 201730*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (858) 657-8860*
*After Hours Phone: (858) 657-8860*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY PEDIATRIC

**FAIRBANKS, TIMOTHY**
*Provider ID: 205497*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1407010556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## SURGERY PEDIATRIC

**KLING, KAREN**
*Provider ID: 206128*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310987*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311608*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**UROLOGY**

**SAADA, HASSAN**
*Provider ID: 313176*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Male*
*NPI: 1760009518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## ESCONDIDO

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 300090*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
*Phone: (760) 738-5533*
*Fax: (760) 738-3835*
*After Hours Phone: (760) 738-5533*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 299881*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
*Phone: (760) 738-5533*
*Fax: (760) 738-3835*
*After Hours Phone: (760) 738-5533*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**ROBINSON, COLE**
*Provider ID: 300171*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
160 N DATE ST
ESCONDIDO, CA 92025
*Phone: (888) 873-6220*
*Fax: (888) 873-6220*
*After Hours Phone: (888) 873-6220*
*Provider Gender: Male*
*NPI: 1871799528*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-4PM SA 7AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**BALLOUT, REEM**
*Provider ID: 310193*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Provider Gender: Female*
*NPI: 1780459958*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 277866*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**JANNESARI, ROYA**
*Provider ID: 302339*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
*Phone: (760) 743-1431*
*Fax: (760) 743-6455*
*After Hours Phone: (760) 743-1431*
*Provider Gender: Female*
*NPI: 1063585099*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LINDSEY, SABRINA**
*Provider ID: 314180*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (442) 281-3193*
*Fax: (442) 281-3197*
*After Hours Phone: (442) 281-3193*
*Provider Gender: Female*
*NPI: 1164860813*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**NAVARRO, STEVEN**
*Provider ID: 310223*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (760) 466-1373*
*After Hours Phone: (760) 520-8100*
*Provider Gender: Male*

*NPI: 1013598960*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**O'DONNELL, NICOLE**
*Provider ID: 314392*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
*Phone: (833) 867-4642*
*Fax: (360) 462-2741*
*After Hours Phone: (833) 867-4642*
*Provider Gender: Female*
*NPI: 1043708456*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RODRIGUEZ, DANA**
*Provider ID: 315314*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (833) 867-4642*
*Fax: (858) 633-4693*
*After Hours Phone: (833) 867-4642*
*Provider Gender: Female*
*NPI: 1003839176*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**WALDRUP, LA RHONDA**
*Provider ID: 299259*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (442) 281-3193*
*Fax: (442) 281-3197*
*After Hours Phone: (442) 281-3193*
*Provider Gender: Female*
*NPI: 1831627181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WOODIN, KAREN**
*Provider ID: 269203*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (877) 217-8505*
*Fax: (760) 735-6296*
*After Hours Phone: (877)*

*217-8505*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## EMERGENCY MEDICINE

**PHAM, LILY**
*Provider ID: 304936*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1811423072*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## ENDOCRINOLOGY METABOLISM DIABETES

**REDDY, NAVYA**
*Provider ID: 302350*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
*Phone: (760) 743-1431*
*Fax: (760) 743-6455*
*After Hours Phone: (760) 743-1431*
*Provider Gender: Female*
*NPI: 1083069611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GASTROENTEROLOGY

**GARA, NAVEEN**
*Provider ID: 269145*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
*Phone: (760) 690-2800*
*Fax: (760) 690-2801*
*After Hours Phone: (760) 690-2800*
*Provider Gender: Male*
*NPI: 1942406533*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## GASTROENTEROLOGY

**GARA, NAVEEN**

*Provider ID: 305691*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
*Phone: (760) 690-2800*
*Fax: (619) 345-4055*
*After Hours Phone: (760) 690-2800*
*Provider Gender: Male*
*NPI: 1942406533*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

## HEARING AID DEALER / SUPPLIER

**ANDERSON, ELAINE**
*Provider ID: 268690*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025
*Phone: (760) 489-1323*
*Fax: (760) 489-0975*
*After Hours Phone: (760) 489-1323*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## INTERNAL MEDICINE

**CHEN, ANDREW**
*Provider ID: 296830*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
*Phone: (760) 743-0546*
*Fax: (760) 743-8005*
*After Hours Phone: (760) 743-0546*
*Provider Gender: Male*
*NPI: 1134357007*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

## INTERNAL MEDICINE

**MALEK, MIKHAIL**
*Provider ID: 296831*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
*Phone: (760) 743-0546*
*Fax: (760) 317-9769*
*After Hours Phone: (760) 743-0546*
*Provider Gender: Male*
*NPI: 1467455212*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**BAYAT, HAMED**
*Provider ID: 296842*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
*Phone: (760) 743-0546*
*Fax: (760) 317-9769*
*After Hours Phone: (760) 743-0546*
*Provider Gender: Male*
*NPI: 1356344196*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**BAYAT, HAMED**
*Provider ID: 296843*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
*Phone: (760) 743-0546*
*Fax: (760) 317-9769*
*After Hours Phone: (760) 743-0546*
*Provider Gender: Male*
*NPI: 1356344196*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 309248*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
*Phone: (760) 294-0480*
*Fax: (760) 294-0481*
*After Hours Phone: (760) 294-0480*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**SAWHNEY, NAVINDER**
*Provider ID: 304784*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO PKWY
STE 320

ESCONDIDO, CA 92029
*Phone: (858) 485-0130*
*Fax: (858) 485-9424*
*After Hours Phone: (858) 485-0130*
*Provider Gender: Male*
*NPI: 1619174133*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 309097*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
*Phone: (760) 294-0480*
*Fax: (760) 294-0481*
*After Hours Phone: (760) 294-0480*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 295845*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
*Phone: (760) 294-0480*
*Fax: (760) 294-0481*
*After Hours Phone: (760) 294-0480*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296996*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294655*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**LE, CRYSTAL**
*Provider ID: 283707*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (442) 281-3193*
*Fax: (442) 281-3197*
*After Hours Phone: (442) 281-3193*
*Provider Gender: Female*
*NPI: 1003028416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 206163*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (442) 281-2850*
*Fax: (442) 281-2999*
*After Hours Phone: (442) 281-2850*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEONATAL / PERINATAL MEDICINE

**SWEENEY, NATHALY**
*Provider ID: 283801*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (442) 281-3193*
*Fax: (442) 281-3197*
*After Hours Phone: (442) 281-3193*
*Provider Gender: Female*
*NPI: 1164572632*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEUROLOGY

**GOLD, JEFFREY**
*Provider ID: 277870*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEUROLOGY

**HAMILTON, ROSS**
*Provider ID: 311788*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Male*
*NPI: 1538587852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY*

*MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**JINDAL, ANUJA**
*Provider ID: 277838*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**KIM MCMANUS, OLIVIA**
*Provider ID: 277873*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (858) 966-5819*
*Fax: (760) 294-9274*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1174870067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**ZIMBRIC, MICHAEL**
*Provider ID: 277891*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1487819546*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OBSTETRICS / GYNECOLOGY**

**HOFFMAN, MICHAEL**
*Provider ID: 310393*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Provider Gender: Male*
*NPI: 1720047707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ADVENTIST MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
*Provider ID: 285518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029
*Phone: (760) 739-2921*
*Fax: (760) 739-3162*
*After Hours Phone: (760) 739-2921*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 277883*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

# D. Specialist Provider Directory

**BHATIA, SHAGUN**
*Provider ID: 277877*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297014*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 277824*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 205895*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025

*Phone: (760) 755-7600*

*After Hours Phone: (760) 755-7600*

*Provider Gender: Female*

*NPI: 1861648602*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**

*Provider ID: 277833*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

*Phone: (760) 755-7600*

*Fax: (760) 755-7699*

*After Hours Phone: (760) 755-7600*

*Provider Gender: Male*

*NPI: 1497792220*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**

*Provider ID: 277869*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

*Phone: (760) 755-7600*

*Fax: (760) 755-7699*

*After Hours Phone: (760) 755-7600*

*Provider Gender: Male*

*NPI: 1235287947*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**YAMANE, MAYA**

*Provider ID: 311889*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPTOMETRIST**

**AMINI, AFSANEH**
*Provider ID: 315280*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1790099943*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**AMINI, AFSANEH**
*Provider ID: 313445*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1790099943*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**DUONG, NGHI**
*Provider ID: 314753*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
*Phone: (800) 765-2737*
*Fax: (619) 291-6577*
*After Hours Phone: (800) 765-2737*
*Provider Gender: Female*
*NPI: 1285832501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 307411*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1118 W VALLEY PKWY

ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 307410*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**ZAIDI, NOORINA**
*Provider ID: 310608*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Provider Gender: Female*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 277537*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310282*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*

*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**
*Provider ID: 277853*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**JIANG, WEN**
*Provider ID: 277860*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1659305753*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**LEUIN, SHELBY**
*Provider ID: 206110*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1124230909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297038*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311005*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DAVIS, CHRISTOPHER**
*Provider ID: 277811*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1760691950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 277867*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 205689*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LASALLE, ELIZABETH**
*Provider ID: 313256*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1235634015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
*Provider ID: 277846*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1376705707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**
*Provider ID: 206298*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY**

**MEDICINE**

**AGHILI, ROXANA**
*Provider ID: 303783*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY**

**MEDICINE**

**CRAWFORD, MICHAEL**
*Provider ID: 311162*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**
*Provider ID: 277851*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1316162324*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**
*Provider ID: 295670*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 277872*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHERER, KIMBERLY**
*Provider ID: 311934*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1992202964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TODD, SARAH**
*Provider ID: 302802*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1407299787*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 205812*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 289412*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*

*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311398*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
*Provider ID: 301643*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310621*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC RHEUMATOLOGY

**LEVY, AVIYA**
*Provider ID: 310781*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1144726936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRICS

**BENDER STERN, JULIA**
*Provider ID: 311586*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Provider Gender: Female*
*NPI: 1568044691*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PHYSICAL MEDICINE / REHABILITATION

**RICHARDSON, HENRY**
*Provider ID: 295277*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
*Phone: (760) 738-5533*
*Fax: (909) 204-7863*
*After Hours Phone: (760) 738-5533*
*Provider Gender: Male*
*NPI: 1407052459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PHYSICAL MEDICINE / REHABILITATION

**RYAN, KYLE**
*Provider ID: 275660*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY
ESCONDIDO, CA 92025
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760)*

294-9260
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

**PHYSICIANS ASSISTANT**

**ABSI, CHRISTIAN**
Provider ID: 311840
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (833) 867-4642
Fax: (360) 462-2748
After Hours Phone: (833) 867-4642
Provider Gender: Male
NPI: 1316652779
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**PHYSICIANS ASSISTANT**

**CAMPBELL, PATRICK**
Provider ID: 310816
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Provider Gender: Male
NPI: 1538917125
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**PHYSICIANS ASSISTANT**

**CORVINI, NICOLAS**
Provider ID: 296999
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Male
NPI: 1194242461
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**PHYSICIANS ASSISTANT**

**FONTANILLA, ROBERT**
Provider ID: 315343
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 462-2745
After Hours Phone: (760) 520-8100
Provider Gender: Male
NPI: 1184005258
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**FUNARI, CHRISTOPHER**
*Provider ID: 301993*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
*Phone: (760) 743-1431*
*Fax: (760) 743-6455*
*After Hours Phone: (760) 743-1431*
*Provider Gender: Male*
*NPI: 1982365490*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HENNESSY, JAMES**
*Provider ID: 315245*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Male*
*NPI: 1801525241*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NCHOTU, SUCCESS**
*Provider ID: 311537*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Male*
*NPI: 1073157210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NIAKAMAL, EVAN**
*Provider ID: 291250*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8340*
*Provider Gender: Male*
*NPI: 1639796873*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302456*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**WALSH, JOHN**
*Provider ID: 301971*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
*Phone: (760) 743-1431*
*Fax: (760) 743-6455*
*After Hours Phone: (760) 743-1431*
*Provider Gender: Male*
*NPI: 1386893089*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**ZATT, DANIELLE**
*Provider ID: 314765*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Female*
*NPI: 1578199527*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**ALGHURAIBI, OHOUD**
*Provider ID: 295998*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (360) 462-2745*
*After Hours Phone: (760) 520-8100*
*Provider Gender: Female*
*NPI: 1669842357*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 300882*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
*Phone: (760) 480-1189*
*Fax: (858) 485-1515*
*After Hours Phone: (760) 480-1189*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 296654*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
*Phone: (760) 480-1189*
*Fax: (858) 485-1515*
*After Hours Phone: (760) 480-1189*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PSYCHOLOGIST**

**MORAN, CHRISTINA**
*Provider ID: 314549*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Female*
*NPI: 1063661577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TEETER-WITT, ALYSSA**
*Provider ID: 290779*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*Fax: (858) 633-4693*
*After Hours Phone: (760) 690-5900*
*Provider Gender: Female*
*NPI: 1932308442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TEETER-WITT, ALYSSA**
*Provider ID: 290891*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*

*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Female*
*NPI: 1932308442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PULMONARY DISEASES**

**QUAN, MICHELE GRACE**
*Provider ID: 287097*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
*Phone: (760) 489-1458*
*Fax: (760) 489-1246*
*After Hours Phone: (760) 489-1458*
*Provider Gender: Female*
*NPI: 1629462882*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: REDLANDS COMMUNITY HOSP, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**COLEMAN, LORI**
*Provider ID: 221090*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
*Phone: (760) 739-3371*
*Fax: (760) 739-3779*
*After Hours Phone: (760) 739-3371*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 19\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**VAKILIAN, SIAVOSH**
*Provider ID: 314063*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
*Phone: (760) 839-7370*
*Fax: (858) 429-7938*
*After Hours Phone: (760) 839-7370*
*Provider Gender: Male*
*NPI: 1427456151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

## RADIOLOGY DIAGNOSTIC

**VAKILIAN, SIAVOSH**

*Provider ID: 283206*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

*Phone: (760) 839-7370*

*Fax: (858) 429-7938*

*After Hours Phone: (760) 839-7370*

*Provider Gender: Male*

*NPI: 1427456151*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## REGISTERED PHYSICAL THERAPIST

**MCGEE, JACQUELINE**

*Provider ID: 252473*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

*Phone: (760) 233-9655*

*Fax: (760) 233-9648*

*After Hours Phone: (760) 233-9655*

*Provider Gender: Female*

*NPI: 1194217133*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 8\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 7AM-6PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

## SPEECH PATHOLOGIST

**DURNAN, CASSANDRA**

*Provider ID: 307881*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025

*Phone: (877) 757-8353*

*Fax: (818) 357-2505*

*After Hours Phone: (877) 757-8353*

*Provider Gender: Female*

*NPI: 1073873501*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 7AM-7PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

## SURGERY GENERAL

**CASILLAS BERUMEN, SERGIO**

*Provider ID: 304606*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

*Phone: (760) 884-4500*

*Fax: (619) 483-3997*

*After Hours Phone: (760) 884-4500*

*Provider Gender: Male*

*NPI: 1437470762*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA*

*VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SURGERY GENERAL

**GROVE, JAY**
*Provider ID: 245226*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (760) 300-3647*
*Fax: (760) 482-1316*
*After Hours Phone: (760) 300-3647*
*Provider Gender: Male*
*NPI: 1912971334*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## SURGERY NEUROLOGICAL

**HATEFI, DUSTIN**
*Provider ID: 310032*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY ORTHOPEDIC

**EDMONDS, ERIC**
*Provider ID: 277831*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 480-8770*
*Fax: (760) 480-8811*
*After Hours Phone: (760) 480-8770*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

### SURGERY ORTHOPEDIC

**KNUTSON, THOMAS**

*Provider ID: 296851*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

*Phone: (760) 743-4789*

*Fax: (760) 743-4779*

*After Hours Phone: (760) 743-4789*

*Provider Gender: Male*

*NPI: 1962409938*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC*

### SURGERY PEDIATRIC

**KLING, KAREN**

*Provider ID: 206130*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025

*Phone: (760) 755-7600*

*Fax: (760) 755-7699*

*After Hours Phone: (760) 755-7600*

*Provider Gender: Female*

*NPI: 1982775144*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

### SURGERY PEDIATRIC

**THOMPSON, KYLE**

*Provider ID: 310989*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

*Phone: (760) 755-7600*

*Fax: (760) 755-7699*

*After Hours Phone: (760) 755-7600*

*Provider Gender: Male*

*NPI: 1598147050*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## FALLBROOK

### CERTIFIED ACUPUNCTURIST

**CRAFT, KEVIN**

*Provider ID: 290943*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1309 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 690-5900*

*Fax: (360) 462-2745*

*After Hours Phone: (760) 690-5900*

*Provider Gender: Male*

*NPI: 1659745610*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TU-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GUIDI, CASEY**
*Provider ID: 296010*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Provider Gender: Female*
*NPI: 1013349919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298086*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 723-6200*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 299775*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 723-6200*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE**

# D. Specialist Provider Directory

**PRACTITIONER**

**KIRKLAND, STEPHANIE**

*Provider ID: 314956*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1083813661*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-2PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**STOJANOVSKA, JOVANA**

*Provider ID: 301367*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1328 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 451-4720*

*Fax: (760) 457-4700*

*After Hours Phone: (760) 451-4720*

*Provider Gender: Female*

*NPI: 1215638499*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**

*Provider ID: 299407*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 723-6200*

*Provider Gender: Male*

*NPI: 1851747166*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 5\100*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**

*Provider ID: 302118*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 723-6200*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 723-6200*

*Provider Gender: Male*

*NPI: 1851747166*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health*

*Network*

**CHIROPRACTOR**

**FARSHLER, ANTHONY**

*Provider ID: 290306*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1309 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 690-5900*

*Fax: (760) 731-1063*

*After Hours Phone: (760) 690-5900*

*Provider Gender: Male*

*NPI: 1841627759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**HALVORSON, PAULA**

*Provider ID: 298338*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1309 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 690-5900*

*Fax: (760) 731-1063*

*After Hours Phone: (760) 690-5900*

*Provider Gender: Female*

*NPI: 1275542193*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: TU 8AM-5PM TH-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**BULLUM, ANTHONY**

*Provider ID: 290329*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1328 S MISSION RD
FALLBROOK, CA 92028

*Phone: (760) 451-4720*

*Fax: (760) 457-4700*

*After Hours Phone: (760) 451-4720*

*Provider Gender: Male*

*NPI: 1992773956*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**ROBINSON, DAISY**

*Provider ID: 298311*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

321 E ALVARADO ST
FALLBROOK, CA 92028

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1659389740*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

## HEMET

**PHYSICIANS ASSISTANT**

**CORVINI, NICOLAS**

*Provider ID: 314641*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1030 E FLORIDA AVE
HEMET, CA 92543
*Phone: (833) 867-4642*
*Fax: (360) 462-2743*
*After Hours Phone: (833) 867-4642*
*Provider Gender: Male*
*NPI: 1194242461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**SMITH, KELLI**
*Provider ID: 272953*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3853 W STETSON AVE STE 200
HEMET, CA 92545
*Phone: (951) 225-6802*
*After Hours Phone: (951) 225-6802*
*Provider Gender: Female*
*NPI: 1841771664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## IMPERIAL BEACH

**CERTIFIED NURSE PRACTITIONER**

**ALLEN, KATHERINE**
*Provider ID: 315214*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1831557024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CUNNINGHAM, STEPHANIE**
*Provider ID: 301310*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1174223655*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LUNA, ABIGAIL**
*Provider ID: 315817*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1366299315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**OCONNELL, STEFANY**
*Provider ID: 296845*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1386378479*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RAJIV, RENUKA**
*Provider ID: 315857*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1821819301*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**CABALLERO, JAMES**
*Provider ID: 310867*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Male*
*NPI: 1093991549*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SUMMERS-DAY, COURTNEY**

*Provider ID: 290977*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

949 PALM AVE
IMPERIAL BEACH, CA 91932

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Provider Gender: Female*

*NPI: 1124288873*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**PASCUA, RYAN**

*Provider ID: 312025*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

949 PALM AVE
IMPERIAL BEACH, CA 91932

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Provider Gender: Male*

*NPI: 1972064269*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HSIEH, STEPHANIE**

*Provider ID: 312496*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

949 PALM AVE
IMPERIAL BEACH, CA 91932

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Provider Gender: Female*

*NPI: 1720868045*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CHENG, BRANDON**

*Provider ID: 304530*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

*Phone: (619) 332-4200*

*Fax: (613) 332-4220*

*After Hours Phone: (619) 332-4200*

*Provider Gender: Male*

*NPI: 1336894724*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM F 7AM-5PM*

*SA 8AM-1PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CHUNG, PETER**
*Provider ID: 314476*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1023837887*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 299890*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 301973*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**
*Provider ID: 287101*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1699357525*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305016*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305015*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 286783*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 301995*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*

*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**PASCUAL, CHRISTOPHER**
*Provider ID: 314204*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1093328064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 301109*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 298365*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 301429*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**VAISMAN, SAMANTHA**
*Provider ID: 311835*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457022071*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310202*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**
*Provider ID: 301531*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1063046878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## LA JOLLA

**ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY**

**HONG, KIMBERLY**
*Provider ID: 246312*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346515442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**AL AZZAWI, SARAH**
*Provider ID: 312974*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1063041887*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**ALEXANDER, BRENTON**
*Provider ID: 242302*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1811366644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BECERRA SONGOLO, TOSHA**
*Provider ID: 300067*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265938724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BHATIA, KARISHMA**
*Provider ID: 313007*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1932764081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BIGELOW, ELSIE**
*Provider ID: 313509*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215565114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CABANISS, SCOTT**
*Provider ID: 311437*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310045*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**
*Provider ID: 311462*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CURRAN, BRIAN**
*Provider ID: 239003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1710373642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**DARWISH, ALEX**
*Provider ID: 313026*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1043839970*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**FEJLEH, ASHLEY**
*Provider ID: 269503*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609353465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**FUNDINGSLAND, BRENT**
*Provider ID: 280469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1831166560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GARRETT, RILEY**
*Provider ID: 313741*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740642776*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GOH, REGINE**
*Provider ID: 311502*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205381316*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**HOSALKAR, HETAL**
*Provider ID: 243370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861556821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Gujarati, Hindi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**HYLTON, DIANA**
*Provider ID: 241736*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KAWASAKI, MEGAN**
*Provider ID: 313584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073140059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KIM, ELIZABETH**
*Provider ID: 313003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1831726744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KROL, CAITLIN**
*Provider ID: 313047*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1518594910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MALONEY, IAN**
*Provider ID: 313015*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1508492422*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MEASER, JACQUELINE**
*Provider ID: 312977*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1790300671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MEYER, MEGAN**
*Provider ID: 239608*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720473044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311125*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**NGUYEN, QUOC SY**
*Provider ID: 242189*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871911644*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**OKAMOTO, VINCENT**
*Provider ID: 245952*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952338709*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**OSWALD, JESSICA**
*Provider ID: 239601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427315118*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SHAW, SUSANNA**
*Provider ID: 255317*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063685477*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SNOW, ERICA**
*Provider ID: 312988*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1023637808*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SORIA, CLAIRE**
*Provider ID: 243295*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1447516414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SUYDAM, STEVEN**
*Provider ID: 286570*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386856821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TRIVEDI, SURAJ**
*Provider ID: 246750*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699057885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, CORONA REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TSUDA, PAIGE**

*Provider ID: 271683*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003261595*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TULLY, JEFFREY**
*Provider ID: 283690*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871912493*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TZENG, ERIC**
*Provider ID: 284578*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801258264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**WANG, MICHELLE**
*Provider ID: 286139*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659802965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**YOUNAN, LAWRENCE**
*Provider ID: 240871*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1922432475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**ZAERPOOR, DARA**
*Provider ID: 313028*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1497226450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**KRAUSE, MARTIN**
*Provider ID: 280540*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417243239*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**CASTELLANOS, JOEL**
*Provider ID: 243554*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1700296514*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**BIRS, ANTOINETTE**
*Provider ID: 313049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1164957957*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**DAMANI, SAMIR**
*Provider ID: 310637*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9850 GENESEE AVE STE 650
LA JOLLA, CA 92037
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**GUPTA, TRIPTI**
*Provider ID: 313715*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306290242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**KEEN, WILLIAM**
*Provider ID: 291303*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Male*
*NPI: 1962561571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**MIZZELL, ANNA**
*Provider ID: 214021*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851561021*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**NAREZKINA, ANNA**
*Provider ID: 312912*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 17411
LA JOLLA, CA 92037
*Phone: (858) 657-8530*
*Fax: (858) 657-8814*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Female*
*NPI: 1891958773*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**PHREANER, NICHOLAS**
*Provider ID: 224864*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023373040*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**SHAPIRO, HILARY**
*Provider ID: 300000*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811382815*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**WILKINSON, MICHAEL**
*Provider ID: 312909*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1699063701*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**
*Provider ID: 304136*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**
*Provider ID: 304141*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**
*Provider ID: 304140*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**
*Provider ID: 311065*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**
*Provider ID: 311066*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**
*Provider ID: 311064*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304130*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304135*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304134*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**LEE, JIHYUNG**
*Provider ID: 312191*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1073212338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BOUTELLE, AMY**
*Provider ID: 243485*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609117704*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*

# D. Specialist Provider Directory

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BRADY, KATELYN**
*Provider ID: 209017*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952797540*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BUENROSTRO, CHRISTINA**
*Provider ID: 243717*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851749253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CAPOZZI, JENNIFER**
*Provider ID: 241030*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1336258276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNER, PAMELA**
*Provider ID: 299932*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1770558967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNER, PAMELA**
*Provider ID: 299931*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770558967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNOR, CAROLINE**
*Provider ID: 279834*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609081710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CZYPULL, MONICA**
*Provider ID: 284662*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1831784842*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES, SUMMER**
*Provider ID: 253691*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
*Phone: (858) 249-6800*
*Fax: (858) 657-6420*
*After Hours Phone: (858) 249-6800*
*Provider Gender: Female*
*NPI: 1679850671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES, SUMMER**
*Provider ID: 238922*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7600*
*After Hours Phone: (858) 657-7600*
*Provider Gender: Female*
*NPI: 1679850671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DE DIOS, SARAH JANE**
*Provider ID: 300052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528632742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DIMAIRA, FRANCESCA**
*Provider ID: 245580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346670718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DIMAIRA, FRANCESCA**

*Provider ID: 245579*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346670718*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DRISCOLL, KARRIE**

*Provider ID: 286376*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (858) 822-6277*

*Fax: (858) 228-1731*

*After Hours Phone: (858) 822-6277*

*Provider Gender: Female*

*NPI: 1396085098*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GARTH, MELISSA**

*Provider ID: 268991*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1689232977*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GARTH, MELISSA**

*Provider ID: 268992*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1689232977*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GIOVANNETTI, ERIN**
*Provider ID: 276002*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013317767*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299470*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299464*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

# D. Specialist Provider Directory

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299465*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOSHEN, KIRSTEN**
*Provider ID: 314005*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
*Phone: (858) 457-4917*
*After Hours Phone: (858) 457-4917*
*Provider Gender: Female*
*NPI: 1447795661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HARKNESS, RUMIKO**
*Provider ID: 208840*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487785093*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**IYER, VICTORIA**
*Provider ID: 265624*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE 2B
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871738864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**JONES, CHRISTA**
*Provider ID: 275564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (800) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396371431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**KORMANIK, PATRICIA**
*Provider ID: 282070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093895047*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301604*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (858) 453-5944*
*Fax: (858) 429-7925*
*After Hours Phone: (858) 453-5944*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299650*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299651*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299646*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299645*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MOHEBBI, ATHENA**
*Provider ID: 282231*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952627176*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MULVEY, CAOILFHIONN**
*Provider ID: 291420*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1184386864*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MUUS, SUSAN**
*Provider ID: 311126*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MUUS, SUSAN**
*Provider ID: 311127*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MUUS, SUSAN**
*Provider ID: 311128*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NACOSTE, LAKEISHA**
*Provider ID: 272935*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-5210*
*After Hours Phone: (858) 822-5210*
*Provider Gender: Female*
*NPI: 1194139634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAULSON, KERRY**
*Provider ID: 201269*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (619) 543-3000*
*After Hours Phone: (619) 543-3000*
*Provider Gender: Female*
*NPI: 1518363407*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**RALEIGH, DEBORAH**
*Provider ID: 215016*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1689006876*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROCHE, CHELSEA**
*Provider ID: 270706*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063040384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSSI, CATHERINE**
*Provider ID: 291446*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1649934126*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SALINAS, NIECEL**
*Provider ID: 312992*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205579141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SRILASAK, MICHELE**
*Provider ID: 281855*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265487326*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**STEVENSON, REHEIA**
*Provider ID: 210795*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346696044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TONG, KIM**
*Provider ID: 313527*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861069874*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TREJO, ANA**
*Provider ID: 307671*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033717194*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

# D. Specialist Provider Directory

**TREJO, ANA**
*Provider ID: 307670*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033717194*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TREJO, ANA**
*Provider ID: 307673*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033717194*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TRUJILLO, DALE**
*Provider ID: 278428*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003104423*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**
*Provider ID: 307658*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477325181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**CERTIFIED NURSE PRACTITIONER**

**YEO, ALEXANDRIA**
*Provider ID: 299942*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902368319*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**ALFONSO, ALVIN**
*Provider ID: 256375*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952653404*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BARSOTTI, ALEXANDRA**
*Provider ID: 312689*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1356100051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BURROWS, TERENCE**
*Provider ID: 256695*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023194560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

# D. Specialist Provider Directory

**DOLLAND, STEVEN**
*Provider ID: 280553*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982059044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FARRIS, AMANDA**
*Provider ID: 311602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FERRITER, STACY**
*Provider ID: 265296*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780725556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**GARCIA, CALVIN**
*Provider ID: 217366*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427419944*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**GONZALEZ, LISA**

*Provider ID: 299906*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1083254205*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**LANTRIP, KEATON**

*Provider ID: 311519*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1043059686*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**RAMIREZ, NICOLE**

*Provider ID: 291403*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1487213500*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SACKS, BRENT**

*Provider ID: 278004*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1982133591*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SCOTT, TIFFANY**
*Provider ID: 312871*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1376885186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**TOCCO, JESSICA**
*Provider ID: 312886*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366836397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WAKEFIELD, CHANTAL**
*Provider ID: 313051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1548006141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WOODIN, KAREN**
*Provider ID: 310373*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (616) 361-8292*
*Fax: (970) 478-8378*
*After Hours Phone: (616) 361-8292*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**CHOI, NATHALIE**
*Provider ID: 301713*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073241618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GOODWIN, RACHEL**
*Provider ID: 210017*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518274919*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GREAR MANN, MELISSA**
*Provider ID: 210051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255384475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUNTHER, HOPE**
*Provider ID: 210040*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1285667741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*

*W 8AM-8PM*
*TH-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**HIRSCH, JENNIFER**
*Provider ID: 210057*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1891752069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-8PM*
*TH-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**HIRSCH, JENNIFER**
*Provider ID: 210056*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1891752069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**NATHAN, CARLY**
*Provider ID: 301046*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235670977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**DANG, TIMOTHY**
*Provider ID: 312866*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518427913*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**WONG, HENRY**
*Provider ID: 313608*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437237567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**AMANN, CHRISTOPHER**
*Provider ID: 270914*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Male*
*NPI: 1134326895*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**AUSTIN, ANDREA**
*Provider ID: 269292*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811289093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BARRY, JEFFREY**
*Provider ID: 271131*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801207006*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BELLINGHAUSEN, AMY**
*Provider ID: 270335*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801206354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BLACK, NICHOLAS**
*Provider ID: 284415*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1154852689*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASAS, TAMARA**
*Provider ID: 313569*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669962270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASAS, TAMARA**
*Provider ID: 313567*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669962270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**
*Provider ID: 271611*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (858) 249-6800*
*Fax: (858) 404-9226*
*After Hours Phone: (858) 249-6800*
*Provider Gender: Female*
*NPI: 1063893063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**
*Provider ID: 315872*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063893063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287429*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287427*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHIN, BRIAN**
*Provider ID: 313571*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1770140782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**COOK, LEANNE**
*Provider ID: 313632*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1053948687*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**COOK, LEANNE**
*Provider ID: 313634*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1053948687*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**EAGLE, SONJA**
*Provider ID: 311504*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699394114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**GOODRICH, ANDREW**
*Provider ID: 271625*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1245688415*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HOGUE, BRENNA**
*Provider ID: 300006*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043705296*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HOGUE, BRENNA**
*Provider ID: 301710*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043705296*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS*

*MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HORNBEAK, KIRSTEN**
*Provider ID: 240023*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205214442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KRESHAK, ALLYSON**
*Provider ID: 257564*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1194758219*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**EMERGENCY MEDICINE**

**KRYSHTAFOVYCH, SOLOMIYA**
*Provider ID: 313021*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801425244*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KUTZ, CRAIG**
*Provider ID: 283844*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1598295925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KUTZ, CRAIG**
*Provider ID: 283846*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598295925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LAFREE, ANDREW**
*Provider ID: 313674*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1639437809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LAVEMAN, EVAN**
*Provider ID: 313671*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134654148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LAVEMAN, EVAN**
*Provider ID: 313670*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134654148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LI, JINGHONG**
*Provider ID: 255937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7125*
*Fax: (858) 657-7107*
*After Hours Phone: (858) 657-7125*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LI, JINGHONG**
*Provider ID: 255938*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (858) 657-7125*
*Fax: (858) 657-7107*
*After Hours Phone: (858) 657-7125*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 313018*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 283150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIPPI, MATTHEW**
*Provider ID: 311493*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932736485*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**MCDANIEL, MICHELE**
*Provider ID: 315886*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (858) 249-6800*
*Fax: (858) 404-9226*
*After Hours Phone: (858) 249-6800*
*Provider Gender: Female*
*NPI: 1366761959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**MCDANIEL, MICHELE**
*Provider ID: 246900*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1366761959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**NOSTE, ERIN**
*Provider ID: 239796*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (858) 249-6800*
*After Hours Phone: (858) 249-6800*
*Provider Gender: Female*
*NPI: 1871732214*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**PARK, JAY**
*Provider ID: 285609*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366478372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**PARK, JAY**
*Provider ID: 285608*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366478372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**RUDOLF, FRANCES**

*Provider ID: 240160*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 657-7000*

*After Hours Phone: (858) 657-7000*

*Provider Gender: Female*

*NPI: 1821487430*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SABHA, MAHMOUD**

*Provider ID: 240450*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

*Phone: (858) 249-6800*

*After Hours Phone: (858) 249-6800*

*Provider Gender: Male*

*NPI: 1457747883*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 8AM-8PM*
*M-F 8AM-5PM*
*SA 8AM-8PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SAMHA, LEEN**

*Provider ID: 313009*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1992334825*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SAMHA, LEEN**

*Provider ID: 313011*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1992334825*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**EMERGENCY MEDICINE**

**SANDIFORD, PATRICK**

*Provider ID: 312861*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1700151917*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SANDIFORD, PATRICK**

*Provider ID: 312860*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1700151917*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SEGAL, LAUREN**

*Provider ID: 313709*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1013278431*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SELTZER, JUSTIN**

*Provider ID: 315888*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 826-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 826-8273*

*Provider Gender: Male*

*NPI: 1447791843*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SELTZER, JUSTIN**

*Provider ID: 283135*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1447791843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SHISHLOV, KIRILL**
*Provider ID: 313657*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114248077*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SLOANE, CHRISTIAN**
*Provider ID: 315891*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Male*
*NPI: 1841233145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SMITH, CASEY**
*Provider ID: 313728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871099333*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SMITH, CASEY**
*Provider ID: 300008*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871099333*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TANAKA, HIDEAKI**
*Provider ID: 315895*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124280730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 315883*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7600*
*After Hours Phone: (858) 657-7600*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 315884*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TORRES, ERICK**
*Provider ID: 313619*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548846983*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**WAYMENT, ANDREW**
*Provider ID: 313530*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013593839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: BEAR VALLEY COMM HOSP, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**WINKLER, GARRET**
*Provider ID: 271416*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1336502095*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YOU, ALAN**
*Provider ID: 269938*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225425697*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YOU, ALAN**
*Provider ID: 269937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225425697*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**
*Provider ID: 301707*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528564150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**
*Provider ID: 299985*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE A
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528564150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**DECAMPS, SCARLETT**
*Provider ID: 311512*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**JUANG, PATRICIA**
*Provider ID: 255606*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265695795*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**KULASA, KRISTEN**
*Provider ID: 255623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 962-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 962-8273*
*Provider Gender: Female*
*NPI: 1932324175*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287778*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**PETTUS, JEREMY**
*Provider ID: 303286*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225234982*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**SANTOS CAVAIOLA, TRICIA**
*Provider ID: 256092*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518163799*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207165*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300056*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

**LUKACZ, EMILY**
*Provider ID: 256953*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

**LUKACZ, EMILY**
*Provider ID: 256954*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**ANAND, GOBIND**
*Provider ID: 272836*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 543-2347*
*Fax: (858) 657-7259*
*After Hours Phone: (619) 543-2347*
*Provider Gender: Male*
*NPI: 1861626814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**BRANCH, LAUREL**
*Provider ID: 313514*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1912437617*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**BRANCH, LAUREL**
*Provider ID: 313515*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1912437617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CARETHERS, JOHN**
*Provider ID: 311110*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CARETHERS, JOHN**
*Provider ID: 311108*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8440*
*After Hours Phone: (858) 657-8440*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**DAVE, SHRAVAN**
*Provider ID: 270449*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588081814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**DAVE, SHRAVAN**
*Provider ID: 270448*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 925-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 925-8273*
*Provider Gender: Male*
*NPI: 1588081814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**FEJLEH, MOHAMMAD**
*Provider ID: 271043*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205240959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**FEJLEH, MOHAMMAD**
*Provider ID: 271042*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205240959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KRAUSE, AMANDA**
*Provider ID: 313630*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528561305*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**GASTROENTEROLOGY**

**KRAUSE, AMANDA**

*Provider ID: 313629*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1528561305*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KUO, SELENA**

*Provider ID: 313477*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1174029821*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KUO, SELENA**

*Provider ID: 313478*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1174029821*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**NOUREDDIN, NABIL**

*Provider ID: 313613*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1972037026*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**NOUREDDIN, NABIL**

*Provider ID: 313614*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1972037026*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**SHAH, SHAILJA**
*Provider ID: 283897*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**SHAH, SHAILJA**
*Provider ID: 283898*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**TSAI, MATTHEW**
*Provider ID: 252369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**TSAI, MATTHEW**
*Provider ID: 252368*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**YOUSSEF, FADY**
*Provider ID: 300025*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265887723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**YOUSSEF, FADY**
*Provider ID: 300023*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265887723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GYNECOLOGIC ONCOLOGY**

**ESKANDER, RAMEZ**
*Provider ID: 282165*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144486929*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**AL-BANAA, KADHIM**
*Provider ID: 313022*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1548790041*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**ASIMAKOPOULOS, FOTIOS**
*Provider ID: 246594*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6100*
*After Hours Phone: (858) 822-6100*
*Provider Gender: Male*
*NPI: 1518134923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**CHANG, JEREMY**
*Provider ID: 314055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-1276*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-1276*
*Provider Gender: Male*
*NPI: 1699206839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**CHEN, YU-WEI**
*Provider ID: 303058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1245694801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**CHEN, YU-WEI**
*Provider ID: 303057*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1245694801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**HAMDAN, AYAD**
*Provider ID: 241429*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3960 HEALTH SCIENCES DRIVE
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144431230*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**HEYMAN, BENJAMIN**
*Provider ID: 202663*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982995809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**HEYMAN, BENJAMIN**
*Provider ID: 202664*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982995809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**HEYMAN, BENJAMIN**
*Provider ID: 202662*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982995809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU-SA 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**PARK, SOO**
*Provider ID: 257202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1821351198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**RICHARDSON, ANGELIQUE**
*Provider ID: 215010*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700120102*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**STEWART, TYLER**
*Provider ID: 243920*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699110676*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**VU, PETER**
*Provider ID: 272717*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861810830*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / PATHOLOGY**

**WANG, HUAN YOU**
*Provider ID: 247584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689633729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / PATHOLOGY**

**WANG, HUAN YOU**
*Provider ID: 275792*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689633729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEPATOLOGY**

**BARMAN, PRANAB**
*Provider ID: 241954*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023301991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HEPATOLOGY

**BARMAN, PRANAB**
*Provider ID: 241952*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR STE 2C
LA JOLLA, CA 92037
*Phone: (619) 543-5415*
*After Hours Phone: (619) 543-5415*
*Provider Gender: Male*
*NPI: 1023301991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPICE AND PALLIATIVE MEDICINE

**RUBENZIK, TAMARA**
*Provider ID: 245574*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPITALIST MD/DO

**CHILDERS, DIANA**
*Provider ID: 275069*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033128376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPITALIST MD/DO

**CHILDERS, DIANA**
*Provider ID: 275070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033128376*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**FIRESTEIN, CATHERINE**
*Provider ID: 275388*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427348382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**HAMMOND, CHARLES**
*Provider ID: 278589*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033641816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**LE ROUX, MICHELLE**
*Provider ID: 311568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144808353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**RAMIREZ SANCHEZ, CLAUDIA**
*Provider ID: 299947*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659720555*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**INFECTIOUS DISEASE**

**TANG, MICHAEL**
*Provider ID: 300063*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982018545*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BARRIOLA RUBARTH, RODRIGO**
*Provider ID: 311571*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1336729979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273984*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (760) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (760) 471-9186*
*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273985*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**CHENG, GEORGE**
*Provider ID: 247640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316174568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**DJEKIC, KRISTINA**
*Provider ID: 286669*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417343732*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**FOX, SUTTON**
*Provider ID: 313473*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1326624008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**HOGARTH, MICHAEL**
*Provider ID: 214385*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1225019193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**IBARRA, ALLISON**
*Provider ID: 312686*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1881221273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**IVANOV, MARGARET**
*Provider ID: 272876*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1326427014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**JABBOUR, MOUSSA**
*Provider ID: 256658*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1255741633*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KATZ, YISRAEL**
*Provider ID: 272937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730507872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KVIATKOVSKY, MILLA**
*Provider ID: 274002*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Female*
*NPI: 1366855355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KVIATKOVSKY, MILLA**
*Provider ID: 274004*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366855355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LAGO HERNANDEZ, CARLOS**
*Provider ID: 238623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558756270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**INTERNAL MEDICINE**

**LAGO HERNANDEZ, CARLOS**
*Provider ID: 238624*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558756270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LAM, MICHAEL**
*Provider ID: 274409*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578974259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MAJITHIA, AMIT**
*Provider ID: 255881*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801091459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MARINO, NIKOLAS**
*Provider ID: 313524*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316523988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**INTERNAL MEDICINE**

**NGUYEN, MICHELLE**
*Provider ID: 311485*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOKES, BRANDON**
*Provider ID: 287581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487040051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOVIKOV, YEVGENY**
*Provider ID: 313731*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144682428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**POTOK, OLIVIA**
*Provider ID: 272707*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 543-6397*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-6397*
*Provider Gender: Female*
*NPI: 1073951323*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SEBASKY, MEGHAN**
*Provider ID: 273963*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 471-9186*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Female*
*NPI: 1538351408*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SEBASKY, MEGHAN**
*Provider ID: 273964*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538351408*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SIRIPHAND, CHRISTOPHER**
*Provider ID: 311446*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891258596*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SMITH, CHELSEY**
*Provider ID: 239921*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013264506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TAYLOR, DAVID**
*Provider ID: 274470*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033572995*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WANG, ANGELA**
*Provider ID: 259536*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730133976*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WONG, JUSTIN**
*Provider ID: 313598*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740869387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**YADLAPATI, RENA**
*Provider ID: 238587*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548597784*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**YADLAPATI, RENA**

*Provider ID: 238586*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548597784*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**YANG, JENNY**
*Provider ID: 283025*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346636453*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**ZHANG, SHERRY**
*Provider ID: 272658*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1588198147*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ALOTAIBI, MONA**
*Provider ID: 271480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174933915*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BARNES, LAURA**
*Provider ID: 312183*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558749242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BOROK, ZEA**
*Provider ID: 284703*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-5273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-5273*
*Provider Gender: Female*
*NPI: 1750317251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**DEWOLF, SEAN**
*Provider ID: 311454*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518312230*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**HEPOKOSKI, MARK**
*Provider ID: 311547*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1649408790*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**IBRAHIM, ISLAM**
*Provider ID: 311488*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7125*
*Fax: (858) 822-5338*
*After Hours Phone: (858) 657-7125*
*Provider Gender: Male*
*NPI: 1962586917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**
*Provider ID: 311592*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**KAMDAR, BIREN**
*Provider ID: 311451*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1528115417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 271468*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992141428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**PAGE, BRADY**
*Provider ID: 313676*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528557550*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 271938*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**AL KHIAMI, BELAL**
*Provider ID: 275993*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**BUI, QUAN**
*Provider ID: 310077*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831553718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 300062*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**DAMANI, SAMIR**
*Provider ID: 303097*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 650
LA JOLLA, CA 92037
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**LACHARITE-ROBERGE, ANNE-SOPHIE**
*Provider ID: 311130*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1285089805*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, JANET**
*Provider ID: 311578*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1922454396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, GARY**
*Provider ID: 313302*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437503208*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**INTERVENTIONAL CARDIOLOGY**

**SORIA JIMENEZ, CESAR**

*Provider ID: 311092*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1851826713*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**TAUB, PAM**

*Provider ID: 277682*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346355161*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**TAUB, PAM**

*Provider ID: 277681*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346355161*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**WETTERSTEN, NICHOLAS**

*Provider ID: 210604*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

*Phone: (858) 657-8530*

*Fax: (858) 657-8814*

*After Hours Phone: (858) 657-8530*

*Provider Gender: Male*

*NPI: 1063701068*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**BALLAS, JERASIMOS**
*Provider ID: 209561*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871767384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300009*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**HULL, ANDREW**
*Provider ID: 209482*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Male*
*NPI: 1902862121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**LAURENT, LOUISE**

*Provider ID: 208639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770532707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 240599*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**NHAN-CHANG, CHIA-LING**
*Provider ID: 312715*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265686794*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**WOELKERS, DOUGLAS**
*Provider ID: 209383*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Male*
*NPI: 1013965748*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**WOLF, RICHARD**
*Provider ID: 209252*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497713846*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEONATAL / PERINATAL MEDICINE**

**BAI-TONG, SHIYU**
*Provider ID: 283287*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 249-5800*
*After Hours Phone: (858) 249-5800*
*Provider Gender: Female*
*NPI: 1528454188*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**DEL ROSARIO, PAMELA**
*Provider ID: 295001*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 249-5800*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 249-5800*
*Provider Gender: Female*
*NPI: 1952691941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**HIETALATI, SAMANTHA**
*Provider ID: 294252*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 249-5800*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 249-5800*
*Provider Gender: Female*
*NPI: 1245617489*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 299893*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 249-5800*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 249-5800*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 297977*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR
STE 8
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**

*Provider ID: 301824*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9888 GENESEE AVE
LA JOLLA, CA 92037

*Phone: (858) 626-4123*

*Fax: (760) 633-7998*

*After Hours Phone: (858) 626-4123*

*Provider Gender: Female*

*NPI: 1003260951*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**PHAM, BETTY**

*Provider ID: 310311*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9300 CAMPUS POINT DR FL 8
LA JOLLA, CA 92037

*Phone: (858) 249-5800*

*Fax: (858) 249-5839*

*After Hours Phone: (858) 249-5800*

*Provider Gender: Female*

*NPI: 1790217750*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAJTI, ENIKO**

*Provider ID: 206170*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 249-5800*

*Fax: (858) 249-5839*

*After Hours Phone: (858) 249-5800*

*Provider Gender: Female*

*NPI: 1649433103*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**

*Provider ID: 303907*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

9888 GENESEE AVE
LA JOLLA, CA 92037
*Phone: (858) 626-4123*
*Fax: (760) 633-7998*
*After Hours Phone: (858) 626-4123*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEONATAL / PERINATAL MEDICINE

**SAUER, CHARLES**
*Provider ID: 303908*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

9300 CAMPUS POINT DR
FL 8
LA JOLLA, CA 92037
*Phone: (858) 249-5800*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 249-5800*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEPHROLOGY

**RIFKIN, DENA**
*Provider ID: 311023*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## NEPHROLOGY

# D. Specialist Provider Directory

**RIFKIN, DENA**
*Provider ID: 311022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311155*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311157*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311156*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**NEPHROLOGY**

**SINGH, PRABHLEEN**

*Provider ID: 311035*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1235207234*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Punjabi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SINGH, PRABHLEEN**

*Provider ID: 311034*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1235207234*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Punjabi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**GHOLIPOUR, TAHA**

*Provider ID: 311497*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801159611*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Persian*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**HAMILTON, ROSS**

*Provider ID: 311789*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

9850 GENESEE AVE STE 530
LA JOLLA, CA 92037

*Phone: (760) 631-3000*

*Fax: (760) 631-3016*

*After Hours Phone: (760) 631-3000*

*Provider Gender: Male*

*NPI: 1538587852*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**ILICETO, ALESSANDRO**
*Provider ID: 313505*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831685577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 246701*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311187*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311522*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (585) 657-8540*
*After Hours Phone: (585) 657-8540*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 246264*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**MAHTA, ALI**
*Provider ID: 314333*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437387990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**QAYOUMI, WALI**
*Provider ID: 284371*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
*Phone: (619) 284-3746*
*Fax: (888) 579-8781*
*After Hours Phone: (619) 284-3746*
*Provider Gender: Male*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**QAYOUMI, WALI**
*Provider ID: 284369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
*Phone: (858) 822-5881*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 822-5881*
*Provider Gender: Male*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SCHULTE, JESSICA**
*Provider ID: 284819*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (858) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467870576*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**
*Provider ID: 311471*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790774156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**TECOMA, EVELYN**
*Provider ID: 311534*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Female*
*NPI: 1174556518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**UNG, HOAMENG**
*Provider ID: 311434*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1619438363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**WU, VICTORIA**
*Provider ID: 313038*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1649833039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NUCLEAR MEDICINE**

**CHEHABI, HAZEM**
*Provider ID: 314375*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528172996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NUCLEAR MEDICINE**

**CHEHABI, HAZEM**
*Provider ID: 314374*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528172996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311195*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311194*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**
*Provider ID: 291324*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790128759*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**
*Provider ID: 291323*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790128759*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291334*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291335*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311106*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311104*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**
*Provider ID: 313592*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427686930*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**

*Provider ID: 313594*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1427686930*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

*Provider ID: 278916*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 923-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 923-8273*

*Provider Gender: Male*

*NPI: 1457662868*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

*Provider ID: 278918*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1457662868*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**KLEIN, DAVID**

*Provider ID: 271559*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1780073635*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**KLEIN, DAVID**
*Provider ID: 271558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780073635*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
*Provider ID: 286230*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**
*Provider ID: 303062*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**
*Provider ID: 200964*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311117*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285740*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285739*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MELENDEZ, ARIANA**
*Provider ID: 299920*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295232973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**NUTAITIS, ALEXANDRA**
*Provider ID: 313547*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548897770*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**PENALOSA, PATRICK**
*Provider ID: 313494*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558998914*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**PENALOSA, PATRICK**
*Provider ID: 313493*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558998914*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**RIVAS, RENEE**
*Provider ID: 284296*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 340
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295263861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**RIVAS, RENEE**
*Provider ID: 284295*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295263861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**RIVAS, RENEE**
*Provider ID: 284297*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295263861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**SUYAMA, JULIE**
*Provider ID: 284289*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306372800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**THOMSON, SAMANTHA**
*Provider ID: 285173*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689013468*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**THOMSON, SAMANTHA**
*Provider ID: 285175*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689013468*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**FARBER, EMILY**
*Provider ID: 258537*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Female*
*NPI: 1417337403*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**LIPARI, RACHEL**
*Provider ID: 311102*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

926-8273
Provider Gender: Female
NPI: 1578129904
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OCCUPATIONAL THERAPIST**

**MUNCADA, CAESAR**
Provider ID: 288724
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790268100
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

**OCCUPATIONAL THERAPIST**

**PARKER, LESLIE**
Provider ID: 311354
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053143875
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OCCUPATIONAL THERAPIST**

**SOROKIN, LISA**
Provider ID: 258362
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1336445063
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**ALLEN, RACHAEL**
Provider ID: 315302
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
9834 GENESEE AVE STE 200
LA JOLLA, CA 92037
Phone: (858) 457-3050
Fax: (858) 457-0851
After Hours Phone: (858) 457-3050
Provider Gender: Female

*NPI: 1801275391*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BAXTER, SALLY**
*Provider ID: 272787*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 534-6290*
*Provider Gender: Female*
*NPI: 1912325184*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-5PM SA 7:45AM-2PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313680*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313682*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313683*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313684*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GIRKIN, CHRISTOPHER**
*Provider ID: 313495*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891730073*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GIRKIN, CHRISTOPHER**
*Provider ID: 313497*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891730073*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GIRKIN, CHRISTOPHER**
*Provider ID: 313498*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891730073*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HOYT, BRIGGS**
*Provider ID: 313717*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982232542*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HOYT, BRIGGS**
*Provider ID: 313718*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982232542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HSUEH, JESSICA**
*Provider ID: 313693*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952927584*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HSUEH, JESSICA**
*Provider ID: 313692*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952927584*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**
*Provider ID: 215055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**

*Provider ID: 311100*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1174152961*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**

*Provider ID: 311101*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1174152961*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**PETERSON, JONATHAN**

*Provider ID: 313538*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124641071*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**PETERSON, JONATHAN**

*Provider ID: 313537*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124641071*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**PUIG LLANO, MANUEL**

*Provider ID: 299965*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800)*

926-8273
Provider Gender: Male
NPI: 1427102979
Provider English Spoken: Y
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**VAIL, DANIEL**
Provider ID: 313580
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285262568
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**VAIL, DANIEL**
Provider ID: 313581
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285262568
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPTOMETRIST**

**DUONG, NGHI**
Provider ID: 314751
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
9834 GENESEE AVE STE 200
LA JOLLA, CA 92037
Phone: (858) 457-3050
Fax: (858) 457-0851
After Hours Phone: (858) 457-3050
Provider Gender: Female
NPI: 1285832501
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**OPTOMETRIST**

**HOO, PAMELA**
Provider ID: 269621
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 822-4438
After Hours Phone: (858) 534-6290
Provider Gender: Female

*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OPTOMETRIST**

**JOMOC, CAITLIN**
*Provider ID: 299914*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**JOMOC, CAITLIN**
*Provider ID: 299915*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**KIM, PHILIP**
*Provider ID: 287909*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Male*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**MCCLEAN, ESMERALDA**
*Provider ID: 269907*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 534-8293*
*After Hours Phone: (858) 534-6290*
*Provider Gender: Female*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 304148*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 201311*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*After Hours Phone: (858) 534-6290*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301682*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 258078*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299459*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299463*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299460*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299458*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6197*
*Fax: (858) 822-6198*
*After Hours Phone: (858) 822-6197*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299585*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 299570*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 299565*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 299566*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 299564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299557*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299562*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299563*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 298395*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 298394*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 272958*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**

*Provider ID: 298398*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1144583931*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**

*Provider ID: 299578*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1417988783*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**

*Provider ID: 299577*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1417988783*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**

*Provider ID: 299573*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1417988783*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299574*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299513*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299517*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299516*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**

*Provider ID: 299512*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1659305027*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**

*Provider ID: 301051*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124034053*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**

*Provider ID: 299444*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1780860536*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**

*Provider ID: 299447*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1780860536*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation:*

*CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 299442*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 857-8590*
*After Hours Phone: (858) 857-8590*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 299448*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 294828*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 857-8590*
*After Hours Phone: (858) 857-8590*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**

*Provider ID: 299483*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1891858379*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**

*Provider ID: 299478*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1891858379*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**

*Provider ID: 299484*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1891858379*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**

*Provider ID: 299479*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1891858379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299589*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299588*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299594*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299593*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

# D. Specialist Provider Directory

*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**PEREZ, ANGEL**
*Provider ID: 313031*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1881841971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299504*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6197*
*After Hours Phone: (858) 822-6197*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299505*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299506*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299510*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299644*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299638*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8590*
*Fax: (858) 657-8682*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

# D. Specialist Provider Directory

**WATSON, DEBORAH**
*Provider ID: 299640*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299643*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299616*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299611*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**

*Provider ID: 299613*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299612*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**
*Provider ID: 298411*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**
*Provider ID: 298415*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## OTOLARYNGOLOGY

**YAN, CAROL**

*Provider ID: 298416*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1619237260*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## OTOLARYNGOLOGY

**YAN, CAROL**

*Provider ID: 242138*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR STE LLA
LA JOLLA, CA 92037

*Phone: (858) 657-8590*

*After Hours Phone: (858) 657-8590*

*Provider Gender: Female*

*NPI: 1619237260*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## PATHOLOGY ANATOMIC

**FADARE, OLUWOLE**

*Provider ID: 275706*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1619955804*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## PATHOLOGY ANATOMIC

**HANSEN, LAWRENCE**

*Provider ID: 275768*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1760407498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**PARAST, MANA**
*Provider ID: 275889*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1629163100*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**PATEL, CHARMI**
*Provider ID: 259112*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730389362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**WONG, RICHARD**
*Provider ID: 275815*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275084295*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

# D. Specialist Provider Directory

**AISAGBONHI, OMONIGHO**
*Provider ID: 201304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043571045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**AISAGBONHI, OMONIGHO**
*Provider ID: 275750*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043571045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ALLEN, ELIZABETH**
*Provider ID: 275757*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174814065*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BROOME, HELEN**
*Provider ID: 275722*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184674145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BUI, JACK**
*Provider ID: 275746*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942529821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**DON, MICHELLE**
*Provider ID: 247149*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 249-4410*
*After Hours Phone: (858) 249-4410*
*Provider Gender: Female*
*NPI: 1205288396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**DON, MICHELLE**
*Provider ID: 275816*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205288396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**HU, JINGJING**
*Provider ID: 243965*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538574744*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**HU, JINGJING**
*Provider ID: 243966*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538574744*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ROMA, ANDRES**
*Provider ID: 275827*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295912657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**SHABAIK, AHMED**
*Provider ID: 275782*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679521579*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**VAVINSKAYA, VERA**
*Provider ID: 275840*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174757181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZARE, SOMAYE**
*Provider ID: 203172*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700334802*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZARE, SOMAYE**
*Provider ID: 275814*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700334802*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZHANG, HAIYAN**
*Provider ID: 203176*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1457617110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZHANG, HAIYAN**
*Provider ID: 275841*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1457617110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY CLINICAL**

**KELNER, MICHAEL**
*Provider ID: 275735*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174679849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PEDIATRIC NEPHROLOGY**

**CRANE, CLARKSON**
*Provider ID: 312986*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689036436*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ALBRIGHT, KELSEY**
*Provider ID: 284764*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235653148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ALLERS, JENNA**
*Provider ID: 301037*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730605486*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ARMEEN, GARY**
*Provider ID: 247036*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1760774863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**BOYD, LISA**
*Provider ID: 217650*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871859421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**BRUECKNER, TAMMIE**
*Provider ID: 255557*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407212376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**CHERRY, REENA**
*Provider ID: 243349*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689729683*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**CHERRY, REENA**
*Provider ID: 269494*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689729683*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**COOKISH, DAVID**
*Provider ID: 286591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1215338884*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**CRIPE, TAYLOR**
*Provider ID: 210983*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659827087*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**DEMASCO, MICHAEL**
*Provider ID: 278969*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1467926295*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**DEMOOR, PATRICIA**
*Provider ID: 212879*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1477721702*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311551*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 247205*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287136*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287135*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 279334*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 826-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 826-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 298432*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 287450*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLA
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 298429*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 298431*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LEE, JENNIFER**
*Provider ID: 309997*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LEE, JENNIFER**
*Provider ID: 309996*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LIN, JOYCE**
*Provider ID: 265146*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 888-9268*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 888-9268*
*Provider Gender: Female*
*NPI: 1427681022*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Taiwanese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LIN, JOYCE**
*Provider ID: 265147*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 554-1212*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1427681022*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Taiwanese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LUONG, TRAN**
*Provider ID: 279015*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1821532292*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LUONG, TRAN**
*Provider ID: 279014*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1821532292*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MARTIN, HALEY**
*Provider ID: 305024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093440836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MARTIN, HALEY**
*Provider ID: 305027*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093440836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MCADAMS, JOSEPH**
*Provider ID: 280612*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1104371251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MERRILL, COREY**
*Provider ID: 258039*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386032308*

**PHYSICIANS ASSISTANT**

**MARTIN, HALEY**
*Provider ID: 305025*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093440836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**OKADA, MICHELLE**
*Provider ID: 278017*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497129860*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**OKADA, MICHELLE**
*Provider ID: 278016*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497129860*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293440*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-7967*
*Fax: (858) 822-6395*
*After Hours Phone: (858) 822-7967*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293442*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8276*
*Fax: (888) 539-8784*

*After Hours Phone: (800) 926-8276*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PERREAULT, MARK**
*Provider ID: 283583*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356749451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**
*Provider ID: 253254*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 543-5540*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Female*
*NPI: 1265960256*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PERREAULT, MARK**
*Provider ID: 283584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356749451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**
*Provider ID: 253255*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 657-7876*
*After Hours Phone: (858) 657-7876*
*Provider Gender: Female*
*NPI: 1265960256*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ROMO, JORGE**
*Provider ID: 309983*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275962383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SANCHEZ, MICHAEL**
*Provider ID: 206907*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184135006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SCHWARTZEL, KEVIN**
*Provider ID: 214276*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1104277847*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-8PM*
*M-F 8AM-5PM*
*SA 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SERHAN, STEPHANIE**
*Provider ID: 312858*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487438750*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SMITH, TREVOR**
*Provider ID: 313666*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821573718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SMITH, TREVOR**
*Provider ID: 313667*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821573718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SMITH, TREVOR**
*Provider ID: 313668*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821573718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**
*Provider ID: 311090*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**THOMAS, THEA**
*Provider ID: 312697*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1457718843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**THOMAS, THEA**
*Provider ID: 312696*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1457718843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**
*Provider ID: 299596*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083823322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**
*Provider ID: 299601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083823322*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**
*Provider ID: 299602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083823322*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WEIR, JACQUELINE**
*Provider ID: 278202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (800) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932494499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BOOTH, CHRISTOPHER**
*Provider ID: 209117*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BOOTH, CHRISTOPHER**
*Provider ID: 209118*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BOUTELLE, KERRI**
*Provider ID: 240034*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780620906*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BOUTELLE, KERRI**
*Provider ID: 258988*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C212
LA JOLLA, CA 92037
*Phone: (858) 246-1654*
*After Hours Phone: (858) 246-1654*
*Provider Gender: Male*
*NPI: 1780620906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BOUTELLE, KERRI**
*Provider ID: 302876*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780620906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**CHESHER, NICHOLAS**
*Provider ID: 273812*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124539697*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**CRANDAL, BRENT**
*Provider ID: 291463*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8372*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Male*
*NPI: 1588739452*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**DUARTE, KRISTEN**
*Provider ID: 255479*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**DUARTE, KRISTEN**
*Provider ID: 255480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**EGAN, KAITLYN**
*Provider ID: 311171*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1629653860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**EICHEN, DAWN**
*Provider ID: 245715*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**EICHEN, DAWN**
*Provider ID: 259524*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C212
LA JOLLA, CA 92037
*Phone: (858) 246-1654*
*Fax: (858) 246-3181*
*After Hours Phone: (858) 246-1654*
*Provider Gender: Female*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**EICHEN, DAWN**
*Provider ID: 302888*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**LASSWELL, EVE**
*Provider ID: 208260*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013483635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**MENDEZ, ANDRES**
*Provider ID: 279058*
*Board Certified Specialty: No*

# D. Specialist Provider Directory

*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841482692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**PELHAM, WILLIAM**
*Provider ID: 307681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306629399*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**REED, KRISTIE**
*Provider ID: 291395*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1679869556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**REED, KRISTIE**
*Provider ID: 302867*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1679869556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**TARLE, STEPHANIE**
*Provider ID: 303116*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659920403*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**THOMAS, KELSEY**
*Provider ID: 311589*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**THOMAS, KELSEY**
*Provider ID: 310060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**ZLATAR, ZVINKA**
*Provider ID: 272712*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497139059*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**BAILEY, JACOB**
*Provider ID: 299925*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598150039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**CYPRO, ALEXANDER**
*Provider ID: 313678*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881126936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**HOGAN, NICHOLAS**
*Provider ID: 313712*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861925273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**JOSHUA, JISHA**
*Provider ID: 238060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1023436417*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Malayalam*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**LEVERONE, NICHOLAS**
*Provider ID: 313305*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1407388564*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**MCGUIRE, WILLIAM**
*Provider ID: 299987*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841684081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**PEARCE, ALEX**
*Provider ID: 300054*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265896856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIATION ONCOLOGY**

**HOPPER, AUSTIN**
*Provider ID: 313012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3960 HEALTH SCIENCES DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1306308721*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIATION ONCOLOGY**

**HOPPER, AUSTIN**
*Provider ID: 313013*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1306308721*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIATION ONCOLOGY**

**LUI, ASONA**
*Provider ID: 311440*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3960 HEALTH SCIENCES DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104487446*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIATION ONCOLOGY**

**LUI, ASONA**
*Provider ID: 311439*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104487446*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ADAMS, STEPHEN**
*Provider ID: 311198*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311086*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BERMAN, ZACHARY**
*Provider ID: 269319*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033521190*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BISSET, LOGAN**
*Provider ID: 311145*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BLACKWELL, CHRISTOPHER**
*Provider ID: 313486*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740740125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BLACKWELL, CHRISTOPHER**
*Provider ID: 313487*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740740125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311167*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 283676*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311081*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311136*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303056*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 283227*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHRISTENSEN, DIANA**
*Provider ID: 313646*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578079786*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHRISTENSEN, DIANA**
*Provider ID: 313645*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578079786*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CIRIELLO, JONATHAN**

*Provider ID: 313503*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1720540743*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CIRIELLO, JONATHAN**

*Provider ID: 313502*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1720540743*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CRAMER, SCOTT**

*Provider ID: 313576*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1598225740*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CRAMER, SCOTT**

*Provider ID: 313577*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1598225740*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**

*Provider ID: 299993*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1639553613*

# D. Specialist Provider Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FORCIER, NANCY**
*Provider ID: 286955*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497721724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FOWLER, KATHRYN**
*Provider ID: 201290*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255457941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311149*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311596*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311597*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**
*Provider ID: 271568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720465396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**
*Provider ID: 282790*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992120026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Khmer, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311122*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311097*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HENNEMEYER, CHARLES**
*Provider ID: 312881*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548209539*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HENNEMEYER, CHARLES**
*Provider ID: 312882*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548209539*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HURT, BRIAN**
*Provider ID: 313603*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306370465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HURT, BRIAN**
*Provider ID: 313602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306370465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**JAFFRAY, PAUL**
*Provider ID: 299959*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275700999*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Los Angeles General Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KAKISH, DAVID**
*Provider ID: 313589*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588123863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KAKISH, DAVID**
*Provider ID: 313590*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR

LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588123863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KHURANA, AMAN**
*Provider ID: 307767*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427496710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KHURANA, AMAN**
*Provider ID: 312890*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427496710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KONDILI, DHIMITER**
*Provider ID: 283144*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699125450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**LIM, GARRETT**
*Provider ID: 313544*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396233565*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**LIM, GARRETT**
*Provider ID: 313543*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396233565*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**MARKS, ROBERT**
*Provider ID: 300066*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952389934*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST MARY MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**PANZARINI, BRUNO**
*Provider ID: 313777*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649776915*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**PANZARINI, BRUNO**
*Provider ID: 313778*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649776915*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**POHLEN, MICHAEL**

*Provider ID: 313559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285130906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**POHLEN, MICHAEL**
*Provider ID: 313560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285130906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311170*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROBINSON, ADAM**
*Provider ID: 313699*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730685611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROBINSON, ADAM**
*Provider ID: 313700*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730685611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROTMAN, YONATAN**
*Provider ID: 313554*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1326542341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROTMAN, YONATAN**
*Provider ID: 313555*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1326542341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROZELL, JOSEPH**
*Provider ID: 311180*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629368519*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SADAT, SAYED**
*Provider ID: 299967*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679000806*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SCHULTZ, HEATHER**
*Provider ID: 240343*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871910810*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SEARLEMAN, ADAM**
*Provider ID: 299950*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134570641*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SHWAIKI, OMAR**
*Provider ID: 313564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487117826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SHWAIKI, OMAR**
*Provider ID: 313565*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487117826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SLATER, JERRY**
*Provider ID: 283311*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851746382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPARKS, CHELSEA**
*Provider ID: 313625*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366901662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPARKS, CHELSEA**
*Provider ID: 313626*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366901662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPENGLER, NATHAN**
*Provider ID: 312877*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992919666*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation:*

*UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPENGLER, NATHAN**
*Provider ID: 303050*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992919666*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**STEPENOSKY, JAMES**
*Provider ID: 309704*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598738577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311563*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-6641*
*After Hours Phone: (858) 657-6641*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311566*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240406*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADROS, ANTHONY**
*Provider ID: 268545*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306112057*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**VAHDAT, NOUSHIN**
*Provider ID: 300069*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396700852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**RADIOLOGY DIAGNOSTIC**

**WANG, LAWRENCE**
*Provider ID: 313707*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013440965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**WELSH, RAYMOND**
*Provider ID: 314370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932370384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YIN, JANE**
*Provider ID: 313640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014405*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YIN, JANE**
*Provider ID: 313641*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014405*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED DIETITIAN / NUTRITIONIST**

**SIEVERING, DENISE**
*Provider ID: 268249*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1356478929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BALL, STEPHEN**
*Provider ID: 311014*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437644044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BERGERON, PATRICK**
*Provider ID: 258296*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285061390*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BERGERON, PATRICK**
*Provider ID: 206533*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285061390*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BOEHMER, ALEXANDRA**
*Provider ID: 311059*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

# D. Specialist Provider Directory

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528789856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**
*Provider ID: 246021*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780018416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**CHIEN, PEI**
*Provider ID: 214699*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891260238*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**CHIEN, PEI**
*Provider ID: 258324*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891260238*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**HOUSELY, ALEXIS**

*Provider ID: 299971*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689321416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**MAROLLA, ALICE**
*Provider ID: 241145*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477018729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**RUDD, CHRISTOPHER**
*Provider ID: 258372*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1831539337*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**RUDD, CHRISTOPHER**
*Provider ID: 207559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831539337*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**SKINNER, NICOLE**
*Provider ID: 206546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386964997*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**TRIMM, CASSIDY**
*Provider ID: 258443*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1740708478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**TRIMM, CASSIDY**
*Provider ID: 258442*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1740708478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**VASQUEZ, BENJAMIN**
*Provider ID: 258480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
*Phone: (858) 657-6879*
*Fax: (858) 657-6873*
*After Hours Phone: (858) 657-6879*
*Provider Gender: Male*
*NPI: 1568938413*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**VASQUEZ, BENJAMIN**
*Provider ID: 200968*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568938413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**WILLIAMS, STACY**
*Provider ID: 258496*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (858) 657-6879*
*Fax: (858) 657-6873*
*After Hours Phone: (858) 657-6879*
*Provider Gender: Female*
*NPI: 1689962169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**YU, AUDRINE**
*Provider ID: 258481*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (858) 657-6879*
*Fax: (858) 657-6873*
*After Hours Phone: (858) 657-6879*
*Provider Gender: Female*
*NPI: 1639271208*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SPEECH PATHOLOGIST**

**SCHIEDERMAYER, BENJAMIN**
*Provider ID: 288938*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR

LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164979837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SPEECH PATHOLOGIST**

**SCHIEDERMAYER, BENJAMIN**
*Provider ID: 288939*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164979837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SPEECH PATHOLOGIST**

**UNGER, LINDSEY**
*Provider ID: 265338*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972936813*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LIU, SHANGLEI**
*Provider ID: 273364*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043558653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LOPEZ, NICOLE**

*Provider ID: 286388*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6100*
*After Hours Phone: (858) 822-6100*
*Provider Gender: Female*
*NPI: 1518163005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY COLON SURGERY

**PARRY, LISA**
*Provider ID: 278551*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY COLON SURGERY

**RAMAMOORTHY, SONIA**
*Provider ID: 286371*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801812656*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY CRITICAL CARE

**ADAMS, LAURA**
*Provider ID: 284408*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144616541*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**SURGERY CRITICAL CARE**

**POTENZA, BRUCE**

*Provider ID: 277299*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (619) 543-7200*

*After Hours Phone: (619) 543-7200*

*Provider Gender: Male*

*NPI: 1548281496*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**VENTRO, GEORGE**

*Provider ID: 284419*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1548604648*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**ARMANI, AVA**

*Provider ID: 282142*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

*Phone: (858) 822-6100*

*After Hours Phone: (858) 822-6100*

*Provider Gender: Female*

*NPI: 1861759383*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**BORTZ, PASCAL**

*Provider ID: 313995*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

9850 GENESEE AVE STE 570
LA JOLLA, CA 92037

*Phone: (858) 457-4917*

*After Hours Phone: (858) 457-4917*

*Provider Gender: Male*

*NPI: 1821330796*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**CLARY, BRYAN**
*Provider ID: 202568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982787131*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HOLLANDSWORTH, HANNAH**
*Provider ID: 310728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972954303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HORGAN, SANTIAGO**
*Provider ID: 286380*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 471-0755*
*After Hours Phone: (619) 471-0755*
*Provider Gender: Male*
*NPI: 1932297231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 201728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 471-0755*
*After Hours Phone: (619) 471-0755*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANTORELLI, JARRETT**
*Provider ID: 272304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033529201*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SIMEONE, DIANE**
*Provider ID: 311176*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215038138*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL VASCULAR**

**GAFFEY, ANN**
*Provider ID: 287012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1316232010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL VASCULAR**

**HOWE, STEVEN**
*Provider ID: 206760*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (858) 657-7777*
*Fax: (858) 657-5058*

*After Hours Phone: (858) 657-7777*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY HAND ORTHOPEDIC

**STEPHENSON, SAMUEL**
*Provider ID: 284935*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578058665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY HAND ORTHOPEDIC

**STEPHENSON, SAMUEL**
*Provider ID: 284936*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578058665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY NEUROLOGICAL

**BARBA, DAVID**
*Provider ID: 275678*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE 2A
LA JOLLA, CA 92037
*Phone: (619) 543-5540*
*Fax: (619) 287-7663*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Male*
*NPI: 1093730251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BEAUMONT, THOMAS**
*Provider ID: 214126*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Male*
*NPI: 1497067573*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BEN-HAIM, SHARONA**
*Provider ID: 244070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942469663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BLASKIEWICZ, DONALD**
*Provider ID: 270282*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1215176839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**HATEFI, DUSTIN**
*Provider ID: 310034*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD*

*MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**KHANNA, ARJUN**
*Provider ID: 311542*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780079954*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**KHANNA, ARJUN**
*Provider ID: 311543*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780079954*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MARSHALL, LAWRENCE**
*Provider ID: 244149*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1750306171*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 299994*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 299995*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (619) 543-5540*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**
*Provider ID: 242006*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437416591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**
*Provider ID: 242005*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437416591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**PHAM, MARTIN**
*Provider ID: 244159*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609130921*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**U, HOI**
*Provider ID: 244133*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164468146*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BOCKHORN, LAUREN**
*Provider ID: 313621*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902369366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BOCKHORN, LAUREN**
*Provider ID: 313620*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902369366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BUKATA, SUSAN**
*Provider ID: 277947*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932140639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHIARAPPA, FRANK**

*Provider ID: 244460*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932536828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHOI, JIHOON**
*Provider ID: 284786*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8181*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285097741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHOI, JIHOON**
*Provider ID: 284787*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285097741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CORTES, ALEJANDRO**
*Provider ID: 313518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1972066785*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CORTES, ALEJANDRO**
*Provider ID: 313519*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1972066785*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**DIJANIC, CHRISTOPHER**
*Provider ID: 313481*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295396281*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**DIJANIC, CHRISTOPHER**
*Provider ID: 313480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295396281*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**GEORGE, JOSE**
*Provider ID: 313606*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528528668*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**GEORGE, JOSE**
*Provider ID: 313605*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528528668*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**GOEB, YANNICK**
*Provider ID: 284792*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730542747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**GOEB, YANNICK**
*Provider ID: 284793*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730542747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**PASSIAS, BRADEN**
*Provider ID: 313510*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144783028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**PASSIAS, BRADEN**
*Provider ID: 313511*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144783028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SEDGHI, SOUDABEH**
*Provider ID: 313490*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619438199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SEDGHI, SOUDABEH**
*Provider ID: 313491*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619438199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**
*Provider ID: 285246*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437565488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**
*Provider ID: 285245*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 657-8200*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8200*
*Provider Gender: Male*
*NPI: 1437565488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**
*Provider ID: 277289*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346674561*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY THORACIC**

**BOYS, JOSHUA**
*Provider ID: 243533*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7777*
*After Hours Phone: (858) 657-7777*
*Provider Gender: Male*
*NPI: 1114368990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**KEARNS, MARK**
*Provider ID: 274296*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8817*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8817*
*Provider Gender: Male*
*NPI: 1033683719*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**KEARNS, MARK**
*Provider ID: 274297*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (858) 647-8817*
*Fax: (858) 853-9878*
*After Hours Phone: (858) 647-8817*
*Provider Gender: Male*
*NPI: 1033683719*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**POLLEMA, TRAVIS**
*Provider ID: 210576*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871752956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**RAMIREZ, ALFREDO**
*Provider ID: 256390*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003829417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**ZANDER, ASHLEY**
*Provider ID: 291383*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780940031*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**ZANDER, ASHLEY**
*Provider ID: 291382*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780940031*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**ZANDER, ASHLEY**
*Provider ID: 291381*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780940031*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**BAGRODIA, ADITYA**
*Provider ID: 286165*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730310665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**CRAWFORD, ELWARD**
*Provider ID: 244131*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 657-7876*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-7876*
*Provider Gender: Male*
*NPI: 1902814379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**GRIFFITHS, LUKE**
*Provider ID: 311498*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1760945836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**KANE, CHRISTOPHER**
*Provider ID: 312867*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083636294*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311609*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (858) 453-5944*
*Fax: (858) 429-7925*
*After Hours Phone: (858) 453-5944*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## LA MESA

**CARDIOVASCULAR DISEASE**

**KOTHA, PURUSHOTHAM**
*Provider ID: 32053*
*Board Certified Specialty: Yes*
*PURUSHOTHAM AND AKTHER KOTHA MD INC*
8860 CENTER DR STE 400
LA MESA, CA 91942
*Phone: (619) 229-1995*
*Fax: (619) 229-1109*
*After Hours Phone: (619) 229-1995*
*Provider Gender: Male*
*NPI: 1093730814*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish,*

*Telugu*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CARDIOVASCULAR DISEASE**

**REDDY, REDDIWANDLA**
*Provider ID: 265393*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
5565 GROSSMONT CENTER DR STE 202
LA MESA, CA 91942
*Phone: (619) 461-6130*
*Fax: (619) 461-3108*
*After Hours Phone: (619) 461-6130*
*Provider Gender: Male*
*NPI: 1710996384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Kannada, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**CARDIOVASCULAR DISEASE**

**SHEREV, DIMITRI**
*Provider ID: 290704*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8851 CENTER DR STE 304
LA MESA, CA 91942
*Phone: (619) 582-4490*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 582-4490*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 295955*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8851 CENTER DR STE 501
LA MESA, CA 91942
*Phone: (619) 697-2456*
*Fax: (858) 429-7930*
*After Hours Phone: (619) 697-2456*
*Provider Gender: Female*
*NPI: 1457670119*

# D. Specialist Provider Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## HEARING AID DEALER / SUPPLIER

**ANDERSON, ELAINE**
*Provider ID: 268693*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5565 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 589-5414*
*Fax: (619) 589-7391*
*After Hours Phone: (619) 589-5414*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## HOSPITALIST MD/DO

**DUBE, AMANDA**
*Provider ID: 311744*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-6000*
*Fax: (619) 740-4885*
*After Hours Phone: (619) 740-6000*
*Provider Gender: Female*
*NPI: 1710407531*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## HOSPITALIST MD/DO

**KUPELIAN, CHLOE**
*Provider ID: 310786*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-6000*
*Fax: (619) 740-4885*
*After Hours Phone: (619) 740-6000*
*Provider Gender: Female*
*NPI: 1780013748*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## INTERVENTIONAL CARDIOLOGY

**TAGHIZADEH, BEHZAD**
*Provider ID: 269161*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8851 CENTER DR STE 405
LA MESA, CA 91942
*Phone: (619) 582-2404*
*Fax: (619) 582-2915*

*After Hours Phone: (619) 582-2404*
*Provider Gender: Male*
*NPI: 1275514986*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**YELLEN, LAURENCE**
*Provider ID: 269173*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8851 CENTER DR STE 405
LA MESA, CA 91942
*Phone: (619) 582-2404*
*Fax: (619) 582-2915*
*After Hours Phone: (619) 582-2404*
*Provider Gender: Male*
*NPI: 1477680551*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, USC Arcadia Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**MATERNAL AND FETAL MEDICINE**

**ADAMI, REBECCA**
*Provider ID: 272676*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1992149447*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**MCCULLOUGH, DEIRDRE**
*Provider ID: 244873*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1639153018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR*

*WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296997*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8851 CENTER DR STE 201
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294656*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8851 CENTER DR STE 201
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294654*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 277317*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**
*Provider ID: 277305*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1477563302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**MOHAMMAD, AHMAD SHAH**
*Provider ID: 39868*
*Board Certified Specialty: No*
*EAST COUNTY NEUROLOGY ASSOCIATES INC*
8851 CENTER DR STE 307
LA MESA, CA 91942
*Phone: (619) 337-7900*
*Fax: (619) 337-7902*
*After Hours Phone: (619) 337-7900*
*Provider Gender: Male*
*NPI: 1902973472*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Arabic, Farsi, French, German, Pashto, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OPHTHALMOLOGY**

**BARNARD, LUKE**
*Provider ID: 310548*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (800) 898-2020*
*Fax: (626) 574-7188*
*After Hours Phone: (800) 898-2020*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BARNARD, LUKE**
*Provider ID: 311673*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (800) 898-2020*
*Fax: (626) 574-7188*
*After Hours Phone: (800) 898-2020*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 297577*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (626) 206-0633*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 206-0633*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 306768*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (626) 206-0633*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 206-0633*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 297578*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (626) 412-4040*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 412-4040*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 312357*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (626) 412-4040*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 412-4040*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MOSHTAGHI, OMID**
*Provider ID: 302380*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942
*Phone: (619) 464-3353*
*Fax: (619) 464-6720*
*After Hours Phone: (619) 464-3353*
*Provider Gender: Male*
*NPI: 1730675927*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**MOSHTAGHI, OMID**
*Provider ID: 312373*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942
*Phone: (619) 464-3353*
*Fax: (619) 464-6720*
*After Hours Phone: (619) 464-3353*
*Provider Gender: Male*
*NPI: 1730675927*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**SAID, MENA**
*Provider ID: 311787*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942
*Phone: (619) 464-3353*
*Fax: (619) 464-6720*
*After Hours Phone: (619) 464-3353*
*Provider Gender: Male*
*NPI: 1053859678*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**RAYMOND, ALAIN**
*Provider ID: 269057*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8851 CENTER DR STE 505
LA MESA, CA 91942
*Phone: (619) 461-3880*
*Fax: (619) 461-3895*
*After Hours Phone: (619) 461-3880*
*Provider Gender: Male*
*NPI: 1164729125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Haitian Creole*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**WHITE, KYLE**

*Provider ID: 302382*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942

*Phone: (619) 464-3353*

*Fax: (619) 464-7509*

*After Hours Phone: (619) 464-3353*

*Provider Gender: Male*

*NPI: 1922768860*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**

*Provider ID: 308638*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942

*Phone: (619) 303-7130*

*Fax: (619) 303-7150*

*After Hours Phone: (619) 303-7130*

*Provider Gender: Male*

*NPI: 1396230298*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**

*Provider ID: 308213*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942

*Phone: (619) 303-7130*

*Fax: (619) 303-7150*

*After Hours Phone: (619) 303-7130*

*Provider Gender: Male*

*NPI: 1396230298*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**TRAN, HEATHER**

*Provider ID: 314735*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 3
LA MESA, CA 91942
*Phone: (619) 303-7130*
*Fax: (619) 303-7150*
*After Hours Phone: (619) 303-7130*
*Provider Gender: Female*
*NPI: 1124643564*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## RADIATION ONCOLOGY

**CARMONA, RUBEN**
*Provider ID: 303099*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-4500*
*Fax: (619) 740-8499*
*After Hours Phone: (619) 740-4500*
*Provider Gender: Male*
*NPI: 1275929242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## RADIATION ONCOLOGY

**COLEMAN, LORI**
*Provider ID: 221089*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-4500*
*Fax: (619) 740-8499*
*After Hours Phone: (619) 740-4500*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 19\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## RHEUMATOLOGY

**KOTHA, ROSHAN**
*Provider ID: 63454*
*Board Certified Specialty: No*
*PURUSHOTHAM AND AKTHER KOTHA MD INC*
8860 CENTER DR STE 400
LA MESA, CA 91942
*Phone: (619) 229-1995*
*Fax: (619) 229-1109*
*After Hours Phone: (619) 229-1995*
*Provider Gender: Female*
*NPI: 1417117839*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Telugu*

*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**SURGERY GENERAL VASCULAR**

**TERRAMANI, THOMAS**
*Provider ID: 311620*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8860 CENTER DR STE 450
LA MESA, CA 91942
*Phone: (619) 460-6200*
*Fax: (619) 460-6262*
*After Hours Phone: (619) 460-6200*
*Provider Gender: Male*
*NPI: 1447344338*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, Sharp Grossmont Hospital, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## LAKE ELSINORE

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 313416*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530
*Phone: (844) 308-5003*
*Fax: (760) 414-3892*
*After Hours Phone: (844) 308-5003*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 314733*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530
*Phone: (844) 308-5003*
*Fax: (760) 414-3892*
*After Hours Phone: (844) 308-5003*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

# D. Specialist Provider Directory

**OPTOMETRIST**

**GEE, JENNIFER**

*Provider ID: 290211*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

30195 FRASER DR
LAKE ELSINORE, CA 92530

*Phone: (951) 252-2720*

*Fax: (760) 414-3892*

*After Hours Phone: (951) 252-2720*

*Provider Gender: Female*

*NPI: 1336589332*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**

*Provider ID: 290239*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

30195 FRASER DR
LAKE ELSINORE, CA 92530

*Phone: (951) 252-2720*

*Fax: (760) 414-3892*

*After Hours Phone: (951) 252-2720*

*Provider Gender: Female*

*NPI: 1376958389*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**TAM, EMILY**

*Provider ID: 290319*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

30195 FRASER DR
LAKE ELSINORE, CA 92530

*Phone: (951) 252-2720*

*Fax: (760) 414-3892*

*After Hours Phone: (951) 252-2720*

*Provider Gender: Female*

*NPI: 1497161236*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## LAKESIDE

**CHIROPRACTOR**

**FIGUEROA, CHRISTOPHER**

*Provider ID: 312181*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

10039 VINE ST
LAKESIDE, CA 92040

*Phone: (858) 218-3000*

*Fax: (360) 462-2744*

*After Hours Phone: (858) 218-3000*

*Provider Gender: Male*

*NPI: 1487323119*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

### CHIROPRACTOR

**HOURIHAN, KEITH**
*Provider ID: 257549*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (619) 390-9975*
*Fax: (858) 633-4690*
*After Hours Phone: (619) 390-9975*
*Provider Gender: Male*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

## MENIFEE

### PHYSICIANS ASSISTANT

**SMITH, KELLI**
*Provider ID: 272954*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
30420 HAUN RD
MENIFEE, CA 92584
*Phone: (951) 676-4193*
*After Hours Phone: (951) 676-4193*
*Provider Gender: Female*
*NPI: 1841771664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## MORENO VALLEY

### OPTOMETRIST

**BULLUM, ANTHONY**
*Provider ID: 290330*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
22675 ALESSANDRO BLVD
MORENO VALLEY, CA 92553
*Phone: (951) 571-2350*
*Fax: (951) 571-2370*
*After Hours Phone: (951) 571-2350*
*Provider Gender: Male*
*NPI: 1992773956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## MURRIETA

### ANESTHESIOLOGY

**HYLTON, DIANA**
*Provider ID: 241738*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## ANESTHESIOLOGY

**KRAUSE, MARTIN**
*Provider ID: 287655*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Male*
*NPI: 1417243239*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## CARDIAC ELECTROPHYSIOLOGY

**HAN, FREDERICK**
*Provider ID: 210100*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427255967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## CERTIFIED NURSE PRACTITIONER

**HEAD, KRISTIN**
*Provider ID: 268658*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## CERTIFIED NURSE PRACTITIONER

**MIRACLE, ANGELYN**
*Provider ID: 300259*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 200
MURRIETA, CA 92562

*Phone: (951) 461-9300*
*Fax: (951) 461-9399*
*After Hours Phone: (951) 461-9300*
*Provider Gender: Female*
*NPI: 1144539842*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8:30AM-12PM*
*M-F 8AM-5PM*
*SA 8:30AM-12PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**SNYDER, MICHELLE**
*Provider ID: 210676*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851561054*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**STEVENSON, REHEIA**
*Provider ID: 210794*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346696044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SYED-UDDIN, SUMIYAH**
*Provider ID: 297771*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1225606478*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**EMERGENCY MEDICINE**

**CASAS, TAMARA**
*Provider ID: 311939*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1669962270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**LI, JINGHONG**
*Provider ID: 255941*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 210826*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**PATEL, SAGAR**
*Provider ID: 283001*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Male*
*NPI: 1245672302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 210573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 202659*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL**
**CARDIOLOGY**

**AL KHIAMI, BELAL**
*Provider ID: 275994*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

28062 BAXTER RD
MURRIETA, CA 92563
*Phone: (951) 290-4000*
*Fax: (888) 539-8781*
*After Hours Phone: (951) 290-4000*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**WETTERSTEN, NICHOLAS**
*Provider ID: 210605*
*Board Certified Specialty: No UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1063701068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296988*
*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296992*
*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562

# D. Specialist Provider Directory

*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294649*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294652*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301820*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*Fax: (951) 696-6105*
*After Hours Phone: (951) 696-6000*

# D. Specialist Provider Directory

*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEONATAL / PERINATAL MEDICINE

**WEST, JULIE**
*Provider ID: 297071*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*Fax: (951) 696-6105*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Female*
*NPI: 1811151848*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEUROLOGY

**GOLD, JEFFREY**
*Provider ID: 283334*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEUROLOGY

**JINDAL, ANUJA**
*Provider ID: 215521*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**GOLD, JEFFREY**
*Provider ID: 215691*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**GUIDO-ESTRADA, NATALIE**
*Provider ID: 215442*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1528353521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**KIM MCMANUS, OLIVIA**
*Provider ID: 215666*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1174870067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 215606*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
*Provider ID: 267317*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297010*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 215687*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE

MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**
*Provider ID: 216415*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (858) 309-7702*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 215685*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**YAMANE, MAYA**
*Provider ID: 311885*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 215684*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**CARVALHO, DANIELA**
*Provider ID: 215332*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1154492916*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310279*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**

*Provider ID: 244898*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1400*
*After Hours Phone: (951) 600-1400*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**JIANG, WEN**
*Provider ID: 215564*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1659305753*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 254296*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 254089*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297034*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311003*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**BORQUEZ, ALEJANDRO**
*Provider ID: 284119*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1114277787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DAVIS, CHRISTOPHER**
*Provider ID: 215743*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1760691950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DUMMER, KIRSTEN**
*Provider ID: 215645*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1780642280*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LASALLE, ELIZABETH**
*Provider ID: 313253*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1235634015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**MCCANDLESS, RACHEL**
*Provider ID: 215601*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1487821815*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
*Provider ID: 239114*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1376705707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**
*Provider ID: 215679*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**WILLIAMS, MATTHEW**
*Provider ID: 215678*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1831423250*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**ALAYARI, AMETHYST**
*Provider ID: 311383*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6293*

*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1740778653*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1366622078*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DO, STEPHANIE**
*Provider ID: 216969*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1750513644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**INDRA, SEAN**
*Provider ID: 302626*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Male*
*NPI: 1427349091*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL, SOUTHWEST*

*HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KINGDON, JOANNA**
*Provider ID: 302318*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 150
MURRIETA, CA 92562
*Phone: (858) 966-7800*
*Fax: (858) 966-8231*
*After Hours Phone: (858) 966-7800*
*Provider Gender: Female*
*NPI: 1609495399*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MESIWALA, ADNAN**
*Provider ID: 275655*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6105*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Male*
*NPI: 1528483955*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MILLS, DAVID**
*Provider ID: 302147*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Male*
*NPI: 1194145946*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**OZCAN, ALI**
*Provider ID: 287924*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Male*
*NPI: 1265867683*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Turkish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARK, BRIAN**
*Provider ID: 302353*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Male*
*NPI: 1710418744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RANASURIYA, DUNISHA**
*Provider ID: 216972*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1740468057*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SCHROTER, STEPHANIE**

*Provider ID: 243831*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1073951828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHETH, SARIKA**
*Provider ID: 248172*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1336503234*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SOUDER, CHRISTOPHER**
*Provider ID: 301634*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1851540199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TANG, ANDREW**
*Provider ID: 294678*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Male*
*NPI: 1184071516*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TRAN, THERESA**
*Provider ID: 301835*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1417496985*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VEGA, CAROLINA**
*Provider ID: 309972*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1427442086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311395*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**SINGH, PUJA**
*Provider ID: 302819*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1841721172*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
*Provider ID: 301640*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310618*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**JAZAYERI, AMIR**
*Provider ID: 310953*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

*Phone: (951) 600-1640*

*Fax: (951) 600-1760*

*After Hours Phone: (951) 600-1640*

*Provider Gender: Male*

*NPI: 1316385925*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC GASTROENTEROLOGY

**SHARMA, ANITA**

*Provider ID: 311775*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

*Phone: (951) 600-1640*

*Fax: (951) 600-1760*

*After Hours Phone: (951) 600-1640*

*Provider Gender: Female*

*NPI: 1871989335*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC NEPHROLOGY

**RASCHKE, ROBIN**

*Provider ID: 310301*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

*Phone: (858) 966-8052*

*Fax: (858) 966-7789*

*After Hours Phone: (858) 966-8052*

*Provider Gender: Female*

*NPI: 1609365402*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS, PATRICIA**

*Provider ID: 294382*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

*Phone: (951) 600-1640*

*Fax: (951) 600-1760*

*After Hours Phone: (951) 600-1640*

*Provider Gender: Female*

*NPI: 1144615659*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**RAO, APARNA**
*Provider ID: 215528*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1649222340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**PHADKE, OMKAR**
*Provider ID: 315125*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1598140238*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**LOPEZ, XIMENA**
*Provider ID: 302857*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1740316405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**NGO, MAI**
*Provider ID: 302112*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*

*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1508910787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PATTERSON, MARY**
*Provider ID: 215677*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1912112020*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**VARGAS TRUJILLO, MARCELA**
*Provider ID: 215602*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1952534091*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**ALGRA, JEFFREY**
*Provider ID: 215644*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1457664518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# D. Specialist Provider Directory

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**BIFFL, SUSAN**
*Provider ID: 283113*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1366589640*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**DALAL, PRITHA**
*Provider ID: 215665*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1609017532*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**RYAN, KYLE**
*Provider ID: 275662*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1447645742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**SCOTT-WYARD, PHOEBE**
*Provider ID: 283086*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951)*

*600-1640*
*Provider Gender: Female*
*NPI: 1336356203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PHYSICAL MEDICINE / REHABILITATION

**SKALSKY, ANDREW**
*Provider ID: 215522*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1487635272*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PHYSICIANS ASSISTANT

**ANWAR, YASMIN**
*Provider ID: 300845*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
*Phone: (951) 304-7546*
*Fax: (951) 696-5872*
*After Hours Phone: (951) 304-7546*
*Provider Gender: Female*
*NPI: 1588602247*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PHYSICIANS ASSISTANT

**RODRIGUES, ANNETTE**
*Provider ID: 302453*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

## PULMONARY DISEASES

**KUMAR, AVNEE**

*Provider ID: 300014*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

25500 MEDICAL CENTER DR
MURRIETA, CA 92562

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1750745394*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## PULMONARY DISEASES

**LEVERONE, NICHOLAS**

*Provider ID: 313307*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

25500 MEDICAL CENTER DR
MURRIETA, CA 92562

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1407388564*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## PULMONARY DISEASES

**SURI, RAJAT**

*Provider ID: 283350*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

25500 MEDICAL CENTER DR
MURRIETA, CA 92562

*Phone: (951) 677-1111*

*Fax: (951) 677-9757*

*After Hours Phone: (951) 677-1111*

*Provider Gender: Male*

*NPI: 1144615337*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

## SURGERY GENERAL

**FAIRBANKS, TIMOTHY**

*Provider ID: 246979*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

*Phone: (951) 600-1640*

*After Hours Phone: (951) 600-1640*

*Provider Gender: Male*

*NPI: 1407010556*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL,*

*SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## SURGERY GENERAL

**KLING, KAREN**
*Provider ID: 215583*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## SURGERY GENERAL VASCULAR

**HOWE, STEVEN**
*Provider ID: 206761*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
28062 BAXTER RD
MURRIETA, CA 92563
*Phone: (877) 558-6248*
*After Hours Phone: (877) 558-6248*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY ORTHOPEDIC

**CHENG, YU-TSUN**
*Provider ID: 301902*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1992982854*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**
*Provider ID: 283160*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1548417652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**
*Provider ID: 215420*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1598979593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310986*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY THORACIC**

**HOWE, STEVEN**
*Provider ID: 210169*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**POLLEMA, TRAVIS**
*Provider ID: 210577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (858) 657-7777*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-7777*
*Provider Gender: Male*
*NPI: 1871752956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## NATIONAL CITY

**CARDIOVASCULAR DISEASE**

**DAMANI, SAMIR**
*Provider ID: 310638*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CUNNINGHAM, ISIS**
*Provider ID: 302115*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
*Phone: (619) 470-1945*
*Fax: (619) 475-5048*
*After Hours Phone: (619) 470-1945*
*Provider Gender: Female*
*NPI: 1770124927*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**GULLY, MICHELLE**
*Provider ID: 299422*
*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*
1428 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1801557947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**KIM, YUNMI**
*Provider ID: 312917*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2101 GRANGER AVE STE 101
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1467166942*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*Provider ID: 294308*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 474-3919*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1093130395*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MCCULLOUGH, LYAN LOVE**
*Provider ID: 310623*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1063759181*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE**

# D. Specialist Provider Directory

**PRACTITIONER**

**MIDORO, ABEGAILLE**

*Provider ID: 303830*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*Fax: (619) 477-1286*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1952925851*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MIDORO, ABEGAILLE**

*Provider ID: 303827*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*Fax: (619) 477-2628*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1952925851*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**

*Provider ID: 291548*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*Fax: (619) 399-5959*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Male*

*NPI: 1821463159*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**DERMATOLOGY**

**LIN, SHINKO**

*Provider ID: 306319*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

*Phone: (619) 267-8303*

*Fax: (619) 267-4835*

*After Hours Phone: (619) 267-8303*

*Provider Gender: Female*

*NPI: 1205130036*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 308216*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*Provider ID: 301784*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ROBERTS, POMAI**
*Provider ID: 301278*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 336-2323*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1023278314*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**TRAN, KIM**
*Provider ID: 311691*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 336-2323*
*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*
*NPI: 1447873534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**TRAN, KIM**
*Provider ID: 312035*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1447873534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**THAYER, KARISA**
*Provider ID: 310229*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1558765941*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**DAMANI, SAMIR**
*Provider ID: 303098*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**PANDHI, JAY**
*Provider ID: 269087*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
*Phone: (619) 512-1915*
*After Hours Phone: (619)*

*512-1915*
*Provider Gender: Male*
*NPI: 1407997406*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## NEPHROLOGY

**COMUNALE, RODERICK**
*Provider ID: 290784*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
*Phone: (858) 551-0276*
*Fax: (858) 454-8796*
*After Hours Phone: (858) 551-0276*
*Provider Gender: Male*
*NPI: 1568462109*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OBSTETRICS / GYNECOLOGY

**DEL ROSARIO, GELEN**
*Provider ID: 257478*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
*Phone: (619) 475-1261*
*Fax: (619) 475-1267*
*After Hours Phone: (619) 475-1261*
*Provider Gender: Female*
*NPI: 1255643474*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network*

## OBSTETRICS / GYNECOLOGY

**DEL ROSARIO, GELEN**
*Provider ID: 206092*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
*Phone: (619) 475-1261*
*Fax: (619) 475-1267*
*After Hours Phone: (619) 475-1261*
*Provider Gender: Female*
*NPI: 1255643474*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network*

**OBSTETRICS / GYNECOLOGY**

**DEL ROSARIO, GELEN**
*Provider ID: 269247*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
*Phone: (619) 475-1261*
*Fax: (619) 475-1267*
*After Hours Phone: (619) 475-1261*
*Provider Gender: Female*
*NPI: 1255643474*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network*

**OBSTETRICS / GYNECOLOGY**

**WINESBURG, JENNIFER**
*Provider ID: 302451*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1811162456*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BARNARD, LUKE**
*Provider ID: 311674*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (800) 898-2020*
*Fax: (626) 574-7188*
*After Hours Phone: (800) 898-2020*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BARNARD, LUKE**
*Provider ID: 310549*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (800) 898-2020*
*Fax: (626) 574-7188*
*After Hours Phone: (800) 898-2020*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 304538*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 306903*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 307171*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 474-2284*
*Fax: (619) 474-3919*
*After Hours Phone: (619) 474-2284*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 307113*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 474-2284*
*Fax: (619) 474-3919*
*After Hours Phone: (619) 474-2284*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 312235*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 310537*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**ATMAR, AKMAL**
*Provider ID: 269784*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
*Phone: (929) 287-4511*
*Fax: (877) 671-6835*
*After Hours Phone: (929) 287-4511*
*Provider Gender: Male*
*NPI: 1558656637*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308212*

*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 292-2493*
*Fax: (619) 618-0222*
*After Hours Phone: (619) 292-2493*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308637*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 292-2493*
*Fax: (619) 618-0222*
*After Hours Phone: (619) 292-2493*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 129542*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1689069874*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 312176*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 427-3481*

*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1689069874*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED DIETITIAN / NUTRITIONIST**

**LEWIS, KATHY**
*Provider ID: 311655*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
*Phone: (619) 475-4900*
*Fax: (619) 475-8373*
*After Hours Phone: (619) 475-4900*
*Provider Gender: Female*
*NPI: 1790304822*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CHENG, BRANDON**
*Provider ID: 304531*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1336894724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-5PM SA 8AM-1PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CHUNG, PETER**
*Provider ID: 314479*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1023837887*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL**

# D. Specialist Provider Directory

**THERAPIST**

**JIMENEZ, ANDREA**

*Provider ID: 299888*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*

*NPI: 1407440670*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 7AM-7PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**

*Provider ID: 287102*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

*Phone: (619) 482-3000*

*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*

*NPI: 1699357525*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 7AM-6PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**

*Provider ID: 305011*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

*Phone: (619) 482-3000*

*Fax: (619) 695-0050*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*

*NPI: 1457136269*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM F 7AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**

*Provider ID: 305012*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

*Phone: (619) 482-3000*

*Fax: (619) 695-0050*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*

*NPI: 1457136269*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 7AM-7PM F 7AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC,*

*IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 301996*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 286784*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**PASCUAL, CHRISTOPHER**
*Provider ID: 314205*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1093328064*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM*
*F 7AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 301110*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*

*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 301430*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 298366*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**
*Provider ID: 301533*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1063046878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OCEANSIDE

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 299882*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3231 WARING CT STE K
OCEANSIDE, CA 92056
*Phone: (760) 607-5350*
*After Hours Phone: (760) 607-5350*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\100*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**BALDWIN, ANDREA**
*Provider ID: 294937*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497202121*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-6PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*Provider ID: 303861*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1427325166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**CARROLL, MAYA**
*Provider ID: 315199*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1699315473*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*Provider ID: 301313*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**

*Provider ID: 301314*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1679140644*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**

*Provider ID: 301315*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1679140644*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**

*Provider ID: 315337*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1598158768*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 6\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**

*Provider ID: 315336*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1598158768*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 6\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*Provider ID: 315338*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GENOVESE, KELLY**
*Provider ID: 301304*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1326052457*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 268660*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 310480*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 304495*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 304494*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 302298*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 302300*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 302299*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 311300*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 311298*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 311301*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 307932*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 307934*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 307935*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298084*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298081*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298082*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**LANG, LESLIE**
*Provider ID: 308045*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1457366130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 295286*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 295285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 295287*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**NIBBELINK AHEARN, SANDRA**
*Provider ID: 311969*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Female*
*NPI: 1326513441*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**NIBBELINK AHEARN, SANDRA**
*Provider ID: 310107*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Female*

*NPI: 1326513441*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PRITZKER, JOELY**
*Provider ID: 239772*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619384351*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**RAYTA, NICOLE**
*Provider ID: 304682*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1689027542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RICHARDS, KRISINDA**
*Provider ID: 313332*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1669914941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SANACORA, RACHEL**
*Provider ID: 297730*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1548987985*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**SANTIAGO, AMANDA**
*Provider ID: 242607*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619488731*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295505*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295503*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295506*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
818 PIER VIEW WAY

OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

## CERTIFIED NURSE PRACTITIONER

**WALKER, ALEXANDRA**
*Provider ID: 306002*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1578220612*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED REGISTERED NURSE MIDWIFE

**KELLY, KATHERINE**
*Provider ID: 290312*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1801134275*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED REGISTERED NURSE MIDWIFE

**PERLMAN, TAMARA**
*Provider ID: 290733*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1730274374*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CHIROPRACTOR

**ANDREWS, BRAD**
*Provider ID: 290542*
*Board Certified Specialty: No*

# D. Specialist Provider Directory

*IHP OF SOUTHERN CAL-PHP*
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1750791745*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CHIROPRACTOR

**JU, NATHANIEL**
*Provider ID: 290221*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1972883882*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## DERMATOLOGY

**BROWN, REGINA**
*Provider ID: 309981*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3629 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 757-7546*
*Fax: (760) 828-9140*
*After Hours Phone: (760) 757-7546*
*Provider Gender: Female*
*NPI: 1801424692*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## EMERGENCY MEDICINE

**PHAM, LILY**
*Provider ID: 304934*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1811423072*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## FAMILY PRACTICE

**MILLER, DIANA**
*Provider ID: 314934*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST

OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1407204969*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 9AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SALAMANCA, OMAR**
*Provider ID: 295469*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1083000947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SEAWELL, CHRISTINE**
*Provider ID: 312255*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1982280939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**NOVO, MEGAN**
*Provider ID: 308044*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3923 WARING RD STE A
OCEANSIDE, CA 92056
*Phone: (760) 724-8782*
*Fax: (760) 842-7801*
*After Hours Phone: (760) 724-8782*
*Provider Gender: Female*
*NPI: 1770961971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-TH 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GYNECOLOGIC ONCOLOGY**

**ESKANDER, RAMEZ**
*Provider ID: 282166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144486929*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296991*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294651*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 264686*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**
*Provider ID: 205437*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1477563302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WESTERMANN, MELISSA**
*Provider ID: 255793*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA*

*IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEPHROLOGY**

**LIU, ANDREW**
*Provider ID: 305443*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Male*
*NPI: 1710481866*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEPHROLOGY**

**LIU, ANDREW**
*Provider ID: 301573*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3300 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Male*
*NPI: 1710481866*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEPHROLOGY**

**LIU, ANDREW**
*Provider ID: 308522*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3300 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Male*
*NPI: 1710481866*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEUROLOGY**

**JINDAL, ANUJA**
*Provider ID: 206266*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## NEUROLOGY

**PASSIAK, BRITTANY**
*Provider ID: 311210*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

## OBSTETRICS / GYNECOLOGY

**LOEFFLER, ALLISON**
*Provider ID: 311880*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1700073962*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OPHTHALMOLOGY

**BANSAL, PREETI**
*Provider ID: 205619*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (960) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (960) 547-1020*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY*

*BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
*Provider ID: 267318*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297013*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 205509*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA,*

*PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**
*Provider ID: 216416*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 205887*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**YAMANE, MAYA**
*Provider ID: 311888*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 290210*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 290927*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**
*Provider ID: 290904*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**
*Provider ID: 290902*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**
*Provider ID: 290237*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1376958389*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**
*Provider ID: 290929*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1376958389*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**RING, ROBERT**
*Provider ID: 269380*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
*Phone: (760) 726-9383*
*Fax: (760) 726-9897*
*After Hours Phone: (760) 726-9383*
*Provider Gender: Male*
*NPI: 1336228840*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10AM-7PM TU-TH 9AM-5PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OPTOMETRIST**

**TAM, EMILY**
*Provider ID: 290318*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497161236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**TAM, EMILY**
*Provider ID: 290317*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497161236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 206086*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310281*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**
*Provider ID: 244899*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

## OTOLARYNGOLOGY

**LEUIN, SHELBY**

*Provider ID: 206111*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1124230909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## OTOLARYNGOLOGY

**PATEL, VIJAY**

*Provider ID: 297036*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**LASALLE, ELIZABETH**

*Provider ID: 313255*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1235634015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC EMERGENCY MEDICINE

**AGHILI, ROXANA**

*Provider ID: 303781*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CHOO, SUN**
*Provider ID: 296537*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1700047628*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CRAWFORD, MICHAEL**
*Provider ID: 311160*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**
*Provider ID: 275786*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1316162324*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KINGDON, JOANNA**

*Provider ID: 302319*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1000*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1000*

*Provider Gender: Female*

*NPI: 1609495399*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARK, RONALD**

*Provider ID: 295456*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1000*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1000*

*Provider Gender: Male*

*NPI: 1881695914*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**

*Provider ID: 205787*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Female*

*NPI: 1477626513*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RUSSELL, SAMUEL**
*Provider ID: 301251*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Male*
*NPI: 1215564265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHERER, KIMBERLY**
*Provider ID: 311932*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1992202964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TODD, SARAH**
*Provider ID: 302801*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1407299787*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**

*Provider ID: 205813*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC ENDOCRINOLOGY

**RANADIVE, SAYALI**
*Provider ID: 311397*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC GASTROENTEROLOGY

**CHU, CHRISTOPHER**
*Provider ID: 301642*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC NEPHROLOGY

**RASCHKE, ROBIN**
*Provider ID: 310303*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1609365402*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS, PATRICIA**
*Provider ID: 294643*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1144615659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PHYSICAL MEDICINE / REHABILITATION

**RICHARDSON, HENRY**
*Provider ID: 295852*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3231 WARING CT STE K
OCEANSIDE, CA 92056
*Phone: (760) 607-5350*
*Fax: (760) 607-5365*
*After Hours Phone: (760) 607-5350*
*Provider Gender: Male*
*NPI: 1407052459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PHYSICAL MEDICINE / REHABILITATION

**RYAN, KYLE**
*Provider ID: 275661*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1447645742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PHYSICIANS ASSISTANT

**KIM, DANIEL**
*Provider ID: 314074*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3629 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 757-7546*
*Fax: (760) 828-9140*
*After Hours Phone: (760) 757-7546*
*Provider Gender: Male*
*NPI: 1275813370*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: ARROWHEAD REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RAMOS, ELENA**
*Provider ID: 301307*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1306489570*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302455*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SALAZAR, CLAUDIA**
*Provider ID: 314056*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1649906108*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**JENSEN, BRIAN**

*Provider ID: 290775*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

619 CROUCH ST
OCEANSIDE, CA 92054

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

*After Hours Phone: (760) 736-6767*

*Provider Gender: Male*

*NPI: 1518138049*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**KRAPES, MICHAEL**

*Provider ID: 290097*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

2210 MESA DR STE 300
OCEANSIDE, CA 92054

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

*After Hours Phone: (760) 736-6767*

*Provider Gender: Male*

*NPI: 1215233028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**SURGERY NEUROLOGICAL**

**BEN-HAIM, SHARONA**

*Provider ID: 311087*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4002 VISTA WAY
OCEANSIDE, CA 92056

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1942469663*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hebrew, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**HATEFI, DUSTIN**

*Provider ID: 311103*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4002 VISTA WAY
OCEANSIDE, CA 92056

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1790072106*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

## SURGERY NEUROLOGICAL

**MURTHY, NIKHIL**

*Provider ID: 311154*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4002 VISTA WAY
OCEANSIDE, CA 92056

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1710371273*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## SURGERY NEUROLOGICAL

**PHAM, MARTIN**

*Provider ID: 311150*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4002 VISTA WAY
OCEANSIDE, CA 92056

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1609130921*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

## SURGERY ORTHOPEDIC

**CIDAMBI, EMILY**

*Provider ID: 246469*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (858) 966-6789*

*Fax: (858) 966-8519*

*After Hours Phone: (858) 966-6789*

*Provider Gender: Female*

*NPI: 1659634699*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## SURGERY ORTHOPEDIC

**UPASANI, VIDYADHAR**

*Provider ID: 260954*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Male*

*NPI: 1548417652*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**FAIRBANKS, TIMOTHY**

*Provider ID: 205498*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Male*

*NPI: 1407010556*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KLING, KAREN**

*Provider ID: 206129*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Female*

*NPI: 1982775144*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**

*Provider ID: 310988*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Male*

*NPI: 1598147050*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PERRIS

**CERTIFIED NURSE PRACTITIONER**

# D. Specialist Provider Directory

**BLAND, JACELIS**
*Provider ID: 296767*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
*Phone: (760) 736-7676*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-7676*
*Provider Gender: Female*
*NPI: 1801522859*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## POWAY

### CERTIFIED NURSE PRACTITIONER

**WOLFE, AMANDA**
*Provider ID: 243582*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15525 POMERADO RD STE B1
POWAY, CA 92064
*Phone: (858) 457-8333*
*After Hours Phone: (858) 457-8333*
*Provider Gender: Female*
*NPI: 1063813475*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

### CERTIFIED NURSE PRACTITIONER

**WRIGHT, KIMBERLY**
*Provider ID: 256378*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3200*
*Fax: (858) 673-1587*
*After Hours Phone: (858) 675-3200*
*Provider Gender: Female*
*NPI: 1811400708*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

### DERMATOLOGY

**LIN, SHINKO**
*Provider ID: 306320*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
15725 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 308217*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15725 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**POUSTI, BOBAK**
*Provider ID: 313151*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15725 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Male*
*NPI: 1932736451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-4:30PM F 8:30AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**POUSTI, BOBAK**
*Provider ID: 311624*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
15725 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Male*
*NPI: 1932736451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-4:30PM F 8:30AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**NAJAND, SADAF**
*Provider ID: 270055*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400

POWAY, CA 92064
*Phone: (858) 675-3200*
*Fax: (858) 613-2938*
*After Hours Phone: (858) 675-3200*
*Provider Gender: Female*
*NPI: 1669769717*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERNAL MEDICINE**

**CHEN, ANDREW**
*Provider ID: 269315*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3100*
*Fax: (858) 613-2937*
*After Hours Phone: (858) 675-3100*
*Provider Gender: Male*
*NPI: 1134357007*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERNAL MEDICINE**

**THAPER, MOHINDERPAL**
*Provider ID: 270016*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 575
POWAY, CA 92064
*Phone: (760) 489-1458*
*Fax: (760) 489-1246*
*After Hours Phone: (760) 489-1458*
*Provider Gender: Male*
*NPI: 1295795037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**BAYAT, HAMED**
*Provider ID: 269450*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3110*
*Fax: (858) 592-0627*
*After Hours Phone: (858) 675-3110*
*Provider Gender: Male*
*NPI: 1356344196*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE*

*HEALTH PLAN DIRECT, Community Care IPA LLC*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**

*Provider ID: 206164*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

15615 POMERADO RD
POWAY, CA 92064

*Phone: (858) 613-4143*

*Fax: (858) 613-4539*

*After Hours Phone: (858) 613-4143*

*Provider Gender: Male*

*NPI: 1538388988*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**WEST, JULIE**

*Provider ID: 297072*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

15615 POMERADO RD
POWAY, CA 92064

*Phone: (858) 613-4143*

*Fax: (858) 613-4539*

*After Hours Phone: (858) 613-4143*

*Provider Gender: Female*

*NPI: 1811151848*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**HAMILTON, ROSS**

*Provider ID: 311790*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

15611 POMERADO RD STE 580
POWAY, CA 92064

*Phone: (760) 631-3000*

*Fax: (760) 631-3016*

*After Hours Phone: (760) 631-3000*

*Provider Gender: Male*

*NPI: 1538587852*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## OBSTETRICS / GYNECOLOGY

**COBB, DAMON**
*Provider ID: 206030*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 110
POWAY, CA 92064
*Phone: (858) 485-0130*
*Fax: (858) 485-9424*
*After Hours Phone: (858) 485-0130*
*Provider Gender: Male*
*NPI: 1851435598*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM F 9AM-1PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## OPHTHALMOLOGY

**LOZIER, JEFFREY**
*Provider ID: 270187*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3100*
*Fax: (858) 618-1523*
*After Hours Phone: (858) 675-3100*
*Provider Gender: Male*
*NPI: 1225004450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## OPTOMETRIST

**KIM, MICHELLE**
*Provider ID: 270014*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3140*
*Fax: (858) 613-2936*
*After Hours Phone: (858) 675-3140*
*Provider Gender: Female*
*NPI: 1457328825*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## PODIATRIST

**BRAZIER, SETH**
*Provider ID: 306398*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*

*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Male*
*NPI: 1033554324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PODIATRIST**

**HAN, KYOUNG**
*Provider ID: 296326*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Female*
*NPI: 1083954671*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese, Korean*
*Cultural Competency: N*
*Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**HAN, KYOUNG**
*Provider ID: 311056*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Female*
*NPI: 1083954671*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese, Korean*
*Cultural Competency: N*
*Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 296656*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**RHEUMATOLOGY**

**RAO, SOUMYA**
*Provider ID: 46060*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3150*
*Fax: (858) 924-1775*
*After Hours Phone: (858) 675-3150*
*Provider Gender: Female*
*NPI: 1033388616*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada, Russian, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RHEUMATOLOGY**

**REDDY, SMITHA**
*Provider ID: 269402*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15725 POMERADO RD STE 117
POWAY, CA 92064
*Phone: (858) 312-1717*
*Fax: (858) 435-0207*
*After Hours Phone: (858) 312-1717*
*Provider Gender: Female*
*NPI: 1750534715*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**SURGERY GENERAL**

**GROVE, JAY**
*Provider ID: 305851*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD
POWAY, CA 92064
*Phone: (760) 300-3647*
*Fax: (858) 207-0034*
*After Hours Phone: (760) 300-3647*
*Provider Gender: Male*
*NPI: 1912971334*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC*

**SURGERY ORTHOPEDIC**

**BALIKIAN, PHILIP**

*Provider ID: 119552*

*Board Certified Specialty: Yes*

*COMMUNITY CARE IPA LLC*

15611 POMERADO RD STE 400
POWAY, CA 92064

*Phone: (858) 613-8900*

*Fax: (858) 618-1523*

*After Hours Phone: (858) 613-8900*

*Provider Gender: Male*

*NPI: 1407803687*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Armenian, Italian, Spanish, Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

*Website: N/A*

*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC*

**SURGERY ORTHOPEDIC**

**BALIKIAN, PHILIP**

*Provider ID: 257485*

*Board Certified Specialty: Yes*

*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

15611 POMERADO RD STE 400
POWAY, CA 92064

*Phone: (858) 613-8900*

*Fax: (858) 618-1523*

*After Hours Phone: (858) 613-8900*

*Provider Gender: Male*

*NPI: 1407803687*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Armenian, Italian, Spanish, Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5PM*

*Website: N/A*

*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC*

**SURGERY ORTHOPEDIC**

**BRIED, JAMES**

*Provider ID: 269500*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

15611 POMERADO RD STE 525
POWAY, CA 92064

*Phone: (858) 485-0050*

*Fax: (858) 485-5071*

*After Hours Phone: (858) 485-0050*

*Provider Gender: Male*

*NPI: 1891809257*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

## RAMONA

**CERTIFIED NURSE PRACTITIONER**

**SALAS GAERLAN, JESSICA**

*Provider ID: 269344*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
211 13TH ST
RAMONA, CA 92065
*Phone: (760) 789-5160*
*Fax: (760) 788-7962*
*After Hours Phone: (760) 789-5160*
*Provider Gender: Female*
*NPI: 1356817431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

**FAMILY PRACTICE**

**WELLS, TODD**
*Provider ID: 299118*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
211 13TH ST
RAMONA, CA 92065
*Phone: (760) 789-5160*
*Fax: (760) 722-5292*
*After Hours Phone: (760) 789-5160*
*Provider Gender: Male*
*NPI: 1952377806*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

## RIVERSIDE

**PHYSICIANS ASSISTANT**

**DUARTE, ZULMA**
*Provider ID: 295431*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8856 ARLINGTON AVE
RIVERSIDE, CA 92503
*Phone: (951) 710-3970*
*Fax: (360) 462-5824*
*After Hours Phone: (951) 710-3970*
*Provider Gender: Female*
*NPI: 1245885912*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NJIE, EMADE**
*Provider ID: 298710*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8856 ARLINGTON AVE
RIVERSIDE, CA 92503
*Phone: (951) 710-3970*
*Fax: (360) 462-5824*
*After Hours Phone: (951) 710-3970*
*Provider Gender: Female*
*NPI: 1881233229*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SAN DIEGO

**ADVANCED HEART FAILURE**

**AND TRANSPLANT CARDIOLOGY**

**HONG, KIMBERLY**

*Provider ID: 246311*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (858) 657-8530*

*After Hours Phone: (858) 657-8530*

*Provider Gender: Female*

*NPI: 1346515442*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY**

**HONG, KIMBERLY**

*Provider ID: 313299*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346515442*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY**

**HONG, KIMBERLY**

*Provider ID: 312693*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346515442*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY**

**SILVA ENCISO, JORGE**

*Provider ID: 312727*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1639404031*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL*

*CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ALLERGY IMMUNOLOGY**

**BALUCH, NARGES**
*Provider ID: 310787*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5961*
*Fax: (858) 966-6791*
*After Hours Phone: (858) 966-5961*
*Provider Gender: Female*
*NPI: 1720822133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**ALLERGY IMMUNOLOGY**

**JAMES, CHRISTINE**
*Provider ID: 284917*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144589979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ALLERGY IMMUNOLOGY**

**RIEDL, MARC**
*Provider ID: 255768*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 230
SAN DIEGO, CA 92122
*Phone: (858) 657-5350*
*After Hours Phone: (858) 657-5350*
*Provider Gender: Male*
*NPI: 1285654889*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ALLERGY IMMUNOLOGY**

**WANG, XINYU**
*Provider ID: 313573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720548001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ALLERGY IMMUNOLOGY**

**WANG, XINYU**
*Provider ID: 313572*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720548001*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**AL AZZAWI, SARAH**
*Provider ID: 312975*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1063041887*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**AL AZZAWI, SARAH**
*Provider ID: 312973*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1063041887*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**ALEXANDER, BRENTON**
*Provider ID: 242303*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1811366644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BECERRA SONGOLO, TOSHA**
*Provider ID: 300068*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265938724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BHATIA, KARISHMA**
*Provider ID: 313008*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1932764081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BHATIA, KARISHMA**
*Provider ID: 313006*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1932764081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BIGELOW, ELSIE**
*Provider ID: 313508*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215565114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**BIGELOW, ELSIE**
*Provider ID: 313507*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3900 5TH AVE STE 110

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215565114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CABANISS, SCOTT**
*Provider ID: 311436*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CABANISS, SCOTT**
*Provider ID: 311435*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CANO, SARAH**
*Provider ID: 200959*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750517306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310044*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310043*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**
*Provider ID: 311461*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**
*Provider ID: 311460*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CURRAN, BRIAN**
*Provider ID: 239002*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1710373642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**DARWISH, ALEX**
*Provider ID: 313027*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1043839970*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**DARWISH, ALEX**
*Provider ID: 313025*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1043839970*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**FEJLEH, ASHLEY**
*Provider ID: 269502*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609353465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**ANESTHESIOLOGY**

**FUNDINGSLAND, BRENT**

*Provider ID: 280468*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1831166560*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GARRETT, RILEY**

*Provider ID: 313740*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1740642776*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GARRETT, RILEY**

*Provider ID: 313742*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1740642776*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GOH, REGINE**

*Provider ID: 311500*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1205381316*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GOH, REGINE**

*Provider ID: 311501*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205381316*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**HYLTON, DIANA**
*Provider ID: 241735*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KAWASAKI, MEGAN**
*Provider ID: 313585*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073140059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KAWASAKI, MEGAN**
*Provider ID: 313583*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073140059*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KIM, ELIZABETH**
*Provider ID: 313004*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1831726744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KIM, ELIZABETH**
*Provider ID: 313002*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1831726744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KROL, CAITLIN**
*Provider ID: 313046*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1518594910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KROL, CAITLIN**
*Provider ID: 313048*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1518594910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MALONEY, IAN**
*Provider ID: 313016*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1508492422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**ANESTHESIOLOGY**

**MALONEY, IAN**

*Provider ID: 313014*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Male*

*NPI: 1508492422*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MEASER, JACQUELINE**

*Provider ID: 312976*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1790300671*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MEASER, JACQUELINE**

*Provider ID: 312978*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1790300671*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MEYER, MEGAN**

*Provider ID: 239607*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1720473044*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MILLAR, MELISSA**

*Provider ID: 201308*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (619) 543-5754*

*After Hours Phone: (619) 543-5754*

*Provider Gender: Female*

*NPI: 1417361981*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311123*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311124*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**NGUYEN, QUOC SY**
*Provider ID: 242188*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871911644*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**ANESTHESIOLOGY**

**OSWALD, JESSICA**

*Provider ID: 239600*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1427315118*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SHAW, SUSANNA**

*Provider ID: 255316*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1063685477*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SNOW, ERICA**

*Provider ID: 312989*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1023637808*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SNOW, ERICA**

*Provider ID: 312990*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1023637808*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SORIA, CLAIRE**

*Provider ID: 243294*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1447516414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SREJIC, UNA**
*Provider ID: 206383*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1588723860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSF MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SUYDAM, STEVEN**
*Provider ID: 286569*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386856821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TRIVEDI, SURAJ**
*Provider ID: 246749*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699057885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR, CORONA REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TSUDA, PAIGE**
*Provider ID: 271682*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003261595*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TU, MONIQUE**
*Provider ID: 310428*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497080436*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TULLY, JEFFREY**
*Provider ID: 283689*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871912493*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TZENG, ERIC**
*Provider ID: 284577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801258264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**YOUNAN, LAWRENCE**
*Provider ID: 240870*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1922432475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**ZAERPOOR, DARA**
*Provider ID: 313030*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1497226450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**ZAERPOOR, DARA**
*Provider ID: 313029*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1497226450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**KRAUSE, MARTIN**
*Provider ID: 280539*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417243239*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**CASTELLANOS, JOEL**
*Provider ID: 243553*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1700296514*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 299880*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
*Phone: (619) 325-1161*
*Fax: (619) 325-1717*
*After Hours Phone: (619) 325-1161*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 300089*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
*Phone: (619) 325-1161*
*Fax: (619) 325-1717*
*After Hours Phone: (619) 325-1161*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC,*

*IHP of Southern Cal-PHP*

**AUDIOLOGIST**

**KIM, SHANNON**
*Provider ID: 313050*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1457199705*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**BIRGERSDOTTER GREEN, ULRIKA**
*Provider ID: 312708*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851349757*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**HAN, FREDERICK**
*Provider ID: 210012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427255967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**HAN, FREDERICK**
*Provider ID: 210099*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427255967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**HAN, FREDERICK**

*Provider ID: 312717*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1427255967*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**HO, GORDON**

*Provider ID: 312729*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1346516069*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIAC ELECTROPHYSIOLOGY**

**RAISSI SHABARI, FARSHAD**

*Provider ID: 312736*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124295027*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, French*

*Cultural Competency: N*

*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**ALANI, ANAS**

*Provider ID: 201252*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1154633709*

*Provider English Spoken: Y*

*Provider Language(s)*

*Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, ARROWHEAD REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR, LAC RANCHO LOS AMIGOS NATIONAL REHAB CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**ALSHAWABKEH, LAITH**
*Provider ID: 312690*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346470408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**CARAZO, MATTHEW**
*Provider ID: 312734*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952535114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**CASTELLANOS, LUIS**
*Provider ID: 211765*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013059286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**CASTELLANOS, LUIS**
*Provider ID: 312679*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013059286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**CASTELLANOS, LUIS**
*Provider ID: 211764*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST FL 3
SAN DIEGO, CA 92103
*Phone: (858) 657-8530*
*Fax: (619) 543-2287*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1013059286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**COTTER, BRUNO**
*Provider ID: 312732*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205886389*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**MIZZELL, ANNA**
*Provider ID: 214020*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1851561021*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**MIZZELL, ANNA**
*Provider ID: 312680*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851561021*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**NAREZKINA, ANNA**
*Provider ID: 312913*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891958773*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**NAREZKINA, ANNA**
*Provider ID: 312914*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891958773*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**NAREZKINA, ANNA**

*Provider ID: 312915*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891958773*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**PHREANER, NICHOLAS**
*Provider ID: 239946*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023373040*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**PROHASKA, THOMAS**
*Provider ID: 299912*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861889644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**RAMSIS, MATTHEUS**
*Provider ID: 310450*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609225135*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**CARDIOVASCULAR DISEASE**

**SHAPIRO, HILARY**

*Provider ID: 313720*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1811382815*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**SHAPIRO, HILARY**

*Provider ID: 312725*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1811382815*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**SHEN, JIA**

*Provider ID: 311526*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1295053403*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**SHEN, JIA**

*Provider ID: 312731*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

2131 3RD AVE
SAN DIEGO, CA 92101

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1295053403*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**CARDIOVASCULAR DISEASE**

**SHEREV, DIMITRI**

*Provider ID: 301306*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115

*Phone: (619) 582-4490*

*Fax: (519) 582-4737*

*After Hours Phone: (619) 582-4490*

*Provider Gender: Male*

*NPI: 1154323996*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**SILVA ENCISO, JORGE**

*Provider ID: 313721*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1639404031*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**WILKINSON, MICHAEL**

*Provider ID: 312910*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6030 VILLAGE WAY
SAN DIEGO, CA 92130

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1699063701*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**WILKINSON, MICHAEL**

*Provider ID: 312911*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699063701*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## CARDIOVASCULAR DISEASE

**YEANG, CALVIN**
*Provider ID: 238822*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1598011058*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## CERTIFIED ACUPUNCTURIST

**APPENZELLER, ERICA**
*Provider ID: 310772*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1780828384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**
*Provider ID: 277968*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 304137*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 277967*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 304138*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 277966*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**CRAFT, KEVIN**
*Provider ID: 290942*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1659745610*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**
*Provider ID: 311063*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**
*Provider ID: 311062*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 277701*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 277700*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304131*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 277699*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304132*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**LAM, KHANH**
*Provider ID: 295380*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
*Phone: (619) 325-1161*
*Fax: (619) 325-1717*
*After Hours Phone: (619) 325-1161*
*Provider Gender: Male*
*NPI: 1649594979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED ACUPUNCTURIST**

**LEE, JIHYUNG**
*Provider ID: 312190*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1073212338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**LEE, JIHYUNG**
*Provider ID: 312192*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1073212338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**LEE, JIHYUNG**
*Provider ID: 312189*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1073212338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## CERTIFIED ACUPUNCTURIST

**SEITZ, GRETCHEN**
*Provider ID: 246474*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 240-6470*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1396876959*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## CERTIFIED NURSE PRACTITIONER

**ABU-DOULEH, NADIA**
*Provider ID: 311556*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1851157937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## CERTIFIED NURSE PRACTITIONER

**AGUILA, YESENIA**
*Provider ID: 304624*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 266-6000*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1245966092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED NURSE PRACTITIONER

**ALLEN, KATHERINE**
*Provider ID: 315215*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1831557024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ALSTEEN, STEPHANIE**
*Provider ID: 291389*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013680982*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**AMOS, MARIA**
*Provider ID: 291439*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235891953*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ARENAS, CECILY**
*Provider ID: 311129*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700031507*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BAKER, TANYA**
*Provider ID: 255625*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (858) 534-8019*
*After Hours Phone: (858) 534-8019*
*Provider Gender: Female*
*NPI: 1699184259*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BENARD, ROBERT**
*Provider ID: 268229*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184027724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, Highland Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BILOTTA, NATALIE**
*Provider ID: 291418*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144809393*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RIVERSIDE COMMUNITY HOSP, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 311039*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 307668*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 922-6827*
*After Hours Phone: (800) 922-6827*

*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 307669*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BUENROSTRO, CHRISTINA**
*Provider ID: 243718*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851749253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BUI, ANH**
*Provider ID: 304272*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1184309684*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**BUI, ANH**
*Provider ID: 304273*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1184309684*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CAPOZZI, JENNIFER**
*Provider ID: 241031*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1336258276*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHANTALA, ELIZABETH**
*Provider ID: 291305*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942430442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHAVEZ, ALEXANDRIA**
*Provider ID: 243357*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811543622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHEATHAM, BRITTANY**
*Provider ID: 291461*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184111684*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHOATE, BERNADETTE**
*Provider ID: 286369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104173558*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHOATE, BERNADETTE**
*Provider ID: 286368*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104173558*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHUNG, SUEMIN**
*Provider ID: 311038*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1598477093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**COLEMAN, PAGE**

*Provider ID: 311049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871365312*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**COLEMAN, PAGE**
*Provider ID: 304288*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1871365312*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNER, PAMELA**
*Provider ID: 299930*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770558967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNOR, CAROLINE**
*Provider ID: 279835*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609081710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNOR, CAROLINE**
*Provider ID: 279836*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609081710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CORREA, ANN MARIE**
*Provider ID: 314732*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0505*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1083420814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**COSINO, ANJELICA**
*Provider ID: 201309*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295238749*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CRAWFORD, MARK**
*Provider ID: 313812*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Male*
*NPI: 1487368114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CRAWFORD, MARK**
*Provider ID: 313811*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Male*
*NPI: 1487368114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES, SUMMER**
*Provider ID: 253692*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1679850671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES-UPPAL, ALLISON**
*Provider ID: 311441*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1053002360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DAVIS, JANET**
*Provider ID: 255796*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 471-9250*
*Fax: (619) 471-9275*
*After Hours Phone: (619) 471-9250*
*Provider Gender: Female*
*NPI: 1164616280*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DE DIOS, SARAH JANE**
*Provider ID: 300051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528632742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DECOOL, TAYLOR**
*Provider ID: 314112*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Provider Gender: Female*
*NPI: 1548019763*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DEL VECCHIO, MEGAN**
*Provider ID: 301725*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1437662863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DEL VECCHIO, MEGAN**
*Provider ID: 301726*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1437662863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DEUTSCH, KAREN**

*Provider ID: 247981*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1740517127*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DEUTSCH, KAREN**

*Provider ID: 247980*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1740517127*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DOAN, ANGELA**

*Provider ID: 291426*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8372*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8372*

*Provider Gender: Female*

*NPI: 1639638968*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DOAN, ANGELA**

*Provider ID: 291425*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1639638968*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DRISCOLL, KARRIE**
*Provider ID: 286345*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396085098*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DWYER, ERIN**
*Provider ID: 269863*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Female*
*NPI: 1003260894*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ECLARINO, GALELEO**
*Provider ID: 296764*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 240-6470*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1518687748*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**EDNACOT, KARYNNE**
*Provider ID: 309725*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8010 FROST ST STE 100
SAN DIEGO, CA 92123
*Phone: (858) 650-5000*
*Fax: (858) 636-2903*
*After Hours Phone: (858) 650-5000*
*Provider Gender: Female*
*NPI: 1548027964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**EDNACOT, KARYNNE**
*Provider ID: 309540*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8010 FROST ST STE 100
SAN DIEGO, CA 92123
*Phone: (858) 650-5000*
*Fax: (858) 636-2903*
*After Hours Phone: (858) 650-5000*
*Provider Gender: Female*
*NPI: 1548027964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ERICKSON, LISA**
*Provider ID: 278982*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669442182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ERICKSON, LISA**
*Provider ID: 287444*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669442182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**FELD, KEREN**
*Provider ID: 297672*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1730835083*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

# D. Specialist Provider Directory

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FERMIL MITCHELL, YVONNE**
*Provider ID: 311352*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 564-8236*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1518086388*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FISHER, SLOANE**
*Provider ID: 301585*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1538807003*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**GARTH, MELISSA**
*Provider ID: 274053*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689232977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299466*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299468*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**
*Provider ID: 299467*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GRAYSON, ANDREA**
*Provider ID: 310325*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1447577671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*Provider ID: 293260*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858)*

279-0925
Provider Gender: Female
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
Provider ID: 293261
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

**CERTIFIED NURSE PRACTITIONER**

**HARKNESS, RUMIKO**
Provider ID: 208841
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487785093
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

**CERTIFIED NURSE PRACTITIONER**

**HART, BECKY**
Provider ID: 305337
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1316626344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
Provider ID: 268656
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
NPI: 1699078923

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**HEFNER, ANNA**
*Provider ID: 308420*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 434-1613*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1588913537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HILLIARD, THESALONICA**
*Provider ID: 284022*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1861956724*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HOERRES, LYNN**
*Provider ID: 315272*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
*Phone: (619) 299-2350*
*Fax: (619) 297-8379*
*After Hours Phone: (619) 299-2350*
*Provider Gender: Female*
*NPI: 1689226508*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 295392*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W 8:30AM-5:30PM*
*TH 8:30AM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 295393*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W 8:30AM-5:30PM*
*TH 8:30AM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**JONES, CHRISTA**
*Provider ID: 275563*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396371431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**KEMP, KATHRINE**
*Provider ID: 301276*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 645-6405*
*Provider Gender: Female*
*NPI: 1316615313*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KIDANE, ZINNIA**
*Provider ID: 302426*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1780334110*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KIDANE, ZINNIA**
*Provider ID: 302427*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1780334110*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KIM, YUNMI**
*Provider ID: 312916*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1467166942*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**LAFORTEZA, JOZELLE**
*Provider ID: 202666*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538578307*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301597*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301600*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3444 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123
*Phone: (858) 430-1101*
*Fax: (858) 221-5049*
*After Hours Phone: (858) 430-1101*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301601*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3444 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
*Phone: (858) 430-1101*
*Fax: (858) 221-5049*
*After Hours Phone: (858) 430-1101*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LUNA, ABIGAIL**
*Provider ID: 315816*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1366299315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MANZO, CORINA**
*Provider ID: 304481*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1669087326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MARTINEZ, CAROLYN**
*Provider ID: 293345*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1609101997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MEDINA, RUBELETA**
*Provider ID: 296673*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (858) 240-6470*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1881153963*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MENDOZA, GRETEL MARIE**
*Provider ID: 303202*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1245652387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299648*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299649*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299647*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MIDORO, ABEGAILLE**
*Provider ID: 303829*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1952925851*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MIDORO, ABEGAILLE**
*Provider ID: 303828*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
*Phone: (844) 200-2426*
*Fax: (858) 536-8034*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1952925851*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MILLER, EVA**
*Provider ID: 255833*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 471-9210*
*After Hours Phone: (619) 471-9210*
*Provider Gender: Female*
*NPI: 1043492523*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MOHEBBI, ATHENA**
*Provider ID: 201325*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

# D. Specialist Provider Directory

4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952627176*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MULVEY, CAOILFHIONN**
*Provider ID: 291419*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184386864*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NEJATI, FRESHTA**
*Provider ID: 214112*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1831598119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NORTON, CALEB**
*Provider ID: 314349*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316619430*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NORTON, CALEB**
*Provider ID: 314348*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316619430*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NORTON, CALEB**
*Provider ID: 314347*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316619430*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**NORTON, CALEB**
*Provider ID: 314650*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (619) 294-3746*
*Fax: (619) 543-3645*
*After Hours Phone: (619) 294-3746*
*Provider Gender: Male*
*NPI: 1316619430*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**OCONNELL, STEFANY**
*Provider ID: 296846*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1386378479*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**OREJEL, EDITH**
*Provider ID: 296715*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1073278180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W 8:30AM-5:30PM*
*TH 5:30PM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**OREJEL, EDITH**
*Provider ID: 296716*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1073278180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W 8:30AM-5:30PM*
*TH 5:30PM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PACIS, NOAH**
*Provider ID: 314362*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003677816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PACIS, NOAH**
*Provider ID: 314363*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003677816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PACIS, NOAH**
*Provider ID: 314361*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1003677816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PACIS, NOAH**
*Provider ID: 314360*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003677816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAI, SARAH**
*Provider ID: 276870*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255762167*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAPPALARDO, ASHLEY**
*Provider ID: 311107*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386302099*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*Provider ID: 293249*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*Provider ID: 293248*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RAJAEI, NILOUFAR**
*Provider ID: 291437*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1275904047*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**RAJIV, RENUKA**
*Provider ID: 315856*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1821819301*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RALEIGH, DEBORAH**
*Provider ID: 312728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1689006876*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**RANDLE, CARRIE**
*Provider ID: 299296*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1558557348*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: NAVAL MEDICAL CTR SD RBE, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**RIEGO, SUZANNE**
*Provider ID: 214477*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (858) 292-7200*
*After Hours Phone: (858) 292-7200*
*Provider Gender: Female*
*NPI: 1144453754*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**RILEY, JEREN**
*Provider ID: 313876*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Male*
*NPI: 1932742376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**RODENMEYER, EVE**
*Provider ID: 295956*

# D. Specialist Provider Directory

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1225782022*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**
*Provider ID: 302559*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1548683378*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**
*Provider ID: 287763*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548683378*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**
*Provider ID: 311051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548683378*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSSI, CATHERINE**
*Provider ID: 291445*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1649934126*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROZO, JOSE**
*Provider ID: 300037*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528787132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*Provider ID: 293288*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*Provider ID: 293287*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SALINAS, NIECEL**
*Provider ID: 312993*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205579141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SANACORA, RACHEL**
*Provider ID: 297729*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1548987985*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**SANACORA, RACHEL**
*Provider ID: 297728*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1548987985*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*Provider ID: 293285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*Provider ID: 293286*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*Provider ID: 293259*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*Provider ID: 293258*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SEARS-WILEY, ELIZABETH**
*Provider ID: 276851*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215394382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SELBY, BLAKE**
*Provider ID: 256646*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417194358*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SELBY, BLAKE**
*Provider ID: 246423*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417194358*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 311055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932522778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SWANSON, BRIANNA**
*Provider ID: 313921*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*

*Provider Gender: Female*
*NPI: 1538848148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SWANSON, BRIANNA**
*Provider ID: 313920*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1538848148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SWARTZ, ERIN**
*Provider ID: 255787*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Female*
*NPI: 1639571292*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TAING, JENNIFER**
*Provider ID: 201573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1649528357*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TALBOT, ADRIANNE**
*Provider ID: 278183*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST STE 1A
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1992048557*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**THOMPSON, COURTNEY**
*Provider ID: 311544*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (619) 543-3995*
*Fax: (619) 543-3964*
*After Hours Phone: (619) 543-3995*
*Provider Gender: Female*
*NPI: 1629487285*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TONG, KIM**
*Provider ID: 313528*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861069874*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TONG, KIM**
*Provider ID: 313526*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
408 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861069874*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TREJO, ANA**
*Provider ID: 307672*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

# D. Specialist Provider Directory

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033717194*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**
*Provider ID: 307659*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477325181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**VIBAL-POASTER, MARIA KHRISTINA**
*Provider ID: 205651*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1376046680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**
*Provider ID: 307657*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477325181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WALDRUP, LA RHONDA**
*Provider ID: 299260*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1831627181*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**WEIMER, BRYANA**
*Provider ID: 313931*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1942037510*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**WEIMER, BRYANA**
*Provider ID: 313932*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1942037510*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**WIETZKE, MATTHEW**
*Provider ID: 311060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518613678*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WOO, ANDY**
*Provider ID: 299916*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1609450550*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WOO, ANDY**
*Provider ID: 311024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609450550*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**ALFONSO, ALVIN**
*Provider ID: 256374*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952653404*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**APPLEGET, JOSEPH**
*Provider ID: 239602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568980472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RIVERSIDE COMMUNITY HOSP, ORANGE COAST MEM MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BARSOTTI, ALEXANDRA**
*Provider ID: 312687*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1356100051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BARSOTTI, ALEXANDRA**
*Provider ID: 312688*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1356100051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BOEING, KRISTINA**
*Provider ID: 274397*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205134301*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BURROWS, TERENCE**
*Provider ID: 256694*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023194560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**DOLLAND, STEVEN**
*Provider ID: 280552*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1982059044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FARRIS, AMANDA**
*Provider ID: 311601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FARRIS, AMANDA**
*Provider ID: 311600*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FERRITER, STACY**
*Provider ID: 265295*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780725556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**GARCIA, CALVIN**
*Provider ID: 217365*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1427419944*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**GONZALEZ, LISA**
*Provider ID: 299905*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083254205*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**LANTRIP, KEATON**
*Provider ID: 311517*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043059686*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**LANTRIP, KEATON**
*Provider ID: 311518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043059686*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**RAMIREZ, NICOLE**
*Provider ID: 291404*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487213500*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**RHYNER, GINA**
*Provider ID: 313688*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1508163437*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SACKS, BRENT**
*Provider ID: 278003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982133591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SCOTT, TIFFANY**
*Provider ID: 312870*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1376885186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SCOTT, TIFFANY**
*Provider ID: 312869*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1376885186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**TOCCO, JESSICA**
*Provider ID: 312884*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366836397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**TOCCO, JESSICA**
*Provider ID: 312885*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366836397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**VINCENT, BERLIN**
*Provider ID: 291454*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144987801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WAKEFIELD, CHANTAL**
*Provider ID: 313052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1548006141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**WAKEFIELD, CHANTAL**

*Provider ID: 313053*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1548006141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**CHOI, NATHALIE**
*Provider ID: 301715*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073241618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**CHOI, NATHALIE**
*Provider ID: 301714*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073241618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**EKHOLM, JANNA**
*Provider ID: 290584*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1588977151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED**

# D. Specialist Provider Directory

**NURSE MIDWIFE**

**GOODWIN, RACHEL**

*Provider ID: 210019*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1518274919*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GOODWIN, RACHEL**

*Provider ID: 210018*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1518274919*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GREAR MANN, MELISSA**

*Provider ID: 210053*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1255384475*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GREAR MANN, MELISSA**

*Provider ID: 210052*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1255384475*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUNTHER, HOPE**
*Provider ID: 210041*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1285667741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**HIRSCH, JENNIFER**
*Provider ID: 210058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891752069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**HIRSCH, JENNIFER**
*Provider ID: 210055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (619) 543-7878*
*After Hours Phone: (619) 543-7878*
*Provider Gender: Female*
*NPI: 1891752069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**HIRSCH, JENNIFER**
*Provider ID: 210054*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-7878*
*After Hours Phone: (619) 543-7878*
*Provider Gender: Female*
*NPI: 1891752069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**NATHAN, CARLY**
*Provider ID: 301048*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235670977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**NATHAN, CARLY**
*Provider ID: 301047*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235670977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CHIROPRACTOR**

**CHAMPAGNE, ALLISON**
*Provider ID: 310817*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1861957482*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**
*Provider ID: 291546*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9995 CARMEL MOUNTAIN RD STE D
SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*Fax: (619) 399-5959*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Male*
*NPI: 1821463159*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

# D. Specialist Provider Directory

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**

*Provider ID: 291547*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*Fax: (619) 399-5959*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Male*

*NPI: 1821463159*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CHIROPRACTOR**

**LUU, DANIEL**

*Provider ID: 269883*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115

*Phone: (619) 287-1235*

*Fax: (619) 255-6406*

*After Hours Phone: (619) 287-1235*

*Provider Gender: Male*

*NPI: 1225108269*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M 10AM-6PM*
*TU 10AM-2PM*
*W 10AM-6PM*
*TH 10AM-2PM*
*F 10AM-6PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CHIROPRACTOR**

**MONTANE, RUBEN**

*Provider ID: 309694*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD
SAN DIEGO, CA 92154

*Phone: (619) 429-3733*

*Fax: (619) 628-5550*

*After Hours Phone: (619) 429-3733*

*Provider Gender: Male*

*NPI: 1346725769*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**DERMATOLOGY**

**BRIONES, NAOMI**

*Provider ID: 313462*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1477013878*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**DERMATOLOGY**

**CALAME, ANTOANELLA**

*Provider ID: 290301*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
*Phone: (858) 750-2983*
*Fax: (858) 900-2779*
*After Hours Phone: (858) 750-2983*
*Provider Gender: Female*
*NPI: 1285817569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Romanian*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, YUMA REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**DERMATOLOGY**

**DANG, TIMOTHY**
*Provider ID: 309721*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518427913*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KANNAN, SWATI**
*Provider ID: 286287*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1508155227*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KAUNITZ, GENEVIEVE**
*Provider ID: 285011*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1053734905*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KIM, GRACE**
*Provider ID: 313549*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487114047*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KOLAR, MATTHEW**
*Provider ID: 312036*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164050167*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 308736*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 308915*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIOU, YUJIE**
*Provider ID: 308315*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750944450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**MALONEY, NOLAN**
*Provider ID: 311459*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124655618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**SHI, VERONICA**
*Provider ID: 271713*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (858) 657-8322*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8322*
*Provider Gender: Female*
*NPI: 1366897464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**SHI, VERONICA**
*Provider ID: 286335*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366897464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**STERN, MARLEIGH**
*Provider ID: 306888*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1710447883*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**SUTHERLAND, ANNA**
*Provider ID: 311463*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1881222388*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**WONG, HENRY**
*Provider ID: 313609*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437237567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**ZUBAIR, RAHEEL**
*Provider ID: 306520*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
*Phone: (858) 454-4300*
*Fax: (858) 454-5088*
*After Hours Phone: (858) 454-4300*
*Provider Gender: Male*
*NPI: 1326493024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Community Care IPA LLC*

**EMERGENCY MEDICINE**

**AMANN, CHRISTOPHER**
*Provider ID: 270913*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134326895*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**AUSTIN, ANDREA**
*Provider ID: 269291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811289093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BARRY, JEFFREY**
*Provider ID: 271129*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801207006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BARRY, JEFFREY**
*Provider ID: 271130*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (855) 535-5864*
*Fax: (888) 539-8781*

*After Hours Phone: (855) 535-5864*
*Provider Gender: Male*
*NPI: 1801207006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BARRY, JEFFREY**
*Provider ID: 271132*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801207006*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BELLINGHAUSEN, AMY**
*Provider ID: 270333*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801206354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BELLINGHAUSEN, AMY**
*Provider ID: 270336*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801206354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**BELLINGHAUSEN, AMY**
*Provider ID: 270334*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801206354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASAS, TAMARA**
*Provider ID: 313568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669962270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASAS, TAMARA**
*Provider ID: 311938*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1669962270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**

*Provider ID: 279314*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063893063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**
*Provider ID: 301706*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063893063*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287430*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287428*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHIN, BRIAN**

*Provider ID: 313570*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1770140782*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**COOK, LEANNE**

*Provider ID: 313633*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1053948687*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**COYNE, CHRISTOPHER**

*Provider ID: 303036*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (619) 543-7051*

*Fax: (619) 543-3115*

*After Hours Phone: (619) 543-7051*

*Provider Gender: Male*

*NPI: 1043590169*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO, EL CENTRO REGIONAL MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**DHILLON, NAVNEET**

*Provider ID: 313517*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1871071167*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

# D. Specialist Provider Directory

**DOROS, JOSHUA**
*Provider ID: 315893*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558756395*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**EAGLE, SONJA**
*Provider ID: 311503*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699394114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HOGUE, BRENNA**
*Provider ID: 301711*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043705296*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HORNBEAK, KIRSTEN**
*Provider ID: 240022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205214442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**HRYNIEWICKI, ADAM**
*Provider ID: 313523*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184244014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**JACKSON, MEGAN**
*Provider ID: 313540*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1154958437*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KRYSHTAFOVYCH, SOLOMIYA**
*Provider ID: 313019*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801425244*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KRYSHTAFOVYCH, SOLOMIYA**
*Provider ID: 313020*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801425244*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**KUTZ, CRAIG**
*Provider ID: 283845*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598295925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LAFREE, ANDREW**
*Provider ID: 313675*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1639437809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LAFREE, ANDREW**
*Provider ID: 313673*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1639437809*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 285630*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 313017*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 313311*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIPPI, MATTHEW**
*Provider ID: 311492*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932736485*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**MASON, MATTHEW**
*Provider ID: 313687*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487116281*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**MCDANIEL, MICHELE**
*Provider ID: 246901*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366761959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL,*

# D. Specialist Provider Directory

*SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**EMERGENCY MEDICINE**

**MERTE, BRYAN**
*Provider ID: 313611*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124657804*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**NOSTE, ERIN**
*Provider ID: 239798*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 605-4441*
*After Hours Phone: (858) 605-4441*
*Provider Gender: Female*
*NPI: 1871732214*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-10PM*
*M-F 8AM-5PM*
*SA 8AM-10PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**NOSTE, ERIN**
*Provider ID: 239797*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6400*
*After Hours Phone: (619) 543-6400*
*Provider Gender: Female*
*NPI: 1871732214*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**PARK, JAY**
*Provider ID: 285607*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366478372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**PHAM, LILY**
*Provider ID: 304937*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1811423072*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**EMERGENCY MEDICINE**

**PHAM, LILY**
*Provider ID: 304933*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1811423072*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**EMERGENCY MEDICINE**

**ROURKE, KYLE**
*Provider ID: 313483*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851928386*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

# D. Specialist Provider Directory

**RUDOLF, FRANCES**
*Provider ID: 240159*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 657-7000*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Female*
*NPI: 1821487430*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SABHA, MAHMOUD**
*Provider ID: 243441*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457747883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SAMHA, LEEN**
*Provider ID: 313010*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1992334825*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SANDIFORD, PATRICK**
*Provider ID: 312859*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1700151917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SEGAL, LAUREN**
*Provider ID: 313710*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013278431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SELF, MICHAEL**
*Provider ID: 313747*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053702746*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SELTZER, JUSTIN**
*Provider ID: 315889*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1447791843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SHISHLOV, KIRILL**
*Provider ID: 313658*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114248077*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SHISHLOV, KIRILL**
*Provider ID: 313656*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1114248077*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SLOANE, CHRISTIAN**
*Provider ID: 209518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841233145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SMITH, CASEY**
*Provider ID: 313729*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871099333*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SMITH, CASEY**
*Provider ID: 313727*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871099333*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**SMITH, CASEY**
*Provider ID: 313730*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871099333*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TANAKA, HIDEAKI**
*Provider ID: 240124*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124280730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-8PM*
*M-F 8AM-5PM*
*SA 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TANAKA, HIDEAKI**
*Provider ID: 315894*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124280730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 313736*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6400*
*Fax: (619) 543-3115*
*After Hours Phone: (619) 543-6400*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 313736*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 313737*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TOMASZEWSKI, CHRISTIAN**
*Provider ID: 313735*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982629408*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**TORRES, ERICK**
*Provider ID: 313618*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548846983*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**WAYMENT, ANDREW**
*Provider ID: 313529*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013593839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: BEAR VALLEY COMM HOSP, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YOU, ALAN**
*Provider ID: 269936*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225425697*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**
*Provider ID: 301708*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528564150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**
*Provider ID: 313702*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528564150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**DECAMPS, SCARLETT**
*Provider ID: 311511*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**EKANAYAKE, PREETHIKA**
*Provider ID: 284813*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083922462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sinhala, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**EKANAYAKE, PREETHIKA**
*Provider ID: 284812*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1083922462*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sinhala, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**JUANG, PATRICIA**
*Provider ID: 255605*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (858) 657-7298*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265695795*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**KULASA, KRISTEN**
*Provider ID: 255622*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (619) 543-6500*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932324175*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287780*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY**

**METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287781*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY**
**METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287782*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287779*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**SANTOS CAVAIOLA, TRICIA**
*Provider ID: 256091*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (858) 657-7298*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518163799*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**TANTISIRA, LALITA**
*Provider ID: 286323*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1508874298*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**VALDEZ, KRYSTAL ANGELI**

*Provider ID: 299743*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*Fax: (858) 578-4417*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1629480272*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\100*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ENDOCRINOLOGY METABOLISM DIABETES**

**VALDEZ, KRYSTAL ANGELI**

*Provider ID: 299363*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*Fax: (858) 578-4417*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1629480272*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ALDERSON, CHEVON**

*Provider ID: 315439*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

2630 1ST AVE
SAN DIEGO, CA 92103

*Phone: (619) 234-2158*

*Fax: (619) 234-0505*

*After Hours Phone: (619) 234-2158*

*Provider Gender: Female*

*NPI: 1396124145*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BELL, TRACY**

*Provider ID: 304813*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1497821318*

*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BELL, TRACY**
*Provider ID: 304814*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1497821318*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BERNADETT, ALEX**
*Provider ID: 296740*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10505 SORRENTO VALLEY RD STE 200
SAN DIEGO, CA 92121
*Phone: (858) 793-7860*
*Fax: (858) 436-1289*
*After Hours Phone: (858) 793-7860*
*Provider Gender: Male*
*NPI: 1215382841*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**BERNADETT, ALEX**
*Provider ID: 296739*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6699 ALVARADO RD STE 2100
SAN DIEGO, CA 92120
*Phone: (619) 229-3909*
*Fax: (619) 229-3902*
*After Hours Phone: (619) 229-3909*
*Provider Gender: Male*
*NPI: 1215382841*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CARRAGEE, CATHERINE**
*Provider ID: 313616*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306425681*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207163*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207167*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207164*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**DANG, LAUREL**
*Provider ID: 309605*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1396366050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**HONG, DANA**
*Provider ID: 311455*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1982276341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOHN, TANNER**
*Provider ID: 303515*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 595-0258*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1043707326*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300057*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (858) 249-6890*
*After Hours Phone: (858) 249-6890*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300059*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**KUROSAKA, MOMO**
*Provider ID: 291447*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205848363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**KUROSAKA, MOMO**
*Provider ID: 291448*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205848363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**FAMILY PRACTICE**

**MARTINEZ, BRIANNA**

*Provider ID: 311506*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9333 GENESEE AVE
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1770161150*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**MCLAUGHLIN, ERIK**

*Provider ID: 303847*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

2630 1ST AVE
SAN DIEGO, CA 92103

*Phone: (619) 234-2158*

*Fax: (619) 234-0505*

*After Hours Phone: (619) 234-2158*

*Provider Gender: Male*

*NPI: 1861637217*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**PERESS, LILIA**

*Provider ID: 304276*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*

*Provider Gender: Female*

*NPI: 1275945446*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Ukrainian*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**PERESS, LILIA**

*Provider ID: 304277*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1275945446*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Ukrainian*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ROSADO, IVAN**

*Provider ID: 299244*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
316 25TH ST
SAN DIEGO, CA 92102
*Phone: (619) 662-4100*
*Fax: (619) 238-3807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1316479603*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8:30AM-5:30PM*
*M-F 8:30AM-5:30PM*
*SA 8:30AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**RYAN, RHIANNON**
*Provider ID: 311477*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184205668*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**SCOTT, LAGINA**
*Provider ID: 302648*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 263-9601*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1558897009*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SHMERLING, ALISON**
*Provider ID: 312246*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1609295526*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SHMERLING, ALISON**
*Provider ID: 312249*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1609295526*

# D. Specialist Provider Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SHMERLING, ALISON**
*Provider ID: 312248*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1609295526*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SHMERLING, ALISON**
*Provider ID: 312247*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1609295526*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**SUMMERS-DAY, COURTNEY**
*Provider ID: 290976*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1124288873*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**VAN PRATT LEVIN, BENJAMIN**
*Provider ID: 302531*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (877) 673-1361*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Male*
*NPI: 1619438330*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## FAMILY PRACTICE

**VO, PHU LUONG**
*Provider ID: 303332*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1043849177*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

**LUKACZ, EMILY**
*Provider ID: 256956*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 360
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

**LUKACZ, EMILY**
*Provider ID: 256955*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## GASTROENTEROLOGY

**ANAND, GOBIND**
*Provider ID: 272837*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2347*
*Fax: (858) 657-7259*
*After Hours Phone: (619)*

*543-2347*
*Provider Gender: Male*
*NPI: 1861626814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**ANAND, GOBIND**
*Provider ID: 304187*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861626814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**BAUMAN, LAURA**
*Provider ID: 260041*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1255697850*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GASTROENTEROLOGY**

**BRANCH, LAUREL**
*Provider ID: 313513*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1912437617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**BRANCH, LAUREL**
*Provider ID: 313516*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1912437617*

# D. Specialist Provider Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CARETHERS, JOHN**
*Provider ID: 311109*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CHAVEZ, LUIS**
*Provider ID: 311340*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 266-6006*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**DAVE, SHRAVAN**
*Provider ID: 304204*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588081814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**DAVE, SHRAVAN**
*Provider ID: 270450*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588081814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KRAUSE, AMANDA**
*Provider ID: 313631*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528561305*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KUMAR, SOMA**
*Provider ID: 205377*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1356502520*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GASTROENTEROLOGY**

**KUO, SELENA**
*Provider ID: 313479*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174029821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**KUO, SELENA**
*Provider ID: 313476*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174029821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**NOUREDDIN, NABIL**
*Provider ID: 313612*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1972037026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**NOUREDDIN, NABIL**
*Provider ID: 313615*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1972037026*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**NOVO, MEGAN**
*Provider ID: 296066*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 266-6000*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1770961971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**POLK, DAVID**
*Provider ID: 275449*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1427140839*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GASTROENTEROLOGY**

**SHAH, SHAILJA**
*Provider ID: 283896*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**SHAH, SHAILJA**
*Provider ID: 304178*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**TSAI, MATTHEW**
*Provider ID: 304196*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**YOUSSEF, FADY**
*Provider ID: 304186*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265887723*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## GASTROENTEROLOGY

**YOUSSEF, FADY**
*Provider ID: 300024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265887723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## GENERAL PRACTICE

**RISSER, JOSEPH**
*Provider ID: 293216*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GENERAL PRACTICE

**RISSER, JOSEPH**
*Provider ID: 293217*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1952386765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GENETICS CLINICAL

**REIMERS, REBECCA**
*Provider ID: 294650*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GENETICS CLINICAL**

**REIMERS, REBECCA**
*Provider ID: 302348*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5840*
*Fax: (858) 966-8550*
*After Hours Phone: (858) 966-5840*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GENETICS MEDICAL**

**DELCAMPOCASANELLES, MIGUEL**
*Provider ID: 206013*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5840*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-5840*
*Provider Gender: Male*
*NPI: 1598141475*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Italian, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GENETICS MEDICAL**

**NIEMI, ANNA-KAISA**
*Provider ID: 307094*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5840*
*Fax: (858) 966-8550*
*After Hours Phone: (858) 966-5840*
*Provider Gender: Female*
*NPI: 1497941397*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268691*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
*Phone: (858) 278-9911*
*Fax: (858) 565-7324*
*After Hours Phone: (858) 278-9911*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268689*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
*Phone: (619) 583-7002*
*Fax: (619) 583-9404*
*After Hours Phone: (619) 583-7002*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268652*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
*Phone: (619) 583-7002*
*Fax: (619) 583-9404*
*After Hours Phone: (619) 583-7002*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268653*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
*Phone: (858) 278-9911*
*Fax: (858) 565-7324*
*After Hours Phone: (858) 278-9911*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEMATOLOGY / ONCOLOGY**

**AL-BANAA, KADHIM**

*Provider ID: 313023*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1548790041*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**AL-BANAA, KADHIM**
*Provider ID: 313024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Male*
*NPI: 1548790041*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**CHEN, YU-WEI**
*Provider ID: 303059*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1245694801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**LEE, KAREN**
*Provider ID: 284165*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1518352970*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**HEMATOLOGY / ONCOLOGY**

**NGUYEN, ANTHONY**
*Provider ID: 301060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295153575*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**PAUL, MEGAN**
*Provider ID: 274499*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1427495894*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**HEMATOLOGY / ONCOLOGY**

**VU, PETER**
*Provider ID: 272716*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861810830*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**ZHOU, JENNY**
*Provider ID: 273188*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 310
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1598007924*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / PATHOLOGY**

**WANG, HUAN YOU**

*Provider ID: 247585*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689633729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HEMATOLOGY / PATHOLOGY

**WANG, HUAN YOU**
*Provider ID: 247583*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689633729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HEPATOLOGY

**BARMAN, PRANAB**
*Provider ID: 241953*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
*Phone: (800) 826-5273*
*After Hours Phone: (800) 826-5273*
*Provider Gender: Male*
*NPI: 1023301991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPICE AND PALLIATIVE MEDICINE

**RUBENZIK, TAMARA**
*Provider ID: 245573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
*Provider ID: 276671*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**CHILDERS, DIANA**
*Provider ID: 275068*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033128376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**DUBE, AMANDA**
*Provider ID: 310293*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1710407531*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**HOSPITALIST MD/DO**

**FIRESTEIN, CATHERINE**
*Provider ID: 275387*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427348382*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**HAMMOND, CHARLES**
*Provider ID: 278588*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033641816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**KUPELIAN, CHLOE**
*Provider ID: 310785*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1780013748*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**INFECTIOUS DISEASE**

**ALDOUS, JEANNETTE**
*Provider ID: 290420*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 205-6384*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INFECTIOUS DISEASE**

**BAMFORD, LAURA**
*Provider ID: 276546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103

*Phone: (619) 543-6382*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-6382*
*Provider Gender: Female*
*NPI: 1750435996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**DEISS, ROBERT**
*Provider ID: 258330*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (619) 543-3995*
*After Hours Phone: (619) 543-3995*
*Provider Gender: Male*
*NPI: 1194977652*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**HORTON, LUCY**
*Provider ID: 240887*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427324821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**MARTIN, THOMAS**
*Provider ID: 277225*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (619) 543-5890*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-5890*
*Provider Gender: Male*
*NPI: 1093193583*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**INFECTIOUS DISEASE**

**MARTIN, THOMAS**

*Provider ID: 277226*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1093193583*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**MOODLEY, AMARAN**

*Provider ID: 208558*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (885) 966-7785*

*Fax: (858) 966-8658*

*After Hours Phone: (885) 966-7785*

*Provider Gender: Male*

*NPI: 1104023670*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**INFECTIOUS DISEASE**

**PANNARAJ, PIA**

*Provider ID: 301026*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-7785*

*Fax: (858) 966-8658*

*After Hours Phone: (858) 966-7785*

*Provider Gender: Female*

*NPI: 1942478524*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**INFECTIOUS DISEASE**

**RAMIREZ SANCHEZ, CLAUDIA**

*Provider ID: 299946*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1659720555*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,*

*SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**INFECTIOUS DISEASE**

**WILKIN, TIMOTHY**
*Provider ID: 311164*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740334978*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**ARUTYUNOV, BORIS**
*Provider ID: 201910*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1144562703*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BALL, SHELDON**
*Provider ID: 294137*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1689646275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**BALL, SHELDON**
*Provider ID: 294136*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858)*

*810-8700*
*Provider Gender: Male*
*NPI: 1689646275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**BARRIOLA RUBARTH, RODRIGO**
*Provider ID: 311570*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1336729979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273983*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (760) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (760) 471-9186*
*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**CHENG, GEORGE**
*Provider ID: 247639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316174568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**DJEKIC, KRISTINA**
*Provider ID: 286668*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103

# D. Specialist Provider Directory

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417343732*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**FOX, SUTTON**
*Provider ID: 313474*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1326624008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**GRUNVALD, EDUARDO**
*Provider ID: 286344*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497791339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**GRUNVALD, EDUARDO**
*Provider ID: 286343*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497791339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**GUPTA, VINEET**
*Provider ID: 313695*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942431069*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**HASTIE, ELIZABETH**
*Provider ID: 291431*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1154818797*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**HOGARTH, MICHAEL**
*Provider ID: 214386*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225019193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**IBARRA, ALLISON**
*Provider ID: 312685*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1881221273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**JABBOUR, MOUSSA**
*Provider ID: 256659*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1255741633*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KATZ, YISRAEL**
*Provider ID: 272936*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730507872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KVIATKOVSKY, MILLA**
*Provider ID: 274003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6222*
*After Hours Phone: (619) 543-6222*
*Provider Gender: Female*
*NPI: 1366855355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LAGO HERNANDEZ, CARLOS**
*Provider ID: 238622*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1558756270*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LAM, MICHAEL**

*Provider ID: 274411*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1578974259*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LAM, MICHAEL**

*Provider ID: 274410*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1578974259*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**LEVERONE, NICHOLAS**

*Provider ID: 272692*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1407388564*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MAJITHIA, AMIT**

*Provider ID: 255882*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801091459*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MARINO, NIKOLAS**
*Provider ID: 313525*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316523988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MUNCE, DANIELLE**
*Provider ID: 272577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1740644509*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NGUYEN, MICHELLE**
*Provider ID: 311483*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NGUYEN, MICHELLE**
*Provider ID: 311484*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOKES, BRANDON**
*Provider ID: 287582*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487040051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOVIKOV, YEVGENY**
*Provider ID: 313732*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144682428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**PASCUA, RYAN**
*Provider ID: 312026*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Male*
*NPI: 1972064269*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**SEBASKY, MEGHAN**
*Provider ID: 273962*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6222*
*Fax: (619) 543-8255*
*After Hours Phone: (619) 543-6222*
*Provider Gender: Female*
*NPI: 1538351408*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SIRIPHAND, CHRISTOPHER**

*Provider ID: 311445*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1891258596*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SMITH, CHELSEY**

*Provider ID: 239920*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (858) 657-6110*

*After Hours Phone: (858) 657-6110*

*Provider Gender: Female*

*NPI: 1013264506*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TANTISIRA, LALITA**

*Provider ID: 275927*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1508874298*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Thai*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TANTISIRA, LALITA**

*Provider ID: 275926*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1508874298*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Thai*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TAYLOR, DAVID**
*Provider ID: 274469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033572995*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**THOMAS, ROBERT**
*Provider ID: 238929*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053765909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TRAN, HAO**
*Provider ID: 313745*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891997078*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WANG, ANGELA**
*Provider ID: 259535*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730133976*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WANG, ANGELA**
*Provider ID: 259534*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (855) 355-5864*
*Fax: (888) 539-8781*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Female*
*NPI: 1730133976*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WEBSTER, LUKE**
*Provider ID: 272681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1235660887*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WONG, JUSTIN**
*Provider ID: 313599*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740869387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**YANG, JENNY**
*Provider ID: 283026*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346636453*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**YANG, JENNY**
*Provider ID: 283027*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346636453*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**ZHANG, SHERRY**
*Provider ID: 272657*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1588198147*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AFSHAR, KAMYAR**
*Provider ID: 311561*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1407050669*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AKUTHOTA, PRAVEEN**
*Provider ID: 311490*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

# D. Specialist Provider Directory

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1396704698*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AKUTHOTA, PRAVEEN**
*Provider ID: 311491*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 2
SAN DIEGO, CA 92121
*Phone: (855) 355-5864*
*Fax: (858) 657-6171*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1396704698*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BARNES, LAURA**
*Provider ID: 312185*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558749242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BARNES, LAURA**
*Provider ID: 312184*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558749242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 276291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR STE 3-313
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 210825*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 276290*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
555 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BOROK, ZEA**
*Provider ID: 284706*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-5273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-5273*
*Provider Gender: Female*
*NPI: 1750317251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BOROK, ZEA**
*Provider ID: 284705*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-5273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-5273*
*Provider Gender: Female*
*NPI: 1750317251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**CRITICAL CARE MEDICINE**

**BOROK, ZEA**
*Provider ID: 284704*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-5273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-5273*
*Provider Gender: Female*
*NPI: 1750317251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**CROUCH, DANIEL**

*Provider ID: 313726*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1710182423*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**DEWOLF, SEAN**
*Provider ID: 311453*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518312230*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**HEPOKOSKI, MARK**
*Provider ID: 311546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1649408790*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**IBRAHIM, ISLAM**
*Provider ID: 311489*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1962586917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**
*Provider ID: 311590*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**
*Provider ID: 311591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**KAMDAR, BIREN**
*Provider ID: 311452*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1528115417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311557*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 271466*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992141428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 271467*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992141428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 271469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992141428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ORR, JEREMY**
*Provider ID: 311524*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992940969*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ORR, JEREMY**
*Provider ID: 311525*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992940969*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**PAGE, BRADY**
*Provider ID: 313677*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528557550*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 271939*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**GERIATRIC MEDICINE**

**AGNIHOTRI, PARAG**
*Provider ID: 247292*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1447351085*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: MERCY GENERAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL**

**CARDIOLOGY**

**ADLER, ERIC**
*Provider ID: 313659*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1477699601*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**ADLER, ERIC**
*Provider ID: 313660*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1477699601*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**AL KHIAMI, BELAL**
*Provider ID: 313672*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**AL KHIAMI, BELAL**
*Provider ID: 312692*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**ANG, LAWRENCE**
*Provider ID: 313696*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851529879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**BUI, QUAN**
*Provider ID: 313662*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831553718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**BUI, QUAN**
*Provider ID: 310076*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831553718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 300061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 312737*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS*

*MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 313324*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**KRUMMEN, DAVID**
*Provider ID: 313714*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1235152885*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**LACHARITE-ROBERGE, ANNE-SOPHIE**
*Provider ID: 312994*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1285089805*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**LACHARITE-ROBERGE, ANNE-SOPHIE**
*Provider ID: 312995*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1285089805*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, JANET**
*Provider ID: 314387*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1922454396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, JANET**
*Provider ID: 311577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1922454396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, GARY**
*Provider ID: 313301*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437503208*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MAHMUD, EHTISHAM**
*Provider ID: 313738*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD

SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730112335*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Urdu*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 309250*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
412 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 245577*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**REEVES, RYAN**
*Provider ID: 313686*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548440902*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

# D. Specialist Provider Directory

**SHEREV, DIMITRI**
*Provider ID: 302987*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
*Phone: (619) 582-4490*
*Fax: (619) 582-4737*
*After Hours Phone: (619) 582-4490*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 296050*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 295844*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 309096*

*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
412 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**TORRES BARBA, DAVID**
*Provider ID: 312707*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1447612676*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**UREY, MARCUS**
*Provider ID: 313733*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1972820058*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**WETTERSTEN, NICHOLAS**
*Provider ID: 313294*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1063701068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**LICENSED PROFESSIONAL CLINICAL COUNSELOR**

**GARCIA, JENNI**

*Provider ID: 299310*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3025 BEYER BLVD
SAN DIEGO, CA 92154

*Phone: (619) 662-4100*

*Fax: (619) 662-4119*

*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*

*NPI: 1437775863*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**LICENSED PROFESSIONAL CLINICAL COUNSELOR**

**NAKAMURA, TIFFANY**

*Provider ID: 239584*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121

*Phone: (858) 534-8019*

*After Hours Phone: (858) 534-8019*

*Provider Gender: Female*

*NPI: 1356846349*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**ADAMI, REBECCA**

*Provider ID: 272670*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 966-6711*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Female*

*NPI: 1992149447*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**ADAMI, REBECCA**

*Provider ID: 277179*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 966-6711*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Female*
*NPI: 1992149447*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300011*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300010*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**LAURENT, LOUISE**

*Provider ID: 208640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770532707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MCCULLOUGH, DEIRDRE**
*Provider ID: 210034*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 939-4102*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1639153018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**MCCULLOUGH, DEIRDRE**
*Provider ID: 277260*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1639153018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**

*Provider ID: 296994*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 939-4102*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296998*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 220
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296989*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 430
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL**

# D. Specialist Provider Directory

**MEDICINE**

**MELBER, DORA**

*Provider ID: 296990*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 966-6711*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Female*

*NPI: 1124413026*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hungarian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**NHAN-CHANG, CHIA-LING**

*Provider ID: 312711*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1265686794*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**NHAN-CHANG, CHIA-LING**

*Provider ID: 312713*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1265686794*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**NHAN-CHANG, CHIA-LING**

*Provider ID: 312712*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1265686794*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294648*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 220
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**
*Provider ID: 294647*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 939-4102*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 277314*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1154305977*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**
*Provider ID: 214436*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 939-4102*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1154305977*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**

*Provider ID: 277307*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 939-4102*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1477563302*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**

*Provider ID: 277304*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 966-6711*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1477563302*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SHANNON, KELLI**
*Provider ID: 208474*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1922156397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WESTERMANN, MELISSA**
*Provider ID: 242522*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 939-4102*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WESTERMANN, MELISSA**
*Provider ID: 277353*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WESTERMANN, MELISSA**
*Provider ID: 287084*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 220
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**WOLF, RICHARD**
*Provider ID: 209253*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497713846*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEONATAL / PERINATAL MEDICINE**

**BAI-TONG, SHIYU**
*Provider ID: 283285*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1528454188*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**CARROLL, JEANNE**
*Provider ID: 205727*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1386928224*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**DEL ROSARIO, PAMELA**
*Provider ID: 295000*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1952691941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**FLEMING, SARAH**
*Provider ID: 205645*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 260-7046*
*Fax: (619) 686-3843*
*After Hours Phone: (619) 260-7046*
*Provider Gender: Female*
*NPI: 1679809826*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**NEONATAL / PERINATAL MEDICINE**

**GLENN, TARA**

*Provider ID: 283159*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5818*

*Fax: (858) 966-7483*

*After Hours Phone: (858) 966-5818*

*Provider Gender: Female*

*NPI: 1992060974*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**HIETALATI, SAMANTHA**

*Provider ID: 294251*

*Board Certified Specialty: Yes*

*RADY CHILDRENS HEALTH NETWORK*

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

*Phone: (858) 966-5888*

*Fax: (858) 249-5839*

*After Hours Phone: (858) 966-5888*

*Provider Gender: Female*

*NPI: 1245617489*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**HONOLD, JOSE**

*Provider ID: 205941*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5818*

*Fax: (858) 966-7483*

*After Hours Phone: (858) 966-5818*

*Provider Gender: Male*

*NPI: 1093886855*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**HONOLD, JOSE**

*Provider ID: 242881*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 691-7000*
*After Hours Phone: (619) 691-7000*
*Provider Gender: Male*
*NPI: 1093886855*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**LANE, BRIAN**
*Provider ID: 205707*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Male*
*NPI: 1427129287*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**LE, CRYSTAL**
*Provider ID: 205630*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1003028416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS*

*MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 297975*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 260-7046*
*Fax: (619) 686-3843*
*After Hours Phone: (619) 260-7046*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 310508*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3665 KEARNY VILLA RD STE 400
SAN DIEGO, CA 92123
*Phone: (858) 966-8801*
*Fax: (858) 966-8528*
*After Hours Phone: (858) 966-8801*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 297974*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 299894*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**MCCULLEY, DAVID**
*Provider ID: 277177*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Male*
*NPI: 1235304155*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NIEMI, ANNA-KAISA**
*Provider ID: 262157*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1497941397*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NIEMI, ANNA-KAISA**
*Provider ID: 262158*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE

SAN DIEGO, CA 92103
*Phone: (619) 260-7107*
*After Hours Phone: (619) 260-7107*
*Provider Gender: Female*
*NPI: 1497941397*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301822*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 260-7046*
*Fax: (619) 686-3843*
*After Hours Phone: (619) 260-7046*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301819*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**ODONNELL, F**
*Provider ID: 205578*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858)*

*966-5818*
*Provider Gender: Female*
*NPI: 1477625325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**PHAM, BETTY**
*Provider ID: 310310*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3759*
*Fax: (619) 543-3812*
*After Hours Phone: (619) 543-3759*
*Provider Gender: Female*
*NPI: 1790217750*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAJTI, ENIKO**
*Provider ID: 206171*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3759*
*Fax: (619) 543-3812*
*After Hours Phone: (619) 543-3759*
*Provider Gender: Female*
*NPI: 1649433103*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 303906*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 260-7046*
*After Hours Phone: (619) 260-7046*

*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 303904*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SPEZIALE, MARK**
*Provider ID: 206126*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Male*
*NPI: 1801978143*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SWEENEY, NATHALY**
*Provider ID: 206182*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1164572632*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**WEST, JULIE**
*Provider ID: 297073*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1811151848*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEPHROLOGY**

**RIFKIN, DENA**
*Provider ID: 311457*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6248*
*After Hours Phone: (619) 543-6248*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SINGH, PRABHLEEN**
*Provider ID: 311033*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121

# D. Specialist Provider Directory

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235207234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**ZHONG, YAN**
*Provider ID: 296054*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
*Phone: (619) 299-2350*
*Fax: (619) 297-8379*
*After Hours Phone: (619) 299-2350*
*Provider Gender: Female*
*NPI: 1467683540*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, Los Angeles General Medical Center, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEPHROLOGY**

**ZHONG, YAN**
*Provider ID: 296053*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
*Phone: (619) 299-2350*
*Fax: (619) 297-8379*
*After Hours Phone: (619) 299-2350*
*Provider Gender: Female*
*NPI: 1467683540*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, Los Angeles General Medical Center, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEUROLOGY**

**BUI, JONATHAN**
*Provider ID: 303227*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*

*Provider Gender: Male*
*NPI: 1730247974*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**BUI, JONATHAN**
*Provider ID: 206005*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1730247974*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**DOVE, KATHERINE**
*Provider ID: 302784*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1033642574*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**DUNN-PIRIO, ANASTASIE**
*Provider ID: 203235*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1700177136*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**NEUROLOGY**

**DUNN-PIRIO, ANASTASIE**

*Provider ID: 304160*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1700177136*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**GHOLIPOUR, TAHA**

*Provider ID: 311496*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801159611*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Persian*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**GHOLIPOUR, TAHA**

*Provider ID: 311495*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801159611*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Persian*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**GOLD, JEFFREY**

*Provider ID: 283335*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 576-8412*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1568773984*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GOLD, JEFFREY**
*Provider ID: 303287*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GUIDO-ESTRADA, NATALIE**
*Provider ID: 303271*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1528353521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GUNDOGDU, MELEK**
*Provider ID: 201623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1437253671*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Turkish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**HANNAWI, ANDREW**
*Provider ID: 283154*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*

*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1194179135*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**HEADLEY, ALISON**
*Provider ID: 311598*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386007383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**HEADLEY, ALISON**
*Provider ID: 311599*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386007383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**ILICETO, ALESSANDRO**
*Provider ID: 313506*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831685577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 304154*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 311468*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311185*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311186*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311184*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311521*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311523*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KHAMISHON, BORIS**
*Provider ID: 269923*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
*Phone: (619) 582-2595*
*Fax: (619) 229-8006*
*After Hours Phone: (619) 582-2595*
*Provider Gender: Male*
*NPI: 1104922038*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**KIM MCMANUS, OLIVIA**
*Provider ID: 303229*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1174870067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**LAVERTY, CHAMINDRA**
*Provider ID: 303258*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1538320395*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 311572*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 304198*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 246263*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LONGARDNER, KATHERINE**
*Provider ID: 304197*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801215926*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LONGARDNER, KATHERINE**
*Provider ID: 268346*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801215926*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**MAHTA, ALI**
*Provider ID: 314332*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1437387990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**PASSIAK, BRITTANY**
*Provider ID: 311209*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**NEUROLOGY**

**PASSIAK, BRITTANY**
*Provider ID: 311208*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**NEUROLOGY**

**QAYOUMI, WALI**
*Provider ID: 284370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (619) 294-3746*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 294-3746*
*Provider Gender: Male*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**QAYOUMI, WALI**
*Provider ID: 304161*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**RIGGINS, NINA**
*Provider ID: 304200*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568655264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**RIGGINS, NINA**
*Provider ID: 285968*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568655264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SCHORR, EMILY**
*Provider ID: 305020*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255862041*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**NEUROLOGY**

**SCHORR, EMILY**

*Provider ID: 305021*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1255862041*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**SCHORR, EMILY**

*Provider ID: 305023*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1255862041*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**

*Provider ID: 311470*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (619) 543-3500*

*Fax: (619) 543-6806*

*After Hours Phone: (619) 543-3500*

*Provider Gender: Male*

*NPI: 1790774156*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**

*Provider ID: 311472*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1790774156*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**NEUROLOGY**

**SHIH, JERRY**

*Provider ID: 311473*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1790774156*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**SWEAT, MARIE**

*Provider ID: 303831*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123

*Phone: (858) 966-5819*

*Fax: (858) 966-4930*

*After Hours Phone: (858) 966-5819*

*Provider Gender: Female*

*NPI: 1861929036*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**TECOMA, EVELYN**

*Provider ID: 311535*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1174556518*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**TECOMA, EVELYN**

*Provider ID: 311533*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (619) 543-3500*

*After Hours Phone: (619) 543-3500*

*Provider Gender: Female*

*NPI: 1174556518*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**UNG, HOAMENG**
*Provider ID: 311433*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1619438363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**WU, VICTORIA**
*Provider ID: 313037*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1649833039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**YANG, JENNIFER**
*Provider ID: 301593*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1528420619*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**ZALE, CHELSEA**
*Provider ID: 313033*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1548615495*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**NEUROLOGY**

**ZALE, CHELSEA**

*Provider ID: 313035*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1548615495*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**ZALE, CHELSEA**

*Provider ID: 313034*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (858) 554-1212*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*

*NPI: 1548615495*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**NEUROLOGY**

**ZIMBRIC, MICHAEL**

*Provider ID: 206272*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-4930*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1487819546*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**ZIMBRIC, MICHAEL**

*Provider ID: 303284*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123

*Phone: (858) 966-5819*

*Fax: (858) 966-4930*

*After Hours Phone: (858) 966-5819*

*Provider Gender: Male*

*NPI: 1487819546*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**GRAVES, JENNIFER**
*Provider ID: 261037*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1992849863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSF MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**GUIDO-ESTRADA, NATALIE**
*Provider ID: 205825*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1528353521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**PASSIAK, BRITTANY**
*Provider ID: 314344*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**NUCLEAR MEDICINE**

**CHEHABI, HAZEM**
*Provider ID: 314373*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528172996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NUCLEAR MEDICINE**

**CHEHABI, HAZEM**
*Provider ID: 314372*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528172996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NUCLEAR MEDICINE**

**CHEHABI, HAZEM**
*Provider ID: 314371*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528172996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311193*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311191*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311192*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311190*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311189*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*Provider ID: 290731*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**

*Provider ID: 291329*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**

*Provider ID: 291330*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**

*Provider ID: 291328*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6030 VILLAGE WAY
SAN DIEGO, CA 92130

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**

*Provider ID: 291326*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**

*Provider ID: 291327*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790128759*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291339*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291338*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291340*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291337*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311105*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FRUGONI, GINA**
*Provider ID: 270056*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (619) 400-5074*
*After Hours Phone: (619) 400-5074*
*Provider Gender: Female*
*NPI: 1578729315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**
*Provider ID: 313597*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427686930*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**
*Provider ID: 313593*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1427686930*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**
*Provider ID: 313596*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427686930*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**GREINER, KAREN**
*Provider ID: 313595*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427686930*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**GROGAN, BRIAN**
*Provider ID: 296001*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1235218439*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**GROGAN, BRIAN**
*Provider ID: 296002*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4682*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1235218439*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

*Provider ID: 278915*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1457662868*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

*Provider ID: 278917*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1457662868*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**KLEIN, DAVID**

*Provider ID: 271561*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6030 VILLAGE WAY
SAN DIEGO, CA 92130

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1780073635*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**KLEIN, DAVID**

*Provider ID: 271560*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1780073635*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**KOHATSU, KAREN**

*Provider ID: 205481*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

11939 RANCHO BERNARDO RD STE 110
SAN DIEGO, CA 92128

*Phone: (858) 618-1156*

*Fax: (858) 618-3314*

*After Hours Phone: (858) 618-1156*

*Provider Gender: Female*

*NPI: 1679517239*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:30AM-4:30PM F 8:30AM-2PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**

*Provider ID: 285519*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1396904876*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**

*Provider ID: 208681*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1396904876*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**

*Provider ID: 303064*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**
*Provider ID: 200965*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311112*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311113*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311116*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311115*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311114*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285741*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285742*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MELENDEZ, ARIANA**
*Provider ID: 299921*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295232973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MELENDEZ, ARIANA**
*Provider ID: 299922*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295232973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**NUTAITIS, ALEXANDRA**
*Provider ID: 313548*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548897770*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**NUTAITIS, ALEXANDRA**
*Provider ID: 313546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1548897770*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**RIVAS, RENEE**
*Provider ID: 284298*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295263861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**SUYAMA, JULIE**
*Provider ID: 284291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306372800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**SUYAMA, JULIE**
*Provider ID: 284290*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 360
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306372800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**THOMSON, SAMANTHA**
*Provider ID: 285174*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689013468*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## OBSTETRICS / GYNECOLOGY

**THOMSON, SAMANTHA**
*Provider ID: 285176*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689013468*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## OCCUPATIONAL MEDICINE

**CROSS, JOHN**
*Provider ID: 255322*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 471-9210*
*After Hours Phone: (619) 471-9210*
*Provider Gender: Male*
*NPI: 1205989985*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## OCCUPATIONAL MEDICINE

**KIM, JOHN**
*Provider ID: 255385*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 471-9210*
*After Hours Phone: (619) 471-9210*
*Provider Gender: Male*
*NPI: 1114102639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## OCCUPATIONAL THERAPIST

**BOND, KIMBERLEE**
*Provider ID: 206548*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669770939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**BOND, KIMBERLEE**
*Provider ID: 206549*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669770939*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**JEFFERIES, KATHLEEN**
*Provider ID: 311346*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144410648*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**LARSEN, JULIE**
*Provider ID: 258359*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (855) 543-0333*
*Fax: (858) 657-1809*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Female*
*NPI: 1497009179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**SHELTON, ALYSSA**
*Provider ID: 258415*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122

*Phone: (858) 249-0832*
*Fax: (858) 657-1809*
*After Hours Phone: (858) 249-0832*
*Provider Gender: Female*
*NPI: 1952816134*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**ALLEN, RACHAEL**
*Provider ID: 315301*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121
*Phone: (858) 450-1010*
*Fax: (858) 450-9451*
*After Hours Phone: (858) 450-1010*
*Provider Gender: Female*
*NPI: 1801275391*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**ALLEN, RACHAEL**
*Provider ID: 315303*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3939 3RD AVE
SAN DIEGO, CA 92103
*Phone: (800) 765-2737*
*Fax: (619) 291-6577*
*After Hours Phone: (800) 765-2737*
*Provider Gender: Female*
*NPI: 1801275391*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 205620*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BAXTER, SALLY**

*Provider ID: 272788*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1912325184*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**BAXTER, SALLY**

*Provider ID: 272789*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1912325184*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**

*Provider ID: 240636*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 309-7702*

*Fax: (858) 966-7403*

*After Hours Phone: (858) 309-7702*

*Provider Gender: Female*

*NPI: 1104237353*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**CAMP, ANDREW**

*Provider ID: 260020*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 309-7702*

*Fax: (858) 966-7403*

*After Hours Phone: (858) 309-7702*

*Provider Gender: Male*

*NPI: 1326300377*

*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313685*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**CHENG, SARAH**
*Provider ID: 313681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568995397*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GIRKIN, CHRISTOPHER**
*Provider ID: 313499*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891730073*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GIRKIN, CHRISTOPHER**
*Provider ID: 313496*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891730073*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**GUALTIERI, CHRISTOPHER**
*Provider ID: 252313*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
3969 4TH AVE STE 300
SAN DIEGO, CA 92103
*Phone: (619) 688-2648*
*Fax: (619) 688-2626*
*After Hours Phone: (619) 688-2648*
*Provider Gender: Male*
*NPI: 1790769156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297011*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HENNEIN, LAUREN**
*Provider ID: 297009*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1699216010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**HOYT, BRIGGS**
*Provider ID: 313716*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982232542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HOYT, BRIGGS**
*Provider ID: 313719*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982232542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HSUEH, JESSICA**
*Provider ID: 313694*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1952927584*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**HUYNH, PAUL**
*Provider ID: 245200*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 283-1303*
*Fax: (619) 283-1666*
*After Hours Phone: (619) 283-1303*
*Provider Gender: Male*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**HUYNH, PAUL**
*Provider ID: 295645*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 283-1303*
*Fax: (619) 283-1666*
*After Hours Phone: (619) 283-1303*
*Provider Gender: Male*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL*

*HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**KHATIB, NORA**
*Provider ID: 305375*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 640
SAN DIEGO, CA 92103
*Phone: (619) 642-2240*
*Fax: (619) 642-2245*
*After Hours Phone: (619) 642-2240*
*Provider Gender: Female*
*NPI: 1538487756*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**KLINE, LANNING**
*Provider ID: 239915*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841227477*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**LI, ALEXANDRIA**
*Provider ID: 272833*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841652864*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**LIU, YUNXIANG**

*Provider ID: 210803*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1770849804*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOLL, ANGELA**
*Provider ID: 205510*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**MOVAGHAR, MANSOOR**
*Provider ID: 216412*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
*Provider ID: 311099*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

926-8273
Provider Gender: Male
NPI: 1174152961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
Provider ID: 311098
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174152961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
Provider ID: 205888
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Male
NPI: 1235287947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

**OPHTHALMOLOGY**

**PETERSON, JONATHAN**
Provider ID: 314350
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124641071
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**OPHTHALMOLOGY**

**PETERSON, JONATHAN**
Provider ID: 313539
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

*Provider Gender: Male*
*NPI: 1124641071*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**PUIG LLANO, MANUEL**
*Provider ID: 299964*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427102979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**VAIL, DANIEL**
*Provider ID: 313579*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285262568*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**VAIL, DANIEL**
*Provider ID: 313582*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285262568*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**YAMADA, KENTARO**
*Provider ID: 295848*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1040 UNIVERSITY AVE STE B209A
SAN DIEGO, CA 92103
*Phone: (619) 299-1100*
*Fax: (619) 299-7156*
*After Hours Phone: (619) 299-1100*
*Provider Gender: Male*
*NPI: 1629047188*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Japanese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**YAMANE, MAYA**
*Provider ID: 311884*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**YAMANE, MAYA**
*Provider ID: 311886*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1124580139*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPTOMETRIST**

**DUONG, NGHI**
*Provider ID: 314752*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121
*Phone: (858) 450-1010*
*Fax: (858) 450-9451*
*After Hours Phone: (858) 450-1010*
*Provider Gender: Female*
*NPI: 1285832501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**DUONG, NGHI**
*Provider ID: 314750*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

3939 3RD AVE
SAN DIEGO, CA 92103
*Phone: (800) 765-2737*
*Fax: (619) 291-6577*
*After Hours Phone: (800) 765-2737*
*Provider Gender: Female*
*NPI: 1285832501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**JOMOC, CAITLIN**
*Provider ID: 304156*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**JOMOC, CAITLIN**
*Provider ID: 304155*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**KIM, PHILIP**
*Provider ID: 287910*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Male*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**SCHWAB, GARY**
*Provider ID: 290410*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*

*Provider Gender: Male*
*NPI: 1740274372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**SCHWAB, GARY**
*Provider ID: 290411*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Male*
*NPI: 1740274372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 201312*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR STE 101
SAN DIEGO, CA 92103
*Phone: (619) 543-7907*
*After Hours Phone: (619) 543-7907*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 304147*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301684*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301683*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ORAL MAXILLOFACIAL SURGEON**

**DENTICO-OLIN, MARC**
*Provider ID: 304727*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2878 CAMINO DEL RIO S
STE 210
SAN DIEGO, CA 92108
*Phone: (619) 298-2200*
*Fax: (619) 298-2250*
*After Hours Phone: (619) 298-2200*
*Provider Gender: Male*
*NPI: 1629205174*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301680*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ORAL MAXILLOFACIAL SURGEON**

**DENTICO-OLIN, MARC**
*Provider ID: 273663*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103
*Phone: (619) 295-6774*

*Fax: (619) 295-6776*
*After Hours Phone: (619) 295-6774*
*Provider Gender: Male*
*NPI: 1629205174*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 272565*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299462*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299461*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299457*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CARVALHO, DANIELA**
*Provider ID: 205628*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 109
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Female*
*NPI: 1154492916*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**CARVALHO, DANIELA**
*Provider ID: 272557*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1154492916*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**CATES, DANIEL**
*Provider ID: 311486*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (858) 657-8590*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1821352907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CHANG, EDWARD**
*Provider ID: 309535*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Male*
*NPI: 1528146008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299582*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299583*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299579*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6631*
*Fax: (619) 471-0656*
*After Hours Phone: (619) 543-6631*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**

*Provider ID: 299567*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1588988919*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**

*Provider ID: 299568*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1588988919*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**

*Provider ID: 299569*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1588988919*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**

*Provider ID: 310278*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

*Phone: (858) 309-7701*

*Fax: (858) 966-8038*

*After Hours Phone: (858) 309-7701*

*Provider Gender: Male*

*NPI: 1720584345*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**
*Provider ID: 272604*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299561*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**

*Provider ID: 298396*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1144583931*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**

*Provider ID: 298397*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1144583931*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**

*Provider ID: 272959*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1144583931*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**

*Provider ID: 299576*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1417988783*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**

*Provider ID: 299575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299514*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299515*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299511*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**

*Provider ID: 301053*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

16950 VIA TAZON
SAN DIEGO, CA 92127

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124034053*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**

*Provider ID: 301052*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124034053*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**JIANG, WEN**

*Provider ID: 272660*

*Board Certified Specialty: Yes*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

*Phone: (858) 309-7701*

*Fax: (858) 966-8038*

*After Hours Phone: (858) 309-7701*

*Provider Gender: Female*

*NPI: 1659305753*

*Provider English Spoken: Y*

**OTOLARYNGOLOGY**

**KARI, ELINA**

*Provider ID: 299446*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1780860536*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 299445*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 299443*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6631*
*After Hours Phone: (619) 543-6631*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**LEUIN, SHELBY**
*Provider ID: 272637*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1124230909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**
*Provider ID: 272767*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (855) 309-7701*
*Fax: (858) 966-4062*
*After Hours Phone: (855) 309-7701*
*Provider Gender: Male*
*NPI: 1891858379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**
*Provider ID: 299481*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891858379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**
*Provider ID: 299480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891858379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**
*Provider ID: 299482*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891858379*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299592*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299590*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297037*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Male*

*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311002*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299508*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299507*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299509*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299641*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299642*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6631*
*After Hours Phone: (619) 543-6631*
*Provider Gender: Female*
*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299615*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299614*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 299610*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**
*Provider ID: 298412*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**
*Provider ID: 298413*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**
*Provider ID: 298414*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**FADARE, OLUWOLE**
*Provider ID: 275705*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5764*
*Fax: (619) 543-5249*
*After Hours Phone: (619) 543-5764*
*Provider Gender: Male*
*NPI: 1619955804*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**HANSEN, LAWRENCE**
*Provider ID: 275767*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5764*

*After Hours Phone: (619) 543-5764*
*Provider Gender: Male*
*NPI: 1760407498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**PARAST, MANA**
*Provider ID: 275888*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1629163100*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**WONG, RICHARD**
*Provider ID: 243202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275084295*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**AISAGBONHI, OMONIGHO**
*Provider ID: 313291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043571045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ALLEN, ELIZABETH**
*Provider ID: 275756*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174814065*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BROOME, HELEN**
*Provider ID: 275721*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184674145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BROOME, HELEN**
*Provider ID: 275720*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184674145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BUI, JACK**
*Provider ID: 247581*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942529821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BUI, JACK**
*Provider ID: 247580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942529821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**MCKNIGHT, TRISTAN**
*Provider ID: 311761*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-6776*
*Fax: (858) 966-6707*
*After Hours Phone: (858) 966-6776*
*Provider Gender: Male*
*NPI: 1063940567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PATHOLOGY ANATOMIC CLINICAL**

**QUINTANA, PAULINA**
*Provider ID: 296765*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 266-6000*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1164482477*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**ROMA, ANDRES**
*Provider ID: 275826*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295912657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**SHABAIK, AHMED**
*Provider ID: 275781*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679521579*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**SONG, WEI**
*Provider ID: 300001*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306164157*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**STEPHENS, LAURA**
*Provider ID: 300042*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942561212*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**VAVINSKAYA, VERA**
*Provider ID: 275789*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174757181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**WANG, DEHUA**
*Provider ID: 289153*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-6776*
*Fax: (858) 966-6707*
*After Hours Phone: (858) 966-6776*
*Provider Gender: Female*
*NPI: 1578790655*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PATHOLOGY CLINICAL**

**KELNER, MICHAEL**
*Provider ID: 247602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174679849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY CLINICAL**

**KELNER, MICHAEL**
*Provider ID: 247601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103

# D. Specialist Provider Directory

*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174679849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**ALKATIB, RHONDA**
*Provider ID: 291226*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2655 CAMINO DEL RIO N STE 425
SAN DIEGO, CA 92108
*Phone: (619) 286-6687*
*Fax: (619) 286-6695*
*After Hours Phone: (619) 286-6687*
*Provider Gender: Female*
*NPI: 1417363086*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**GENG, BOB**
*Provider ID: 205824*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5961*
*After Hours Phone: (858) 966-5961*
*Provider Gender: Male*
*NPI: 1356570758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**GENG, BOB**
*Provider ID: 205823*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 292-1144*
*After Hours Phone: (858) 292-1144*
*Provider Gender: Male*
*NPI: 1356570758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**GREINER, ALEXANDER**
*Provider ID: 205697*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 966-4900*
*After Hours Phone: (858) 966-4900*
*Provider Gender: Male*
*NPI: 1609801299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**LEIBEL, SYDNEY**
*Provider ID: 205724*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 292-1144*
*After Hours Phone: (858) 292-1144*
*Provider Gender: Male*
*NPI: 1861666919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**LEIBEL, SYDNEY**
*Provider ID: 314178*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5961*
*After Hours Phone: (858) 966-5961*
*Provider Gender: Male*
*NPI: 1861666919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**LEIBEL, SYDNEY**
*Provider ID: 205725*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123

*Phone: (858) 966-5961*

*After Hours Phone: (858) 966-5961*

*Provider Gender: Male*

*NPI: 1861666919*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**BOCK, MATTHEW**

*Provider ID: 280463*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5855*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-5855*

*Provider Gender: Male*

*NPI: 1356514624*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**BORQUEZ, ALEJANDRO**

*Provider ID: 284120*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5855*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-5855*

*Provider Gender: Female*

*NPI: 1114277787*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**CHAU, PETER**

*Provider ID: 271427*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5855*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-5855*

*Provider Gender: Male*

*NPI: 1407146947*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA*

*LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DAVIS, CHRISTOPHER**
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1760691950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DUMMER, KIRSTEN**
*Provider ID: 260595*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1780642280*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**GOLDING, IAN**
*Provider ID: 210823*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1962974956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**GORDON, BRENT**
*Provider ID: 295391*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

# D. Specialist Provider Directory

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1669480083*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SANTA MONICA UCLA MED CTR, SAN ANTONIO COMM HOSP, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 205687*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**JUSTINO, HENRI**
*Provider ID: 284123*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1518036821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LASALLE, ELIZABETH**
*Provider ID: 313252*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1235634015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LEHNERT SCHUCHARDT, ELEANOR**
*Provider ID: 262250*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1760707210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**MCCANDLESS, RACHEL**
*Provider ID: 206147*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-4912*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-4912*
*Provider Gender: Female*
*NPI: 1487821815*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
*Provider ID: 205349*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1376705707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVA SEPULVEDA, JOSE**
*Provider ID: 206297*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY

SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1417222472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**STEINBERG, LEONARD**
*Provider ID: 248208*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1538279484*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**VAUGHN, GABRIELLE**
*Provider ID: 205643*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*Fax: (858) 966-7423*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1891004461*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**WANG-GIUFFRE, ELIZABETH**
*Provider ID: 315246*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1265797591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**WILLIAMS, MATTHEW**

*Provider ID: 206287*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7423*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1831423250*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**YOUNOSZAI, ADEL**
*Provider ID: 303133*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1952493819*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC DERMATOLOGY

**EICHENFIELD, DAWN**
*Provider ID: 303679*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 120
SAN DIEGO, CA 92123
*Phone: (858) 966-6795*
*Fax: (858) 966-7479*
*After Hours Phone: (858) 966-6795*
*Provider Gender: Female*
*NPI: 1295198091*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC DERMATOLOGY

**EICHENFIELD, DAWN**
*Provider ID: 283142*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6795*
*Fax: (858) 966-7479*
*After Hours Phone: (858) 966-6795*
*Provider Gender: Female*
*NPI: 1295198091*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**AGHILI, ROXANA**
*Provider ID: 304918*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**AGHILI, ROXANA**
*Provider ID: 303780*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**ALAYARI, AMETHYST**
*Provider ID: 311382*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1740778653*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**PEDIATRIC EMERGENCY MEDICINE**

**AMIRNOVIN, RAMBOD**

*Provider ID: 297673*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1629104492*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Persian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, LONG BEACH MEMORIAL MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**AUSTIN-PAGE, LUKAS**

*Provider ID: 205589*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1326301862*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**BIALOSTOZKY, MARIO**

*Provider ID: 206011*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1609281450*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY**

# D. Specialist Provider Directory

**MEDICINE**

**BRYL, AMY**

*Provider ID: 205967*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1497079487*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CAMPBELL, SARA**

*Provider ID: 206335*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1841687563*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CHOO, SUN**

*Provider ID: 296536*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2905*

*Fax: (619) 283-1614*

*After Hours Phone: (619) 280-2905*

*Provider Gender: Female*

*NPI: 1700047628*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CHOO, SUN**

*Provider ID: 296535*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1700047628*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CONRAD, HEATHER**
*Provider ID: 205960*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1205813409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CRAWFORD, MICHAEL**
*Provider ID: 311159*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CRAWFORD, MICHAEL**
*Provider ID: 311158*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEL RE, ANGELO**
*Provider ID: 206081*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1275761371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**
*Provider ID: 288572*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1366622078*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DO, STEPHANIE**
*Provider ID: 287393*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1750513644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DONOFRIO-ODMANN, JOY**
*Provider ID: 205375*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1740571165*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**EKPENYONG, ATIM**
*Provider ID: 205722*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1932318565*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**FISHER, JAY**
*Provider ID: 295690*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1629118518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GIBONEY, JENNIFER**
*Provider ID: 205925*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1275895849*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**

*Provider ID: 275784*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2058*

*Fax: (858) 633-4682*

*After Hours Phone: (619) 280-2058*

*Provider Gender: Female*

*NPI: 1316162324*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**HERSKOVITZ, SCOTT**

*Provider ID: 261045*

*Board Certified Specialty: Yes*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1225393499*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**INDRA, SEAN**

*Provider ID: 302625*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1427349091*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**ISHIMINE, PAUL**
*Provider ID: 206236*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1437184421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KHAN, SHAHFAR**
*Provider ID: 294094*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1013361815*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KINGDON, JOANNA**
*Provider ID: 302317*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1609495399*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**PEDIATRIC EMERGENCY MEDICINE**

**KRAK, MICHAEL**

*Provider ID: 310975*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1063094225*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MCDANIEL, MICHELE**

*Provider ID: 248071*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1366761959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRIC EMERGENCY MEDICINE**

**MCEVOY, ANNE**

*Provider ID: 310789*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1861888471*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**

*Provider ID: 295668*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*

*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MESIWALA, ADNAN**
*Provider ID: 275654*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1528483955*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**METCALF, ASHLEY**
*Provider ID: 205348*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1073740205*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MILLS, DAVID**
*Provider ID: 302146*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1194145946*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MURRAY, MATTHEW**
*Provider ID: 205759*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1215103023*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**NGUYEN, MYLINH**
*Provider ID: 262299*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1730428053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**NGUYEN, MARGARET**
*Provider ID: 270705*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1942485248*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**OZCAN, ALI**
*Provider ID: 287923*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1265867683*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Turkish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PADE, KATHRYN**
*Provider ID: 262411*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1215375183*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARK, BRIAN**
*Provider ID: 302352*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1710418744*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARK, RONALD**
*Provider ID: 295457*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Male*
*NPI: 1881695914*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 205784*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 311083*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RANASURIYA, DUNISHA**
*Provider ID: 216970*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*
*NPI: 1740468057*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**ROBERTS, CALE**
*Provider ID: 310782*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1316430499*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RUSSELL, SAMUEL**
*Provider ID: 301250*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Male*
*NPI: 1215564265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RUSSELL, SAMUEL**
*Provider ID: 301249*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1215564265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SALEH, FAREED**
*Provider ID: 206216*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1366691115*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SCHROTER, STEPHANIE**
*Provider ID: 243830*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1073951828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHERER, KIMBERLY**
*Provider ID: 284168*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1992202964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHETH, SARIKA**
*Provider ID: 248171*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1336503234*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SOUDER, CHRISTOPHER**
*Provider ID: 301636*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1851540199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SOUDER, CHRISTOPHER**
*Provider ID: 301635*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1851540199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TAMAS, VANESSA**
*Provider ID: 206212*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1326225368*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

*Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TANG, ANDREW**
*Provider ID: 294677*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1184071516*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TODD, SARAH**
*Provider ID: 302800*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1407299787*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TRAN, THERESA**
*Provider ID: 301834*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1417496985*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TRAUT, JOEL**

*Provider ID: 205475*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Male*
*NPI: 1982792065*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**ULRICH, STACEY**
*Provider ID: 205847*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8036*
*After Hours Phone: (858) 966-8036*
*Provider Gender: Female*
*NPI: 1619049236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 205809*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 205811*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAN WOY, LAUREN**
*Provider ID: 301574*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1568959161*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VANE, JACKSON**
*Provider ID: 205883*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1952608580*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAYNGORTIN, TATYANA**
*Provider ID: 263012*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1578967907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VEGA, CAROLINA**

*Provider ID: 310690*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1427442086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**WANG, YVETTE**
*Provider ID: 263416*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1710321278*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**WANG, VINCENT**
*Provider ID: 309661*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1083713655*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**WONG, VANESSA**
*Provider ID: 310976*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*Fax: (858) 966-8389*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Female*
*NPI: 1154680650*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, Healthbridge Childrens Hospital Orange, CORONA REGIONAL MED CTR, Foothill Regional Medical Center*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC EMERGENCY MEDICINE

**YAPHOCKUN, KAREN KIM**
*Provider ID: 206184*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1861880817*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC ENDOCRINOLOGY

**ARAFAH, DEEMA**
*Provider ID: 310289*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1235423856*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC ENDOCRINOLOGY

**CYMBALUK, ANNA**
*Provider ID: 294214*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1043674849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**PATTERSON, MARY**
*Provider ID: 206059*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1912112020*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311394*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**SINGH, PUJA**
*Provider ID: 302818*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1841721172*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**VARGAS TRUJILLO, MARCELA**
*Provider ID: 205605*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-4032*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1952534091*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
*Provider ID: 301639*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310619*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310617*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**GOYAL, NIDHI**
*Provider ID: 205598*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1598029332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**HARTMANN, PHILLIPP**
*Provider ID: 294228*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1356796536*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**JAZAYERI, AMIR**
*Provider ID: 310952*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1316385925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health*

*Network*

**PEDIATRIC GASTROENTEROLOGY**

**KATIBIAN, DAVID**

*Provider ID: 310954*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-4003*

*Fax: (858) 560-6798*

*After Hours Phone: (858) 966-4003*

*Provider Gender: Male*

*NPI: 1073019279*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**LIN, TOM**

*Provider ID: 297707*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-4003*

*Fax: (858) 560-6798*

*After Hours Phone: (858) 966-4003*

*Provider Gender: Male*

*NPI: 1114136934*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**SCHWARZ, KATHLEEN**

*Provider ID: 205885*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-4003*

*Fax: (858) 560-6798*

*After Hours Phone: (858) 966-4003*

*Provider Gender: Female*

*NPI: 1265465918*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**SHARMA, ANITA**

*Provider ID: 311774*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

# D. Specialist Provider Directory

*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1871989335*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC GASTROENTEROLOGY

**YOUNG, JOCELYN**
*Provider ID: 294675*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1306227491*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC HEMATOLOGY / ONCOLOGY

**BRIGGS, BENJAMIN**
*Provider ID: 274689*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1952695777*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, NAVAL MEDICAL CTR SD RBE*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC HEMATOLOGY / ONCOLOGY

**CHOO, SUN**
*Provider ID: 206115*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1700047628*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**ELSTER, JENNIFER**
*Provider ID: 205769*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1588866115*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**GANESAN, ANUSHA**
*Provider ID: 205882*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1982091740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**JAFFRAY, JULIE**
*Provider ID: 296760*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1396942470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**KUO, DENNIS**
*Provider ID: 205433*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1750492146*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**LI, KINCHEON**
*Provider ID: 311644*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1154095990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**LI, HOJUN**
*Provider ID: 307300*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1730455239*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**LIOU, ANGELA**
*Provider ID: 310982*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1598150450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**SRIDHAR, SUNITA**
*Provider ID: 302088*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1649707365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**WON, ERIC**
*Provider ID: 315228*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1497192710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**WONG, VICTOR**
*Provider ID: 206149*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1154692473*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**YU, HELENA**
*Provider ID: 301583*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-5811*

*Fax: (858) 966-8035*

*After Hours Phone: (858) 966-5811*

*Provider Gender: Female*

*NPI: 1881127736*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC HEMATOLOGY / ONCOLOGY

**YU, JENNIFER**

*Provider ID: 206148*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5811*

*Fax: (858) 966-8035*

*After Hours Phone: (858) 966-5811*

*Provider Gender: Female*

*NPI: 1326315599*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC HEMATOLOGY / ONCOLOGY

**ZAGE, PETER**

*Provider ID: 206315*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123

*Phone: (858) 966-5811*

*Fax: (858) 966-8035*

*After Hours Phone: (858) 966-5811*

*Provider Gender: Male*

*NPI: 1912003161*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

## PEDIATRIC INFECTIOUS DISEASES

**MILDER, EDMUND**

*Provider ID: 289138*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

*Phone: (858) 966-7785*

*Fax: (858) 966-8658*

*After Hours Phone: (858) 966-7785*

*Provider Gender: Male*

*NPI: 1760460026*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**CRANE, CLARKSON**
*Provider ID: 312987*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689036436*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRIC NEPHROLOGY**

**CRANE, CLARKSON**
*Provider ID: 311377*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Male*
*NPI: 1689036436*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRIC NEPHROLOGY**

**CRANE, CLARKSON**
*Provider ID: 312985*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689036436*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRIC NEPHROLOGY**

**EPPERSON, KATRINA**
*Provider ID: 312256*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4405 VANDEVER AVE STE 5
SAN DIEGO, CA 92120
*Phone: (619) 516-6181*
*Fax: (619) 516-6145*
*After Hours Phone: (619) 516-6181*

*Provider Gender: Female*
*NPI: 1427435825*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**EPPERSON, KATRINA**
*Provider ID: 312257*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Female*
*NPI: 1427435825*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**INGULLI, ELIZABETH**
*Provider ID: 302778*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY STE 28
SAN DIEGO, CA 92123
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1811919244*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**PERENS, ELLIOT**
*Provider ID: 302765*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Male*
*NPI: 1922328947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**RASCHKE, ROBIN**
*Provider ID: 310300*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**AKONG, KATHRYN**
*Provider ID: 205673*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1912169061*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**BHATTACHARJEE, RAKESH**
*Provider ID: 246060*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Male*
*NPI: 1588781173*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**BHATTACHARJEE, RAKESH**
*Provider ID: 205950*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*

*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1588781173*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**CERNELC-KOHAN, MATEJKA**
*Provider ID: 243042*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1871752451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**CERNELC-KOHAN, MATEJKA**
*Provider ID: 243041*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1871752451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**FINCH, CHRISTINA**
*Provider ID: 302581*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1598255325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRIC PULMONOLOGY**

**FIREIZEN, YARON**
*Provider ID: 302329*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1699123927*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LONG BEACH MEMORIAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LANDEO GUTIERREZ, JEREMY**
*Provider ID: 284177*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1255750360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LANDEO GUTIERREZ, JEREMY**
*Provider ID: 284176*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 569-9052*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1255750360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LENHART-PENDERGRASS, PATRICIA**
*Provider ID: 294641*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL

2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1144615659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**RAO, APARNA**
*Provider ID: 206123*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 569-9052*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1649222340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**RAO, APARNA**
*Provider ID: 206124*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-5847*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1649222340*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**RYU, JULIE**
*Provider ID: 206218*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 569-5847*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1568533321*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**TANTISIRA, KELAN**
*Provider ID: 277183*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 569-9052*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1760420434*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**CHANG, JOHANNA**
*Provider ID: 246394*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8082*
*After Hours Phone: (858) 966-8082*
*Provider Gender: Female*
*NPI: 1821242199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**LEVY, AVIYA**
*Provider ID: 310780*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8082*
*Fax: (858) 966-6791*
*After Hours Phone: (858) 966-8082*
*Provider Gender: Female*
*NPI: 1144726936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**PHADKE, OMKAR**
*Provider ID: 315124*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAYFL 1
SAN DIEGO, CA 92123
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951)*

*600-1640*
*Provider Gender: Male*
*NPI: 1598140238*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**ALAGIRI, MADHU**
*Provider ID: 206387*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-7484*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-7484*
*Provider Gender: Male*
*NPI: 1619083961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**ANDREE, GREGOR**
*Provider ID: 293219*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Male*
*NPI: 1467436063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**ANDREE, GREGOR**
*Provider ID: 293220*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1467436063*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**BEAUCHAMP-WALTERS, JULIA**
*Provider ID: 270063*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5841*

*Fax: (858) 966-6728*

*After Hours Phone: (858) 966-5841*

*Provider Gender: Female*

*NPI: 1457420713*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**CAMERON, MELISSA**

*Provider ID: 205965*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5841*

*Fax: (858) 966-6728*

*After Hours Phone: (858) 966-5841*

*Provider Gender: Female*

*NPI: 1902983752*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**CANTU, ALICIA**

*Provider ID: 205753*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY STE 300
SAN DIEGO, CA 92123

*Phone: (858) 966-8974*

*Fax: (858) 966-6721*

*After Hours Phone: (858) 966-8974*

*Provider Gender: Female*

*NPI: 1922179688*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**CANTU, ALICIA**

*Provider ID: 205752*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1922179688*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**CHONG, AMY**
*Provider ID: 259993*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5803*
*Fax: (858) 966-5992*
*After Hours Phone: (858) 966-5803*
*Provider Gender: Female*
*NPI: 1720423288*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**DOAN STEPHENS, CRYSTAL**
*Provider ID: 293274*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1730570144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**DOAN STEPHENS, CRYSTAL**
*Provider ID: 293275*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1730570144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**DOSHI, AMI**
*Provider ID: 205329*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1801099676*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**DOSHI, AMI**
*Provider ID: 205330*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 300
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1801099676*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**EARLEY, SAMANTHA**
*Provider ID: 311738*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1144647520*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**GIBONEY, JENNIFER**
*Provider ID: 296241*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Provider Gender: Female*
*NPI: 1275895849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**GIBONEY, JENNIFER**
*Provider ID: 296242*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*

# D. Specialist Provider Directory

*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1275895849*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W 8:30AM-5:30PM*
*TH 5:30PM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**GRAY, SARAH**
*Provider ID: 284224*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1508210311*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**HUANG, MARIA**
*Provider ID: 205974*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1770841140*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**JIMENEZ BACARDI, ADRIA**
*Provider ID: 294640*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Male*
*NPI: 1467847293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST MARYS HOSPITAL AND MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**JINDAL, ANUJA**
*Provider ID: 303285*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**KARMAKAR, KANKA**
*Provider ID: 213847*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1972536654*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PEDIATRICS**

**KHARE, MANASWITHA**
*Provider ID: 206289*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1912345307*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**LEE, BEGEM**
*Provider ID: 205923*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*

*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1053672444*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**LOPEZ, XIMENA**
*Provider ID: 302856*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1740316405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MANNINO AVILA, ELIZABETH**
*Provider ID: 262161*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1164747127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MARANO, RACHEL**
*Provider ID: 302438*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1043673528*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MILLS, TATYANA**
*Provider ID: 310307*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1962964999*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MILLS, TATYANA**
*Provider ID: 310308*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1962964999*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**NGO, MAI**
*Provider ID: 302114*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1508910787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**NGO, MAI**
*Provider ID: 302113*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8974*
*Fax: (858) 966-4051*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1508910787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PATEL, AARTI**
*Provider ID: 205865*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1871813105*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PIERCE, HEATHER**
*Provider ID: 205701*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1699955542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**POLICH, MICHELLE**
*Provider ID: 286390*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1780118018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**POOLE, DAVID**
*Provider ID: 311153*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Male*
*NPI: 1033613765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**RHEE, KYUNG**
*Provider ID: 206114*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1013996529*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**RIES, DAVID**
*Provider ID: 206082*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Male*
*NPI: 1376705483*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**RUNGVIVATJARUS, TIRANUN**
*Provider ID: 206319*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1407276363*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**SAWYER, CAROLYN**
*Provider ID: 315877*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**PEDIATRICS**

**STOVER, LAURIE**
*Provider ID: 206196*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1659442317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**ALGRA, JEFFREY**
*Provider ID: 287524*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Male*
*NPI: 1457664518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**BIFFL, SUSAN**
*Provider ID: 287453*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 195
SAN DIEGO, CA 92123

*Phone: (858) 966-8974*

*Fax: (858) 966-6721*

*After Hours Phone: (858) 966-8974*

*Provider Gender: Female*

*NPI: 1366589640*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**DALAL, PRITHA**

*Provider ID: 287523*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 195
SAN DIEGO, CA 92123

*Phone: (858) 966-8974*

*After Hours Phone: (858) 966-8974*

*Provider Gender: Female*

*NPI: 1609017532*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**RICHARDSON, HENRY**

*Provider ID: 295276*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

*Phone: (619) 325-1161*

*Fax: (619) 325-1717*

*After Hours Phone: (619) 325-1161*

*Provider Gender: Male*

*NPI: 1407052459*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PHYSICAL MEDICINE / REHABILITATION**

**RYAN, KYLE**

*Provider ID: 287520*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7910 FROST ST STE 195
SAN DIEGO, CA 92123

*Phone: (858) 966-8974*

*After Hours Phone: (858) 966-8974*

*Provider Gender: Male*

*NPI: 1447645742*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**SCOTT-WYARD, PHOEBE**
*Provider ID: 287519*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1336356203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**SKALSKY, ANDREW**
*Provider ID: 287537*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Male*
*NPI: 1487635272*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**ALBRIGHT, KELSEY**
*Provider ID: 284763*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 923-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 923-8273*
*Provider Gender: Female*
*NPI: 1235653148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ARMEEN, GARY**
*Provider ID: 247035*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1760774863*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**BERGEN, SOPHEA**
*Provider ID: 295518*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6719 ALVARADO RD STE 308
SAN DIEGO, CA 92120
*Phone: (619) 265-7912*
*Fax: (619) 265-7922*
*After Hours Phone: (619) 265-7912*
*Provider Gender: Female*
*NPI: 1558300665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**BOYD, LISA**
*Provider ID: 217649*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871859421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**BRUECKNER, TAMMIE**
*Provider ID: 255558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407212376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*Provider ID: 257530*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Provider Gender: Female*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PHYSICIANS ASSISTANT**

**DERISSI, DANA**
*Provider ID: 301632*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1063829505*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**DU, SARAH**
*Provider ID: 311792*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1295502763*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**DU, SARAH**
*Provider ID: 310603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1295502763*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311549*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311550*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GUTH, CARA**
*Provider ID: 299111*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
*Phone: (858) 455-6460*
*Fax: (858) 455-5362*
*After Hours Phone: (858) 455-6460*
*Provider Gender: Female*
*NPI: 1992177182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 247206*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 287349*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

# D. Specialist Provider Directory

*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HERNANDEZ, GABRIELA**
*Provider ID: 306325*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-8394*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1417635392*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287133*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
203 W F ST
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HSIEH, STEPHANIE**
*Provider ID: 312497*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Female*
*NPI: 1720868045*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 298428*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON

SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 298430*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HUNTER, JACOB**
*Provider ID: 287449*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114459765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LAM, DAVINA**
*Provider ID: 295651*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6719 ALVARADO RD STE 308
SAN DIEGO, CA 92120
*Phone: (619) 265-7912*
*Fax: (619) 265-7922*
*After Hours Phone: (619) 265-7912*
*Provider Gender: Female*
*NPI: 1245863737*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**LAMBERT, GAGE**
*Provider ID: 214788*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144672494*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LEE, JENNIFER**
*Provider ID: 309998*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LINDEMANN, CHRISTINA**
*Provider ID: 283760*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (858) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1194373514*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MARTIN, HALEY**
*Provider ID: 305026*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093440836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MCADAMS, JOSEPH**
*Provider ID: 280611*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

# D. Specialist Provider Directory

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1104371251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MERRILL, COREY**
*Provider ID: 258040*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386032308*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MOREO, HUNTER**
*Provider ID: 310136*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Female*
*NPI: 1043062334*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**MOREO, HUNTER**
*Provider ID: 310726*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Female*
*NPI: 1043062334*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NAKAMITSU, ABIGAIL**
*Provider ID: 268666*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-8519*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Female*
*NPI: 1932459179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**NASSAR, JEANNE**
*Provider ID: 312724*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1760704761*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**NGUYEN, KHANH**
*Provider ID: 310050*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427312644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**NGUYEN, KHANH**
*Provider ID: 310049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427312644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293441*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8275*
*Fax: (888) 539-8783*
*After Hours Phone: (800) 926-8275*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293444*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
*Phone: (800) 926-8278*
*Fax: (888) 539-8786*
*After Hours Phone: (800) 926-8278*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PERREAULT, MARK**
*Provider ID: 283586*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356749451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PERREAULT, MARK**
*Provider ID: 283585*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356749451*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*Provider ID: 293247*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*Provider ID: 293246*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1639528110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POGGI, SARA**
*Provider ID: 310631*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1265119911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POGGI, SARA**
*Provider ID: 310614*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1265119911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**PRIEST, VIVIAN**
*Provider ID: 272430*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1225581754*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PRIEST, VIVIAN**
*Provider ID: 313298*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1225581754*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PYLE, ALEXANDRA**
*Provider ID: 297718*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
*Phone: (858) 455-6460*
*Fax: (858) 455-7197*
*After Hours Phone: (858) 455-6460*
*Provider Gender: Female*
*NPI: 1225416472*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 20\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**QUIJANO, GLENN**
*Provider ID: 307067*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
*Phone: (858) 571-3630*
*Fax: (858) 295-3948*
*After Hours Phone: (858) 571-3630*
*Provider Gender: Male*
*NPI: 1407466030*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**
*Provider ID: 253253*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-7777*
*After Hours Phone: (619) 543-7777*
*Provider Gender: Female*
*NPI: 1265960256*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302452*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SCHMITT, EVA**
*Provider ID: 264176*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1174715106*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SCHROEDER, JENNIFER**
*Provider ID: 256640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780851253*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SCHROEDER, JENNIFER**
*Provider ID: 256639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (858) 453-1469*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1780851253*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SCHULZ, STEFAN**
*Provider ID: 243419*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316102163*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SERHAN, STEPHANIE**
*Provider ID: 312857*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487438750*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SERHAN, STEPHANIE**
*Provider ID: 312856*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487438750*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SHAPIRO, RACHEL**
*Provider ID: 311469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720488836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**SMITH, TREVOR**
*Provider ID: 313669*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821573718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**STALLINGS, ANDREA**
*Provider ID: 255913*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 543-7496*
*After Hours Phone: (619) 543-7496*
*Provider Gender: Female*
*NPI: 1972595478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**
*Provider ID: 311088*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**
*Provider ID: 311091*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**

*Provider ID: 311089*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1811069271*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**THOMAS, THEA**

*Provider ID: 312694*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1457718843*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**THOMAS, THEA**

*Provider ID: 312695*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1457718843*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**

*Provider ID: 299599*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1083823322*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**

*Provider ID: 299600*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800)*

926-8273
Provider Gender: Female
NPI: 1083823322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**PHYSICIANS ASSISTANT**

**WAHLIN, TAMARA**
Provider ID: 299598
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**PHYSICIANS ASSISTANT**

**WEBB, SHANNON**
Provider ID: 305285
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Phone: (858) 750-2983
Fax: (858) 900-2779
After Hours Phone: (858) 750-2983
Provider Gender: Female
NPI: 1821271685
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**PHYSICIANS ASSISTANT**

**WEIR, JACQUELINE**
Provider ID: 278203
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

**PHYSICIANS ASSISTANT**

**WEIR, JACQUELINE**
Provider ID: 278200
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

*Provider Gender: Female*
*NPI: 1932494499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**WEIR, JACQUELINE**
*Provider ID: 278201*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 925-8271*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 925-8271*
*Provider Gender: Female*
*NPI: 1932494499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*Provider ID: 293289*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1508912130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*Provider ID: 293290*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1508912130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*Provider ID: 303060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1508912130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 276908*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932522778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 276909*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932522778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**ABERCROMBIE, SHERI**
*Provider ID: 293400*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1932292422*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**ABERCROMBIE, SHERI**
*Provider ID: 290770*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**BANKS, SARAH**
*Provider ID: 304195*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BANKS, SARAH**
*Provider ID: 203173*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BANKS, SARAH**
*Provider ID: 203174*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY*

*THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BASS, GURGIANA**
*Provider ID: 290752*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**BASS, GURGIANA**
*Provider ID: 306550*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4:30PM*
*TU 8AM-12PM*
*W 8AM-4:30PM*
*TH 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**CARINO DIOKNO, RHODA**
*Provider ID: 290800*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1629109483*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**CHESHER, NICHOLAS**
*Provider ID: 273811*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124539697*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**CLEMENT, LUIS**
*Provider ID: 290745*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Male*
*NPI: 1235364712*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FIRESTONE, MICHELLE**
*Provider ID: 290954*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FIRESTONE, MICHELLE**
*Provider ID: 290773*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FORZANI, CHRISTINA**
*Provider ID: 290780*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1902939630*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GIAMONA, KRISTEN**
*Provider ID: 294171*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858)*

*279-0925*
*Provider Gender: Female*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GIAMONA, KRISTEN**
*Provider ID: 290801*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GOMEZ, JUANITA**
*Provider ID: 291424*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**KLUEMPER, NICOLE**
*Provider ID: 290792*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**KLUEMPER, NICOLE**
*Provider ID: 296237*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**LEBENSOHN CHIALVO, FLORENCIA**
*Provider ID: 245224*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1134788730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**LEBENSOHN CHIALVO, FLORENCIA**
*Provider ID: 245225*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
7910 FROST ST STE 350
SAN DIEGO, CA 92123
*Phone: (858) 496-4800*
*After Hours Phone: (858) 496-4800*
*Provider Gender: Female*
*NPI: 1134788730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**MCCULLUM, TIFFANY**
*Provider ID: 290689*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 428-7952*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1528306206*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**MEIER, EMILY**
*Provider ID: 311351*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255530572*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**MONTOYA, JESSICA**
*Provider ID: 274619*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003421256*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**NING, GRACE**
*Provider ID: 296219*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1598911315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**NING, GRACE**
*Provider ID: 290742*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1598911315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**NORMAN, MARC**
*Provider ID: 276869*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**NORMAN, MARC**
*Provider ID: 272916*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2827*
*After Hours Phone: (619) 543-2827*
*Provider Gender: Male*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**ORFF, HENRY**
*Provider ID: 273009*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (844) 757-5337*
*After Hours Phone: (844) 757-5337*
*Provider Gender: Male*
*NPI: 1144685215*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**ORTIZ, MARIA**
*Provider ID: 290721*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 662-4158*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1497980775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**PRINCE, RENEE**
*Provider ID: 303603*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1467737908*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PSYCHOLOGIST**

# D. Specialist Provider Directory

**RADOJEVIC, NATASHA**
*Provider ID: 290690*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**RADOJEVIC, NATASHA**
*Provider ID: 306574*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**REINEKE, ANKE**
*Provider ID: 315853*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8060 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-6974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-6974*
*Provider Gender: Female*
*NPI: 1205154747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PSYCHOLOGIST**

**REINEKE, ANKE**
*Provider ID: 315852*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-6974*
*Provider Gender: Female*
*NPI: 1205154747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PSYCHOLOGIST**

**SALO, STEPHANIE**
*Provider ID: 307831*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1477967784*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 17\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**SCHELLINGER, KRISTON**
*Provider ID: 213752*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (858) 246-1979*
*After Hours Phone: (858) 246-1979*
*Provider Gender: Female*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**SCHELLINGER, KRISTON**
*Provider ID: 213751*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (858) 246-1979*
*After Hours Phone: (858) 246-1979*
*Provider Gender: Female*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**SCHELLINGER, KRISTON**
*Provider ID: 213750*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**TARLE, STEPHANIE**
*Provider ID: 303115*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659920403*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**TO, TUAN**
*Provider ID: 290283*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Male*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TO, TUAN**
*Provider ID: 290285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TO, TUAN**
*Provider ID: 290284*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TWAMLEY, ELIZABETH**
*Provider ID: 290717*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Provider Gender: Female*
*NPI: 1700089141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM TH 8:30AM-9PM F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PUBLIC HEALTH PREVENTATIVE MEDICINE**

**SOZANSKI, JESSE**
*Provider ID: 200925*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437446622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**BAILEY, JACOB**
*Provider ID: 299924*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598150039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**BAILEY, JACOB**
*Provider ID: 299923*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598150039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**PULMONARY DISEASES**

**CYPRO, ALEXANDER**

*Provider ID: 313679*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1881126936*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**HOGAN, NICHOLAS**

*Provider ID: 313713*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1861925273*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**JOSHUA, JISHA**

*Provider ID: 238061*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1023436417*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Malayalam*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**JOSHUA, JISHA**

*Provider ID: 238062*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1023436417*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Malayalam*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**LE, HUAN**

*Provider ID: 27358*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115

*Phone: (619) 582-1448*

*Fax: (619) 582-1081*

*After Hours Phone: (619) 582-1448*

*Provider Gender: Male*

*NPI: 1780797381*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Spanish, Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\99*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 9AM-5PM*
*TH 8AM-1PM*
*F 9AM-6PM*
*SA 8AM-11AM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PULMONARY DISEASES**

**LE, HUAN**

*Provider ID: 300636*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115

*Phone: (619) 582-1448*

*Fax: (619) 582-1081*

*After Hours Phone: (619) 582-1448*

*Provider Gender: Male*

*NPI: 1780797381*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French, Spanish, Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 9AM-5PM*
*TH 8AM-1PM*
*F 9AM-6PM*
*SA 8AM-11AM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PULMONARY DISEASES**

**LI, JINGHONG**

*Provider ID: 311032*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1619014479*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**MCGUIRE, WILLIAM**

*Provider ID: 299986*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841684081*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## PULMONARY DISEASES

**PEARCE, ALEX**
*Provider ID: 300055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265896856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## RADIATION ONCOLOGY

**CARMONA, RUBEN**
*Provider ID: 303100*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
7901 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 939-5010*
*Fax: (619) 740-8499*
*After Hours Phone: (858) 939-5010*
*Provider Gender: Male*
*NPI: 1275929242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## RADIATION ONCOLOGY

**COLEMAN, LORI**
*Provider ID: 221091*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 939-5010*
*Fax: (858) 939-5021*
*After Hours Phone: (858) 939-5010*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 19\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**TRINGALE, KATHRYN**
*Provider ID: 306883*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9730 SUMMERS RIDGE RD STE 101
SAN DIEGO, CA 92121
*Phone: (858) 345-2445*
*Fax: (858) 578-1144*
*After Hours Phone: (858) 345-2445*
*Provider Gender: Female*
*NPI: 1780172031*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**RADIATION ONCOLOGY**

**VAKILIAN, SIAVOSH**
*Provider ID: 314062*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3366 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 230-0400*
*Fax: (858) 429-7936*
*After Hours Phone: (619) 230-0400*
*Provider Gender: Male*
*NPI: 1427456151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**RADIATION ONCOLOGY**

**VAKILIAN, SIAVOSH**
*Provider ID: 314064*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
*Phone: (858) 505-4100*
*Fax: (858) 429-7939*
*After Hours Phone: (858) 505-4100*
*Provider Gender: Male*
*NPI: 1427456151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**RADIOLOGY DIAGNOSTIC**

**ADAMS, STEPHEN**
*Provider ID: 311196*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ADAMS, STEPHEN**
*Provider ID: 311197*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ALFIDI, MARY**
*Provider ID: 310666*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1992814396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311084*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311085*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BERMAN, ZACHARY**
*Provider ID: 304163*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033521190*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BERMAN, ZACHARY**
*Provider ID: 269318*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033521190*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BISSET, LOGAN**
*Provider ID: 311144*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BISSET, LOGAN**

*Provider ID: 311143*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BLACKWELL, CHRISTOPHER**
*Provider ID: 313485*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740740125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BLACKWELL, CHRISTOPHER**
*Provider ID: 313484*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740740125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BLACKWELL, CHRISTOPHER**
*Provider ID: 313488*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740740125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311165*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 304199*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 283675*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311079*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311080*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311134*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311135*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303054*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*

*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 304194*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 304207*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 283228*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 283226*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHEWNING, RUSH**
*Provider ID: 301914*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8863*
*Fax: (858) 966-8863*
*After Hours Phone: (858) 966-8863*
*Provider Gender: Male*
*NPI: 1083872212*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**RADIOLOGY DIAGNOSTIC**

**CHRISTENSEN, DIANA**
*Provider ID: 313643*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578079786*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHRISTENSEN, DIANA**
*Provider ID: 313647*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

926-8273
Provider Gender: Female
NPI: 1578079786
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**CHRISTENSEN, DIANA**
Provider ID: 313644
Board Certified Specialty: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1578079786
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**CIRIELLO, JONATHAN**
Provider ID: 313500
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**CIRIELLO, JONATHAN**
Provider ID: 313504
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**CIRIELLO, JONATHAN**
Provider ID: 313501
Board Certified Specialty: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

# D. Specialist Provider Directory

**CRAMER, SCOTT**
*Provider ID: 313578*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598225740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CRAMER, SCOTT**
*Provider ID: 313574*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598225740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CRAMER, SCOTT**
*Provider ID: 313575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598225740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**
*Provider ID: 299991*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639553613*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**
*Provider ID: 299992*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639553613*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**
*Provider ID: 304171*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639553613*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FORCIER, NANCY**
*Provider ID: 286956*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497721724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FORCIER, NANCY**
*Provider ID: 286954*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497721724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FOWLER, KATHRYN**
*Provider ID: 201289*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255457941*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FOWLER, KATHRYN**
*Provider ID: 201291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255457941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311147*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311148*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**

*Provider ID: 311594*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1184121899*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**

*Provider ID: 311593*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1184121899*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**

*Provider ID: 311595*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1184121899*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**

*Provider ID: 271567*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1720465396*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**

*Provider ID: 271569*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST STE 202

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720465396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**
*Provider ID: 282791*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992120026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Khmer, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**
*Provider ID: 282789*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992120026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Khmer, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311120*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311121*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311095*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311096*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HURT, BRIAN**
*Provider ID: 313600*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306370465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HURT, BRIAN**
*Provider ID: 313601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306370465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HURT, BRIAN**
*Provider ID: 313604*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306370465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**JAFFRAY, PAUL**
*Provider ID: 304165*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275700999*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Los Angeles General Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**JAFFRAY, PAUL**
*Provider ID: 299957*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275700999*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Los Angeles General Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**JAFFRAY, PAUL**
*Provider ID: 299958*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275700999*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Los Angeles General Medical Center, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KAKISH, DAVID**
*Provider ID: 313591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588123863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KAKISH, DAVID**
*Provider ID: 313588*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588123863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KAKISH, DAVID**
*Provider ID: 313587*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1588123863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KHURANA, AMAN**
*Provider ID: 307768*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427496710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KHURANA, AMAN**
*Provider ID: 307766*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427496710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KHURANA, AMAN**
*Provider ID: 307765*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427496710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KONDILI, DHIMITER**
*Provider ID: 283143*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699125450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KONDILI, DHIMITER**

*Provider ID: 283145*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1699125450*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: EISENHOWER MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**LIM, GARRETT**

*Provider ID: 313545*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1396233565*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**LIM, GARRETT**

*Provider ID: 313542*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1396233565*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**LIM, GARRETT**

*Provider ID: 313541*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1396233565*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**MARKS, ROBERT**

*Provider ID: 300065*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952389934*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST MARY MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**MARKS, ROBERT**
*Provider ID: 300064*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952389934*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST MARY MEDICAL CENTER, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**PANZARINI, BRUNO**
*Provider ID: 313779*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649776915*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**PANZARINI, BRUNO**
*Provider ID: 313775*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649776915*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**PANZARINI, BRUNO**
*Provider ID: 313776*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649776915*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**POHLEN, MICHAEL**
*Provider ID: 313558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285130906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**POHLEN, MICHAEL**
*Provider ID: 313557*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285130906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**POHLEN, MICHAEL**
*Provider ID: 313561*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285130906*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311169*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311168*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROBINSON, ADAM**
*Provider ID: 313698*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730685611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROBINSON, ADAM**
*Provider ID: 313697*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730685611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**RADIOLOGY DIAGNOSTIC**

**ROBINSON, ADAM**

*Provider ID: 313701*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1730685611*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROTMAN, YONATAN**

*Provider ID: 313556*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1326542341*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROTMAN, YONATAN**

*Provider ID: 313552*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

330 LEWIS ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1326542341*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROTMAN, YONATAN**

*Provider ID: 313553*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1326542341*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROZELL, JOSEPH**

*Provider ID: 311178*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1629368519*

*Provider English Spoken: Y*

**RADIOLOGY DIAGNOSTIC**

*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROZELL, JOSEPH**
*Provider ID: 311179*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629368519*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SADAT, SAYED**
*Provider ID: 299968*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679000806*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SADAT, SAYED**
*Provider ID: 299969*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679000806*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SADAT, SAYED**
*Provider ID: 304202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1679000806*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SCHULTZ, HEATHER**
*Provider ID: 240342*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871910810*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SCHULTZ, HEATHER**
*Provider ID: 240344*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871910810*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SEARLEMAN, ADAM**
*Provider ID: 299948*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1134570641*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SEARLEMAN, ADAM**
*Provider ID: 299949*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

926-8273
Provider Gender: Male
NPI: 1134570641
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**SHWAIKI, OMAR**
Provider ID: 313563
Board Certified Specialty: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487117826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**SHWAIKI, OMAR**
Provider ID: 313562
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487117826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**SHWAIKI, OMAR**
Provider ID: 313566
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487117826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

**RADIOLOGY DIAGNOSTIC**

**SLATER, JERRY**
Provider ID: 283312
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851746382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SLATER, JERRY**
*Provider ID: 283310*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851746382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPARKS, CHELSEA**
*Provider ID: 313627*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366901662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPARKS, CHELSEA**
*Provider ID: 313623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366901662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPARKS, CHELSEA**
*Provider ID: 313624*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366901662*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

# D. Specialist Provider Directory

**SPENGLER, NATHAN**
*Provider ID: 303048*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992919666*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPENGLER, NATHAN**
*Provider ID: 303049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992919666*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**STEPENOSKY, JAMES**
*Provider ID: 309703*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598738577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**STEPENOSKY, JAMES**
*Provider ID: 309702*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598738577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**STRAKA, CHRISTOPHER**
*Provider ID: 276875*

*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
*Phone: (858) 649-5100*
*Fax: (858) 649-5099*
*After Hours Phone: (858) 649-5100*
*Provider Gender: Male*
*NPI: 1801281399*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 17\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311562*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2218*
*After Hours Phone: (619) 543-2218*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (619) 471-9240*
*After Hours Phone: (619) 471-9240*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311565*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SWEET, JASON**
*Provider ID: 305028*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1326197393*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240407*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 304179*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240405*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240408*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADROS, ANTHONY**
*Provider ID: 304150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306112057*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADROS, ANTHONY**
*Provider ID: 268546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306112057*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**VAHDAT, NOUSHIN**
*Provider ID: 300070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396700852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**VAHDAT, NOUSHIN**
*Provider ID: 300071*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396700852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**VAKILIAN, SIAVOSH**
*Provider ID: 283205*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3366 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 230-0400*
*Fax: (858) 429-7936*
*After Hours Phone: (619) 230-0400*
*Provider Gender: Male*
*NPI: 1427456151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**RADIOLOGY DIAGNOSTIC**

**VAKILIAN, SIAVOSH**
*Provider ID: 283207*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
*Phone: (858) 505-4100*
*Fax: (858) 429-7939*
*After Hours Phone: (858) 505-4100*
*Provider Gender: Male*
*NPI: 1427456151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**RADIOLOGY DIAGNOSTIC**

**WANG, LAWRENCE**
*Provider ID: 313708*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013440965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**WANG, LAWRENCE**
*Provider ID: 313706*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013440965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**WANG, LAWRENCE**
*Provider ID: 313705*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013440965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**WELSH, RAYMOND**
*Provider ID: 314368*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932370384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**WELSH, RAYMOND**
*Provider ID: 314369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932370384*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YIN, JANE**
*Provider ID: 313639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014405*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YIN, JANE**
*Provider ID: 313642*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014405*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YIN, JANE**
*Provider ID: 313638*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014405*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**YOO, RAPHAEL**
*Provider ID: 310111*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

# D. Specialist Provider Directory

3010 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8863*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-8863*
*Provider Gender: Male*
*NPI: 1154559037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: NATIVIDAD MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## RADIOLOGY DIAGNOSTIC

**YOO, RAPHAEL**
*Provider ID: 310112*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8863*
*Fax: (858) 966-8863*
*After Hours Phone: (858) 966-8863*
*Provider Gender: Male*
*NPI: 1154559037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: NATIVIDAD MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## REGISTERED DIETITIAN / NUTRITIONIST

**CALLAWAY, MALLORY**
*Provider ID: 287926*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477207611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## REGISTERED DIETITIAN / NUTRITIONIST

**FISHER, JENNIFER**
*Provider ID: 286339*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-0438*
*Fax: (619) 543-3763*
*After Hours Phone: (619) 471-0438*
*Provider Gender: Female*
*NPI: 1538312657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED DIETITIAN / NUTRITIONIST**

**FISHER, JENNIFER**
*Provider ID: 286340*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538312657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED DIETITIAN /**

**NUTRITIONIST**

**SHMARIAHU, SHELLY**
*Provider ID: 310802*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1881457521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED DIETITIAN / NUTRITIONIST**

**SIEVERING, DENISE**
*Provider ID: 268250*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1356478929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**AGUERO, PETER**
*Provider ID: 258298*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982120861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**AGUERO, PETER**
*Provider ID: 258299*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 310
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982120861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BALL, STEPHEN**
*Provider ID: 311013*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437644044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BARTZ, BRYAN**
*Provider ID: 273380*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669818993*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BARTZ, BRYAN**
*Provider ID: 273381*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669818993*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BERGERON, PATRICK**
*Provider ID: 206534*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285061390*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BOEHMER, ALEXANDRA**
*Provider ID: 311058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528789856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**
*Provider ID: 258304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780018416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**
*Provider ID: 246022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

# D. Specialist Provider Directory

*NPI: 1780018416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**CORTEZ, AARON**
*Provider ID: 279194*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1639693187*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**COSTELLO, MARK**
*Provider ID: 295634*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7510 CLAIREMONT MESA BLVD STE 103
SAN DIEGO, CA 92111
*Phone: (818) 894-2273*
*Fax: (818) 357-2505*
*After Hours Phone: (818) 894-2273*
*Provider Gender: Male*
*NPI: 1710193602*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Armenian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**DANG, ERIC**
*Provider ID: 258363*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (858) 543-3333*
*Fax: (858) 657-1809*
*After Hours Phone: (858) 543-3333*
*Provider Gender: Male*
*NPI: 1891237756*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**DANG, KAYLEE**
*Provider ID: 279261*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1316426356*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**JOHNSON, KENNADY**
*Provider ID: 305041*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730834417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**MC ELROY, CARTER**
*Provider ID: 206523*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1114472230*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**MC ELROY, CARTER**
*Provider ID: 206522*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1114472230*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Thai*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, HARRY**

*Provider ID: 271871*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629558499*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**RICKERTS, MATTHEW**
*Provider ID: 287652*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063882579*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**RUDD, CHRISTOPHER**
*Provider ID: 207560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831539337*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**SKINNER, NICOLE**
*Provider ID: 206547*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386964997*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Specialist Provider Directory

**REGISTERED PHYSICAL THERAPIST**

**VANDEWIELE, EMILY**
*Provider ID: 285183*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942818505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**VASQUEZ, BENJAMIN**
*Provider ID: 302870*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568938413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**WALKER, JULIE**
*Provider ID: 258489*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (855) 543-0333*
*Fax: (858) 535-6422*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Female*
*NPI: 1720489503*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**WILLIAMS, STACY**
*Provider ID: 259683*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689962169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**WILLIAMS, STACY**
*Provider ID: 259684*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689962169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**WILLMS, HANNAH**
*Provider ID: 314384*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427603109*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SLEEP MEDICINE**

**FINCH, CHRISTINA**
*Provider ID: 299938*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-7283*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-7283*
*Provider Gender: Female*
*NPI: 1598255325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SLEEP MEDICINE**

**FINCH, CHRISTINA**
*Provider ID: 299939*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1598255325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**
*Provider ID: 307885*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8929 AERO DR STE E
SAN DIEGO, CA 92123
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**
*Provider ID: 307883*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9655 GRANITE RIDGE DR STE 200
SAN DIEGO, CA 92123
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**
*Provider ID: 307882*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
11440 W BERNARDO CT STE 300
SAN DIEGO, CA 92127
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SPEECH PATHOLOGIST**

**SCHIEDERMAYER, BENJAMIN**
*Provider ID: 288937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164979837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SPEECH PATHOLOGIST**

**UNGER, LINDSEY**
*Provider ID: 207202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972936813*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**EISENSTEIN, SAMUEL**
*Provider ID: 286384*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (858) 657-7237*
*After Hours Phone: (858) 657-7237*
*Provider Gender: Male*
*NPI: 1194983932*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**EISENSTEIN, SAMUEL**
*Provider ID: 286364*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1194983932*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**EISENSTEIN, SAMUEL**
*Provider ID: 286363*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1194983932*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LIU, SHANGLEI**
*Provider ID: 273363*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043558653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LOPEZ, NICOLE**
*Provider ID: 286387*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6886*
*After Hours Phone: (619) 543-6886*
*Provider Gender: Female*
*NPI: 1518163005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LOPEZ, NICOLE**
*Provider ID: 286366*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518163005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 278553*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 286341*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**RAMAMOORTHY, SONIA**
*Provider ID: 286370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 529-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801812656*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**ADAMS, LAURA**
*Provider ID: 284407*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144616541*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**MASCH, JESSICA**
*Provider ID: 311552*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1902300445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**POTENZA, BRUCE**
*Provider ID: 277298*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-7200*
*After Hours Phone: (619) 543-7200*
*Provider Gender: Male*
*NPI: 1548281496*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**VENTRO, GEORGE**
*Provider ID: 284418*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548604648*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**ARMANI, AVA**
*Provider ID: 282141*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 822-6100*
*After Hours Phone: (858) 822-6100*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**BARNES, RYAN**
*Provider ID: 299904*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7910 FROST ST STE 250

SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1831493501*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**BARNES, RYAN**
*Provider ID: 129062*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1831493501*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**BENCH, SHAWN**
*Provider ID: 129060*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1669700753*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-5PM F 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**BENCH, SHAWN**
*Provider ID: 299895*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1669700753*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-5PM F 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**BERUMEN, JENNIFER**
*Provider ID: 260052*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1558566372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY GENERAL**

**BRUBAKER, ALEAH**
*Provider ID: 285272*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790104305*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY GENERAL**

**BRUBAKER, ALEAH**
*Provider ID: 289164*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-8354*
*Fax: (858) 966-5815*
*After Hours Phone: (858) 966-8354*
*Provider Gender: Female*
*NPI: 1790104305*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health*

*Network, UCSD Medical Group*

*IPA: IHP of Southern Cal-PHP*

*IPA: IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**

*Provider ID: 304608*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120

*Phone: (619) 500-7699*

*Fax: (619) 483-3997*

*After Hours Phone: (619) 500-7699*

*Provider Gender: Male*

*NPI: 1437470762*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**

*Provider ID: 304609*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115

*Phone: (619) 582-4490*

*Fax: (619) 501-9702*

*After Hours Phone: (619) 582-4490*

*Provider Gender: Male*

*NPI: 1437470762*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

**SURGERY GENERAL**

**FAIRBANKS, TIMOTHY**

*Provider ID: 260842*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

*Phone: (858) 966-7711*

*Fax: (858) 966-7712*

*After Hours Phone: (858) 966-7711*

*Provider Gender: Male*

*NPI: 1407010556*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**SURGERY GENERAL**

**GARCIA CABRERA, ANA**
*Provider ID: 311499*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205330354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HOLLANDSWORTH, HANNAH**
*Provider ID: 310729*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972954303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HORGAN, SANTIAGO**
*Provider ID: 286367*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HORGAN, SANTIAGO**
*Provider ID: 286379*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-0700*
*After Hours Phone: (619) 471-0700*
*Provider Gender: Male*
*NPI: 1932297231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**IGNACIO, ROMEO**
*Provider ID: 217053*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1538147145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 286355*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 201729*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
*Phone: (858) 657-8860*
*After Hours Phone: (858) 657-8860*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 286356*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**MUELLER, GEORGE**
*Provider ID: 54298*
*Board Certified Specialty: No*
*SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 454-0097*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1629179684*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5PM F 8:30AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**MUELLER, GEORGE**
*Provider ID: 300091*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 454-0097*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1629179684*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5PM F 8:30AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**POLLACK, LARRY**
*Provider ID: 54346*
*Board Certified Specialty: Yes*
*SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1104998400*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-5PM F 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**SURGERY GENERAL**

**REEVES, JAMES**

*Provider ID: 311505*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174059257*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANDLER, BRYAN**
*Provider ID: 286357*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043410186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANDLER, BRYAN**
*Provider ID: 286383*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043410186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANTORELLI, JARRETT**
*Provider ID: 272303*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033529201*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**YELON, JAY**
*Provider ID: 314355*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1750379475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY HAND

**CAGE, DORI**
*Provider ID: 296731*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8008 FROST ST STE 403
SAN DIEGO, CA 92123
*Phone: (858) 715-9200*
*Fax: (858) 715-9202*
*After Hours Phone: (858) 715-9200*
*Provider Gender: Female*
*NPI: 1871592253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SURGERY HAND ORTHOPEDIC

**STEPHENSON, SAMUEL**
*Provider ID: 284934*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578058665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY NEUROLOGICAL

**BARBA, DAVID**
*Provider ID: 244087*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5720*
*After Hours Phone: (619) 543-5720*
*Provider Gender: Male*
*NPI: 1093730251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BELVERUD, SHAWN**
*Provider ID: 202333*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1073817268*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BEN-HAIM, SHARONA**
*Provider ID: 304129*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942469663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**HATEFI, DUSTIN**
*Provider ID: 310033*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**LEVY, MICHAEL**
*Provider ID: 298705*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 180
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7930*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Male*
*NPI: 1164593927*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, UCSD MEDICAL CTR, CHILDRENS HOSP OF LOS ANGELES*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY NEUROLOGICAL**

**MARSHALL, LAWRENCE**
*Provider ID: 244150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1750306171*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**
*Provider ID: 304170*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437416591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**
*Provider ID: 242007*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437416591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**PHAM, MARTIN**
*Provider ID: 244158*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609130921*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY NEUROLOGICAL

**TOMLIN, JEFFREY**
*Provider ID: 272950*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Male*
*NPI: 1366530321*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY NEUROLOGICAL

**U, HOI**
*Provider ID: 244132*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164468146*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY ORTHOPEDIC

**BOCKHORN, LAUREN**
*Provider ID: 313622*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902369366*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY ORTHOPEDIC

**BUI, CHRISTOPHER**
*Provider ID: 241162*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1619231537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BUKATA, SUSAN**
*Provider ID: 277948*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932140639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BUKATA, SUSAN**
*Provider ID: 304181*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932140639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHENG, YU-TSUN**
*Provider ID: 301903*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1992982854*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**CHIARAPPA, FRANK**
*Provider ID: 304174*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1932536828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHOI, JIHOON**
*Provider ID: 284788*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285097741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**
*Provider ID: 296446*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1659634699*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**
*Provider ID: 246466*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Female*
*NPI: 1659634699*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**CORTES, ALEJANDRO**
*Provider ID: 313520*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1972066785*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**DIJANIC, CHRISTOPHER**
*Provider ID: 313482*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1295396281*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**
*Provider ID: 205495*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**
*Provider ID: 260841*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**GEORGE, JOSE**
*Provider ID: 313607*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1528528668*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**GOEB, YANNICK**
*Provider ID: 284794*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730542747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311579*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**JACKSON, MADELEINE**
*Provider ID: 301818*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1386140085*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*

*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**MICHEL, MATTHEW**
*Provider ID: 314760*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6719 ALVARADO RD STE 308
SAN DIEGO, CA 92120
*Phone: (619) 265-7912*
*Fax: (619) 265-7922*
*After Hours Phone: (619) 265-7912*
*Provider Gender: Male*
*NPI: 1992202956*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY ORTHOPEDIC**

**PASSIAS, BRADEN**
*Provider ID: 313512*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1144783028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SEDGHI, SOUDABEH**
*Provider ID: 313492*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619438199*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**
*Provider ID: 285247*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437565488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**
*Provider ID: 304164*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437565488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**
*Provider ID: 260953*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1548417652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**
*Provider ID: 205914*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1548417652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**BICKLER, STEPHEN**
*Provider ID: 270090*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1891866653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**GOSMAN, AMANDA**
*Provider ID: 205841*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1164436291*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KELLER, BENJAMIN**
*Provider ID: 285941*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1285953364*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KELLER, BENJAMIN**
*Provider ID: 272196*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1285953364*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KLING, KAREN**
*Provider ID: 283380*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KLING, KAREN**
*Provider ID: 205340*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**LAZAR, DAVID**
*Provider ID: 283140*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1538365002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**LAZAR, DAVID**
*Provider ID: 205606*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*

*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1538365002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**
*Provider ID: 256194*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1598979593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**
*Provider ID: 206172*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1598979593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310985*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**

*Provider ID: 277288*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346674561*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**

*Provider ID: 277965*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7920 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Female*

*NPI: 1346674561*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**KOLB, FREDERIC**

*Provider ID: 246239*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1790341832*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**KOLB, FREDERIC**

*Provider ID: 255576*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

7920 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Female*

*NPI: 1790341832*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**KOLB, FREDERIC**
*Provider ID: 246240*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790341832*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**KOLB, FREDERIC**
*Provider ID: 255575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790341832*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**LEWIS, PRIYA**
*Provider ID: 302132*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-8394*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Female*
*NPI: 1720465024*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Specialist Provider Directory

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**

*Provider ID: 311448*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**

*Provider ID: 311449*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**

*Provider ID: 311447*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**

*Provider ID: 311375*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**
*Provider ID: 311376*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-8394*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1497280028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY THORACIC**

**FOX, KENNETH**
*Provider ID: 257841*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Male*
*NPI: 1235153552*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY THORACIC**

**GANTA, SRUJAN**
*Provider ID: 256383*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Male*
*NPI: 1265071005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY THORACIC**

**GANTA, SRUJAN**
*Provider ID: 275611*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Male*
*NPI: 1265071005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY THORACIC**

**LEWIS, MICHAEL**
*Provider ID: 296906*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*Fax: (858) 966-8032*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Male*
*NPI: 1780847533*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY THORACIC**

**NIGRO, JOHN**
*Provider ID: 205367*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*Fax: (858) 966-8032*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Male*
*NPI: 1881707818*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY THORACIC**

**VOSSLER, JOHN**
*Provider ID: 306389*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1659630572*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**TRANSPLANT SURGERY**

**MEKEEL, KRISTIN**
*Provider ID: 262109*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY STE 107
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*

*After Hours Phone: (858) 966-7711*
*Provider Gender: Female*
*NPI: 1104861947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**TRANSPLANT SURGERY**

**SCHNICKEL, GABRIEL**
*Provider ID: 262192*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-8354*
*Fax: (858) 966-5815*
*After Hours Phone: (858) 966-8354*
*Provider Gender: Male*
*NPI: 1619111440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**UROLOGY**

**ALBO, MICHAEL**
*Provider ID: 311548*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1912938499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**ALBO, MICHAEL**
*Provider ID: 313734*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1912938499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**UROLOGY**

**BAGRODIA, ADITYA**

*Provider ID: 313884*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1730310665*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**UROLOGY**

**BECHIS, SETH**

*Provider ID: 313746*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1376863746*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**UROLOGY**

**CHEN, TONY**

*Provider ID: 283960*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1245684497*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: UCSD Medical Group*

**UROLOGY**

**KADER, ANDREW**

*Provider ID: 311541*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1184731127*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 311516*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 274480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 313310*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 256847*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY*

*THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311610*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**UROLOGY**

**PATEL, DEVIN**
*Provider ID: 246094*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 657-7876*
*After Hours Phone: (858) 657-7876*
*Provider Gender: Male*
*NPI: 1437505559*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, CEDARS SINAI MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**SANTIAGO-LASTRA, YAHIR**
*Provider ID: 311487*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699936609*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**SANTIAGO-LASTRA, YAHIR**
*Provider ID: 313690*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699936609*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**SWORDS, KELLY**
*Provider ID: 206183*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-7484*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-7484*
*Provider Gender: Female*
*NPI: 1316101256*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**UROLOGY**

**UNTERBERG, STEPHEN**
*Provider ID: 295834*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Male*
*NPI: 1215374210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**UNTERBERG, STEPHEN**
*Provider ID: 284665*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Male*
*NPI: 1215374210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**UNTERBERG, STEPHEN**
*Provider ID: 295833*
*Board Certified Specialty: Yes*

*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Male*
*NPI: 1215374210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**UNTERBERG, STEPHEN**
*Provider ID: 284664*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Male*
*NPI: 1215374210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**WOO, JASON**
*Provider ID: 313664*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437380086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## SAN MARCOS

**CERTIFIED NURSE PRACTITIONER**

**BLAND, JACELIS**
*Provider ID: 296766*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1801522859*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*SA 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CABRAL, ALEJANDRA**
*Provider ID: 297888*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1699222620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FLORES, BERTHA**
*Provider ID: 313780*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1942032602*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*Provider ID: 296603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, REGINA**
*Provider ID: 297837*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1639673858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

# D. Specialist Provider Directory

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HAN, ANGELA**

*Provider ID: 300215*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

*After Hours Phone: (760) 736-6767*

*Provider Gender: Female*

*NPI: 1629242839*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KOHOUT, KATHRYN**

*Provider ID: 291105*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

*After Hours Phone: (760) 736-6767*

*Provider Gender: Female*

*NPI: 1316544331*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 14\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-8PM SA 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MOONEY, PATRICIA**

*Provider ID: 280382*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

*Phone: (760) 747-8935*

*Fax: (760) 466-0078*

*After Hours Phone: (760) 747-8935*

*Provider Gender: Female*

*NPI: 1700470200*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MUNOZ, EMMANUEL**

*Provider ID: 312286*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*Fax: (760) 736-8740*

*After Hours Phone: (760) 736-6767*

*Provider Gender: Male*

*NPI: 1710366489*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**CERTIFIED NURSE PRACTITIONER**

**NGUYEN, VANESSA**
*Provider ID: 306716*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Female*
*NPI: 1376219246*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PARSONS, MEKRAE**
*Provider ID: 303220*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1972090306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**YCASAS, EMILY**
*Provider ID: 307853*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1033841861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**
*Provider ID: 290739*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1407287469*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**DERMATOLOGY**

**BROWN, REGINA**

*Provider ID: 309982*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
*Phone: (760) 738-7600*
*Fax: (760) 738-7616*
*After Hours Phone: (760) 738-7600*
*Provider Gender: Female*
*NPI: 1801424692*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**TOLENTINO, ARTURO**
*Provider ID: 298696*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
*Phone: (833) 867-4642*
*Fax: (360) 462-2746*
*After Hours Phone: (833) 867-4642*
*Provider Gender: Male*
*NPI: 1609066018*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, UCI HEALTH-LAKEWOOD*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\17*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**DO, HULBERT**
*Provider ID: 295941*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
*Phone: (760) 798-8855*
*Fax: (619) 616-2104*
*After Hours Phone: (760) 798-8855*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**DO, HULBERT**
*Provider ID: 291583*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-8PM SA 8AM-8PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 245578*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
*Phone: (760) 798-8855*
*Fax: (760) 755-5245*
*After Hours Phone: (760) 798-8855*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 296052*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
*Phone: (760) 798-8855*
*Fax: (760) 755-5245*
*After Hours Phone: (760) 798-8855*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 295847*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
*Phone: (760) 798-8855*
*Fax: (760) 755-5245*
*After Hours Phone: (760) 798-8855*
*Provider Gender: Female*
*NPI: 1811307051*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 291607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1811307051*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEUROLOGY**

**ANDER, AZIZ**
*Provider ID: 290382*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
*Phone: (442) 999-5977*
*Fax: (442) 999-5914*
*After Hours Phone: (442) 999-5977*
*Provider Gender: Male*
*NPI: 1316131832*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Pashto, Persian, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**GUPTA, MONIKA**
*Provider ID: 307938*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Female*
*NPI: 1922243401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**HOSSEIN ZADEH MALEKI, ANA**
*Provider ID: 304998*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Female*
*NPI: 1316471485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Persian*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MANDEVILLE, ROSS**

*Provider ID: 309933*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

*Phone: (760) 281-3662*

*Fax: (760) 316-5268*

*After Hours Phone: (760) 281-3662*

*Provider Gender: Male*

*NPI: 1205084183*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS MEMORIAL HOSP*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MAREK, MAKSYM**

*Provider ID: 306708*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

*Phone: (760) 281-3662*

*Fax: (619) 425-3842*

*After Hours Phone: (760) 281-3662*

*Provider Gender: Male*

*NPI: 1881182079*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM SA 9AM-12:30PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**SORIA LOPEZ, JOSE**

*Provider ID: 295745*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

*Phone: (760) 281-3662*

*Fax: (760) 316-5268*

*After Hours Phone: (760) 281-3662*

*Provider Gender: Male*

*NPI: 1225474034*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**LOEFFLER, ALLISON**

*Provider ID: 311881*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1700073962*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**LUM HO, RACHEL**
*Provider ID: 303150*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1215469283*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**LUM HO, RACHEL**
*Provider ID: 304047*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1215469283*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**POSADAS, EMERITO**
*Provider ID: 257536*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*

# D. Specialist Provider Directory

*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PEDIATRICS**

**QUINTERO, CAROLYN**
*Provider ID: 303142*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1023033156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Afar, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HERNANDEZ, MIRIAM**
*Provider ID: 298336*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1457903700*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*Provider ID: 302439*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POLLEY, SHANNON**
*Provider ID: 296093*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1225608722*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-8PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RUBIO, HALEY**
*Provider ID: 301290*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1598394371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**ALTAMIRANO, LEON**
*Provider ID: 290362*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1619271517*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**ARIELLA, LYNDA**
*Provider ID: 299716*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1073518965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\50*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FLYNN, DANIELLE**
*Provider ID: 290795*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1477785137*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GEORGIEV, MARY-JO**
*Provider ID: 290793*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD

SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1518996875*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**IMAM, SYED**
*Provider ID: 298174*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1447428271*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TORRES, HECTOR**
*Provider ID: 290788*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1720265614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SAN YSIDRO

**FAMILY PRACTICE**

**ARRIETA, NOEMI**
*Provider ID: 297794*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6341*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1912223496*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BUTLER, KELLEY**
*Provider ID: 310820*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*
*NPI: 1316527286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BUTLER, KELLEY**
*Provider ID: 310821*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1316527286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**CHOU, SUSANNA**
*Provider ID: 310842*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1104889724*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**DALUGDUGAN, ESTHER**
*Provider ID: 302285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1962662718*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**GOLU, CRISTIANA**
*Provider ID: 310232*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*

*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1083684997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Romanian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*Provider ID: 297756*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ORTEGA, LUIS**
*Provider ID: 295225*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1558924936*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**QURESHI, SOFIA**
*Provider ID: 308756*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1902197544*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE GERIATRIC MEDICINE**

**BULOW, KWI**
*Provider ID: 302346*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# D. Specialist Provider Directory

4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1073608576*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INFECTIOUS DISEASE**

**ALDOUS, JEANNETTE**
*Provider ID: 290421*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1073650339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INFECTIOUS DISEASE**

**POLESKY, ANDREA**
*Provider ID: 315321*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1063517365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tongan*
*Cultural Competency: N*
*Hospital Affiliation: SANTA CLARA VALLEY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INFECTIOUS DISEASE**

**RAMIREZ SANCHEZ, CLAUDIA**
*Provider ID: 296122*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1659720555*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*
*Website: N/A*

*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ATIGA, SCHUBERT**
*Provider ID: 310885*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1033138714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**
*Provider ID: 290490*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1316146996*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*Provider ID: 294885*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*Provider ID: 294886*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1255878997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL*

*HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**KOBAYASHI, KAREN**
*Provider ID: 310881*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1497929517*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**RODRIGUEZ JEREZ, ROBERTO**
*Provider ID: 315325*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1710316450*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**DOKICH, SRETENKA**
*Provider ID: 313372*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1154409035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Serbian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 17\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**FUJII, CINDY**
*Provider ID: 298309*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*

*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1871664821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM*
*M-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PEDIATRICS

**RODRIGUEZ, ALDO**
*Provider ID: 295779*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1508209651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM*
*M 8:30AM-8PM*
*W-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PSYCHOLOGIST

**IBANEZ, BERENICE**
*Provider ID: 290465*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1740394386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## REGISTERED PHYSICAL THERAPIST

**SHAUF, JOANN**
*Provider ID: 296045*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1134732522*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## RHEUMATOLOGY

**LWIN, THUTHIRI**
*Provider ID: 307650*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1174010896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Burmese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SANTEE

### PEDIATRICS

**IKE, ERICA**
*Provider ID: 309723*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1821413907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST JOHNS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## TEMECULA

### CERTIFIED ACUPUNCTURIST

**CRAFT, KEVIN**
*Provider ID: 290944*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
*Phone: (951) 225-6400*
*Fax: (360) 462-2751*
*After Hours Phone: (951) 225-6400*
*Provider Gender: Male*
*NPI: 1659745610*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

### CERTIFIED NURSE PRACTITIONER

**MIRACLE, ANGELYN**
*Provider ID: 300260*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
31170 TEMECULA PKWY
STE 200
TEMECULA, CA 92592
*Phone: (951) 699-3299*
*Fax: (951) 302-1313*
*After Hours Phone: (951) 699-3299*
*Provider Gender: Female*
*NPI: 1144539842*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

### PHYSICIANS ASSISTANT

**ANWAR, YASMIN**

*Provider ID: 300846*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
31515 RANCHO PUEBLO RD STE 102
TEMECULA, CA 92592
*Phone: (951) 225-7873*
*Fax: (951) 305-9117*
*After Hours Phone: (951) 225-7873*
*Provider Gender: Female*
*NPI: 1588602247*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY GENERAL VASCULAR**

**HOWE, STEVEN**
*Provider ID: 206759*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
31700 TEMECULA VALLEY PARKWAY
TEMECULA, CA 92592
*Phone: (951) 303-2349*
*Fax: (951) 303-8591*
*After Hours Phone: (951) 303-2349*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## VALLEY CENTER

**CERTIFIED NURSE PRACTITIONER**

**HOULE, STEPHANIE**
*Provider ID: 313722*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Provider Gender: Female*
*NPI: 1003674847*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## VISTA

**ANESTHESIOLOGY PAIN MANAGEMENT**

**GUPTA, ANUJ**
*Provider ID: 297703*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2023 W VISTA WAY STE D
VISTA, CA 92083
*Phone: (619) 330-8771*
*Fax: (619) 330-8772*
*After Hours Phone: (619) 330-8771*
*Provider Gender: Male*
*NPI: 1073629549*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**ABELHAD, NADIA**
*Provider ID: 306897*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619400801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**ABELHAD, NADIA**
*Provider ID: 306896*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619400801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**DO, HULBERT**
*Provider ID: 290574*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 9AM-8PM*
*M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED ACUPUNCTURIST**

**GALLO, PHILIP**
*Provider ID: 315007*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR

VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1760708465*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\65*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED ACUPUNCTURIST**

**SONG, CAROL**
*Provider ID: 290550*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1518166685*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**AYELE, MAHOGANY**
*Provider ID: 257586*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1902120421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**CERTIFIED NURSE PRACTITIONER**

**AYELE, MAHOGANY**
*Provider ID: 257587*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (844) 308-5003*
*Fax: (760) 414-3763*
*After Hours Phone: (844) 308-5003*
*Provider Gender: Female*
*NPI: 1902120421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**CERTIFIED NURSE PRACTITIONER**

**BERNETICH, MEGHAN**

*Provider ID: 304506*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1629354360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**BERNETICH, MEGHAN**
*Provider ID: 302526*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1629354360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\24*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CARDINELL, ANNA**
*Provider ID: 291411*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 270
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306978614*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHILAKA, SAMUEL**
*Provider ID: 301311*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

# D. Specialist Provider Directory

**CHILAKA, SAMUEL**
*Provider ID: 301312*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*Provider ID: 245207*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*Provider ID: 315334*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DECARLI, TASIA**
*Provider ID: 315339*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE A
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1598158768*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE**

# D. Specialist Provider Directory

**PRACTITIONER**

**DECARLI, TASIA**

*Provider ID: 315335*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1598158768*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 6\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ESTEINOU, ENRIQUE**

*Provider ID: 314648*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1528741287*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ESTEINOU, ENRIQUE**

*Provider ID: 314647*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 361-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 361-5000*

*Provider Gender: Male*

*NPI: 1528741287*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 241907*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 304492*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 304493*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 302296*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 302301*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE A
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE**

# D. Specialist Provider Directory

**PRACTITIONER**

**HERNANDEZ, JESSICA**

*Provider ID: 302297*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1013668680*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*Provider ID: 311297*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1558607440*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*Provider ID: 311299*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1558607440*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*Provider ID: 307933*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1558607440*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*Provider ID: 307931*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1558607440*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298085*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 305737*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE B
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*Provider ID: 298083*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1245695006*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**KORMANIK, PATRICIA**
*Provider ID: 282072*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093895047*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 295288*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MONTGOMERY JR, KEITH**
*Provider ID: 295284*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1790978617*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 6\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 10AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**NICHOLAS, ESTELA**
*Provider ID: 239866*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1558384792*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**PRITZKER, JOELY**
*Provider ID: 239773*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619384351*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**SKOPEK, TAM**
*Provider ID: 315056*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1346079910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SKOPEK, TAM**
*Provider ID: 315057*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1346079910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SKOPEK, TAM**
*Provider ID: 314652*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*

*NPI: 1346079910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SKOPEK, TAM**
*Provider ID: 314651*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1346079910*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SRILASAK, MICHELE**
*Provider ID: 281857*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265487326*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295502*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295504*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE A
VISTA, CA 92083

*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-2PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*Provider ID: 295507*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**YCASAS, EMILY**
*Provider ID: 298837*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1033841861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUIDI, CASEY**
*Provider ID: 300224*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013349919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUIDI, CASEY**
*Provider ID: 303315*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*

1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013349919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**CORTEZ, JAIME**
*Provider ID: 290483*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1508195348*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**JU, NATHANIEL**
*Provider ID: 290220*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1972883882*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**JU, NATHANIEL**
*Provider ID: 290222*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1972883882*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GYNECOLOGIC ONCOLOGY**

**ESKANDER, RAMEZ**
*Provider ID: 282163*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102

VISTA, CA 92081
*Phone: (760) 536-7737*
*Fax: (760) 536-7959*
*After Hours Phone: (760) 536-7737*
*Provider Gender: Male*
*NPI: 1144486929*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPICE AND PALLIATIVE MEDICINE

**RUBENZIK, TAMARA**
*Provider ID: 282128*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (619) 543-6397*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-6397*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## INTERNAL MEDICINE

**COPELAND, ARDETH**
*Provider ID: 310697*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1699704338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERNAL MEDICINE

**COPELAND, ARDETH**
*Provider ID: 313222*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
105 DURIAN ST STE B
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1699704338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 65\None*
*American Sign Language (ASL): N*

# D. Specialist Provider Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERNAL MEDICINE

**DAO, MARC**
*Provider ID: 297754*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1467542175*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EL CENTRO REGIONAL MEDICAL CENTER, PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERVENTIONAL CARDIOLOGY

**PARKS, MONICA**
*Provider ID: 302414*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
906 SYCAMORE AVE STE 104
VISTA, CA 92081
*Phone: (760) 630-2550*
*Fax: (760) 726-2305*
*After Hours Phone: (760) 630-2550*
*Provider Gender: Female*
*NPI: 1740634971*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OBSTETRICS / GYNECOLOGY

**ARRIETA, IRIS**
*Provider ID: 290607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1659614303*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*

*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**HAWKINS, MELISSA**
*Provider ID: 290596*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1851620447*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-7PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**LEONARD, LISA**
*Provider ID: 290710*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1477588598*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 273114*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 9:30AM-5PM*
*W 8AM-5PM*
*TH 10AM-7PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 273113*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760)*

*631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 290208*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**GEE, JENNIFER**
*Provider ID: 290209*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1336589332*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 9:30AM-5PM*
*W 8AM-5PM*
*TH 10AM-7PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**
*Provider ID: 290903*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM*
*M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

# D. Specialist Provider Directory

**OPTOMETRIST**

**KIM, MICHAEL**

*Provider ID: 245239*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1164546313*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8AM-5PM*
*TH 10:30AM-7:30PM*
*F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**

*Provider ID: 290697*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Male*

*NPI: 1164546313*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8AM-5PM*
*TH 10:30AM-7:30PM*
*F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**

*Provider ID: 242634*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1376958389*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**

*Provider ID: 290236*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1376958389*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 9AM-8PM*

*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**MORA, WENDY**
*Provider ID: 290238*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1376958389*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**TAM, EMILY**
*Provider ID: 277978*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497161236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 9AM-4PM*
*M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**TAM, EMILY**
*Provider ID: 290315*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497161236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 9AM-4PM*
*M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**TAM, EMILY**
*Provider ID: 290316*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1497161236*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin,*

*Yue Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PEDIATRICS**

**RAHIMI, NASSRIN**
*Provider ID: 257581*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1063438166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PHYSICIANS ASSISTANT**

**WALLACE, STEPHANIE**
*Provider ID: 239770*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (888) 216-8482*
*Provider Gender: Female*
*NPI: 1518104942*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**WHARRAM, JENNIFER**
*Provider ID: 314059*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2067 W VISTA WAY STE 295
VISTA, CA 92083
*Phone: (760) 298-5787*
*Fax: (760) 560-2007*
*After Hours Phone: (760) 298-5787*
*Provider Gender: Female*
*NPI: 1063168094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**MILLER, JULIE**
*Provider ID: 290666*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619115664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## PODIATRIST

**MILLER, JULIE**
*Provider ID: 305464*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619115664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## REGISTERED PHYSICAL THERAPIST

**AMBROSE, CHRISTOPHER**
*Provider ID: 248009*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2067 W VISTA WAY STE 185
VISTA, CA 92083
*Phone: (760) 631-5888*
*Fax: (760) 631-5880*
*After Hours Phone: (760) 591-7750*
*Provider Gender: Male*
*NPI: 1114977535*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 8\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-5PM*
*W 7AM-7PM*
*TH 7AM-5PM*
*F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## SURGERY GENERAL

**ARMANI, AVA**
*Provider ID: 282144*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT*

*MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**GROVE, JAY**
*Provider ID: 245227*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2385 S MELROSE DR
VISTA, CA 92081
*Phone: (760) 300-3647*
*Fax: (760) 482-1316*
*After Hours Phone: (760) 300-3647*
*Provider Gender: Male*
*NPI: 1912971334*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## WILDOMAR

**ANESTHESIOLOGY**

**HYLTON, DIANA**
*Provider ID: 241737*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**KRAUSE, MARTIN**
*Provider ID: 287654*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Male*
*NPI: 1417243239*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**RODRIGUEZ-MINETTE, JESSICA**
*Provider ID: 275308*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164809950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LI, JINGHONG**
*Provider ID: 255940*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE CRITICAL CARE MEDICINE**

**PATEL, SAGAR**
*Provider ID: 283000*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Male*
*NPI: 1245672302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 202658*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**KUMAR, AVNEE**
*Provider ID: 300013*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Female*
*NPI: 1750745394*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**LEVERONE, NICHOLAS**
*Provider ID: 313304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1407388564*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**SURI, RAJAT**
*Provider ID: 283349*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Male*
*NPI: 1144615337*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# E. Hospital Directory - General Acute Care Hospital

**GROSSMONT HOSPITAL**

*Provider ID: 170046*

5555 GROSSMONT CENTER DR
LA MESA, CA 91942

*Phone: (619) 740-6000*

*After Hours Phone: (619) 740-6000*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 080000006*

*NPI: 1528041811*

*Website: www.sharp.com/hospitals/grossmont/*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

**KINDRED HOSPITAL SAN DIEGO**

*Provider ID: 169663*

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

*Phone: (619) 543-4500*

*After Hours Phone: (619) 543-4500*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*NPI: 1992880512*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PALOMAR HEALTH**

*Provider ID: 170052*

15615 POMERADO RD
POWAY, CA 92064

*Phone: (858) 613-4000*

*After Hours Phone: (858) 613-4000*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 080000127*

*NPI: 1376513754*

*Website: www.palomarhealth.org/facilities/palomar- poway- outpatient*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PALOMAR MEDICAL CENTER**

*Provider ID: 173011*

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

*Phone: (442) 281-5000*

*After Hours Phone: (442) 281-5000*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 080000083*

*NPI: 1457321317*

*Website: www.palomarhealth.org/facilities/palomar- medical- center*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

**PALOMAR REHABILITATION INSTITUTE**

*Provider ID: 547653*

2181 CITRACADO PKWY
ESCONDIDO, CA 92029

*Phone: (442) 277-6100*

*After Hours Phone: (442) 277-6100*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

# E. Hospital Directory - General Acute Care Hospital

*Hours: 24 Hours / 7 days/week*
*License Number: 550006213*
*NPI: 1831702398*
*Website: https://www.palomarhealthrehabinstitute.com*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PARADISE VALLEY HOSPITAL**
*Provider ID: 170057*
2400 E 4TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 470-4321*
*After Hours Phone: (619) 470-4321*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1356410351*
*Website: www.paradisevalleyhospital.net*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RADY CHILDRENS HOSPITAL SAN DIEGO**
*Provider ID: 171083*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1710065933*
*Website: www.rchsd.org*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SCRIPPS GREEN HOSPITAL**
*Provider ID: 171084*
10666 N TORREY PINES RD
LA JOLLA, CA 92037
*Phone: (858) 455-9100*
*After Hours Phone: (858) 455-9100*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000139*
*NPI: 1841233780*
*Website: www.scripps.org/locations/hospitals__scripps- green- hospital*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SCRIPPS MEMORIAL HOSPITAL**
*Provider ID: 170045*
9888 GENESEE AVE
LA JOLLA, CA 92037
*Phone: (800) 727-4777*
*After Hours Phone: (800) 727-4777*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000050*
*NPI: 1841277704*
*Website: www.scripps.org/locations/hospitals__scripps- memorial- hospital- la- jolla*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SCRIPPS MEMORIAL HOSPITAL ENCINITAS**
*Provider ID: 170305*

# E. Hospital Directory - General Acute Care Hospital

354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 753-6501*
*After Hours Phone: (760) 753-6501*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000148*
*NPI: 1700829199*
*Website: www.scripps.org/locations/hospitals__scripps- memorial- hospital- encinitas*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SCRIPPS MERCY HOSPITAL**

*Provider ID: 170048*
4077 5TH AVE STE 100
SAN DIEGO, CA 92103
*Phone: (619) 294-8111*
*After Hours Phone: (619) 294-8111*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1659359446*
*Website: www.scripps.org/locations/hospitals__scripps- mercy- hospital__scripps- mercy- hospital- san- diego*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SCRIPPS MERCY HOSPITAL CHULA VISTA**

*Provider ID: 170256*
435 H ST
CHULA VISTA, CA 91910
*Phone: (619) 691-7000*
*After Hours Phone: (619) 691-7000*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 090000074*
*NPI: 1659359446*
*Website: www.scripps.org/locations/hospitals__scripps- mercy- hospital__scripps- mercy- hospital- chula- vista*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SELECT SPECIALTY HOSPITAL SAN DIEGO**

*Provider ID: 170165*
555 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (619) 260-8300*
*After Hours Phone: (619) 260-8300*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 090000404*
*NPI: 1639172133*
*Website: N/A*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SHARP CHULA VISTA MED CTR**

*Provider ID: 170251*
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911
*Phone: (619) 502-5800*
*After Hours Phone: (619) 502-5800*
*Accepting New Patients: No*
*Min/Max Age: 0\None*

# E. Hospital Directory - General Acute Care Hospital

*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 090000008*
*NPI: 1396728630*
*Website: www.sharp.com/hospitals/chula- vista/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SHARP CORONADO HOSP AND HEALTHCARE CTR**
*Provider ID: 170252*
250 PROSPECT PL
CORONADO, CA 92118
*Phone: (619) 522-3600*
*After Hours Phone: (619) 522-3600*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1154304475*
*Website: www.sharp.com/hospitals/coronado/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS**
*Provider ID: 170054*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 939-3400*
*After Hours Phone: (858) 939-3400*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000039*
*NPI: 1407839921*
*Website: www.sharp.com*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SHARP MEMORIAL HOSPITAL**
*Provider ID: 170047*
7901 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 939-3400*
*After Hours Phone: (858) 939-3400*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1407839921*
*Website: www.sharp.com/hospitals/memorial/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**TRI CITY MEDICAL CTR**
*Provider ID: 170049*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 724-8411*
*After Hours Phone: (760) 724-8411*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1801861190*
*Website: www.tricitymed.org*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

# E. Hospital Directory - General Acute Care Hospital

**UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER**

*Provider ID: 685221*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (619) 287-3270*

*After Hours Phone: (619) 287-3270*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000013*

*NPI: 1184722779*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER**

*Provider ID: 685221*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (619) 287-3270*

*After Hours Phone: (619) 287-3270*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1184722779*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**UCSD LA JOLLA JOHN SALLY THORNTON**

*Provider ID: 170053*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 657-7000*

*After Hours Phone: (858) 657-7000*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1497021265*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

**UCSD MEDICAL CTR**

*Provider ID: 170051*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (619) 543-6222*

*After Hours Phone: (619) 543-6222*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1184722779*

*Website: https://health.ucsd.edu/locations/pages/hillcrest.aspx*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

# F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF)

## CARLSBAD

**LA COSTA HOUSE**

*Provider ID: 662923*

6433 FLAMENCO ST
CARLSBAD, CA 92009

*Phone: (760) 721-1706*

*Fax: (760) 721-9872*

*After Hours Phone: (760) 721-1706*

*Accepting New Patients: No*

*NPI: 1962488007*

*Website: teriinc.org*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## EL CAJON

**KASEY'S HOME**

*Provider ID: 674600*

1164 CRYSTAL LN
EL CAJON, CA 92020

*Phone: (619) 465-8010*

*Fax: (619) 465-8348*

*After Hours Phone: (619) 465-8010*

*Accepting New Patients: No*

*Hours: M-F 8AM-5PM*

*NPI: 1639392079*

*Website: N/A*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## FALLBROOK

**VIA RIO HOUSE**

*Provider ID: 662930*

1262 VIA ENCINOS DR
FALLBROOK, CA 92028

*Phone: (760) 731-2157*

*Fax: (760) 721-9872*

*After Hours Phone: (760) 731-2157*

*Accepting New Patients: No*

*NPI: 1962488007*

*Website: teriinc.org*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## LA MESA

**HILLDALE HABILITATION CENTER**

*Provider ID: 527671*

7979 LA MESA BLVD
LA MESA, CA 91942

*Phone: (619) 465-8010*

*Fax: (619) 465-8348*

*After Hours Phone: (619) 465-8010*

*Accepting New Patients: No*

*Hours: M-F 8AM-5PM*

*NPI: 1073736427*

*Website: N/A*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**SHASTA HOME**

*Provider ID: 674614*

10346 CHALLENGE BLVD
LA MESA, CA 91941

*Phone: (619) 465-8010*

*Fax: (619) 465-8348*

*After Hours Phone: (619) 465-8010*

*Accepting New Patients: No*

*Hours: M-F 8AM-5PM*

*NPI: 1134342520*

*Website: N/A*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## OCEANSIDE

**ANDRU HOME**

*Provider ID: 664438*

# F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF)

311 DEL FLORA ST
OCEANSIDE, CA 92058
*Phone: (760) 439-1741*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 439-1741*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1801981667*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BRADY HOME**

*Provider ID: 664440*
4825 GLENHAVEN DR
OCEANSIDE, CA 92056
*Phone: (760) 295-4505*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 295-4505*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1760725766*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MCNEALY HOUSE**

*Provider ID: 662925*
4602 ALLENDE AVE
OCEANSIDE, CA 92057
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MICHALOWSKI HOME**

*Provider ID: 662925*
4602 ALLENDE AVE
OCEANSIDE, CA 92057
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MONARCH HOME**

*Provider ID: 666883*
877 MUIRFIELD DR
OCEANSIDE, CA 92058
*Phone: (760) 231-8139*
*Fax: (760) 529-5148*
*After Hours Phone: (760) 231-8139*
*Accepting New Patients: No*
*Hours: M-F 8AM-5PM*
*NPI: 1760660336*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## SAN MARCOS

**CARLO HOUSE**

*Provider ID: 662931*
411 CARLO ST
SAN MARCOS, CA 92078
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*

# F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF)

*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## VALLEY CENTER

### AMREEN HOME

*Provider ID: 658588*
13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
*Phone: (760) 751-9879*
*Fax: (760) 749-3019*
*After Hours Phone: (760) 751-9879*
*Accepting New Patients: No*
*NPI: 1700160405*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## VISTA

### AMBER HOME

*Provider ID: 664436*
305 CARLSON CT
VISTA, CA 92083
*Phone: (760) 631-1527*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 631-1527*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1497924823*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### ANZA HOUSE

*Provider ID: 662920*
1736 ANZA AVE
VISTA, CA 92084
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### GRACE HOUSE

*Provider ID: 662919*
2507 HIBISCUS AVE
VISTA, CA 92081
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### HAYDEN HOME

*Provider ID: 664442*
822 GRANADA DR
VISTA, CA 92083
*Phone: (760) 941-8052*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 941-8052*
*Accepting New Patients: No*
*NPI: 1245400670*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF)

**MARSHALL HOUSE**
*Provider ID: 662924*
758 S MELROSE DR
VISTA, CA 92081
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MONTGOMERY HOUSE**
*Provider ID: 662927*
1658 MONTGOMERY DR
VISTA, CA 92084
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ORIENTE HOUSE**
*Provider ID: 662928*
3081 ORIENTE DR
VISTA, CA 92084
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SAVA HOME**
*Provider ID: 669500*
263 AHMU TER
VISTA, CA 92084
*Phone: (760) 305-7052*
*Fax: (760) 509-4949*
*After Hours Phone: (760) 305-7052*
*Accepting New Patients: No*
*Hours: M-F 8AM-5PM*
*NPI: 1962541177*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUSAN PARHAM HOUSING CORPORATION**
*Provider ID: 662929*
1658 ANZA AVE
VISTA, CA 92084
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1093137762*
*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**VISTA HOUSE**
*Provider ID: 662916*
1768 MONTE MAR RD
VISTA, CA 92084
*Phone: (760) 721-1706*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 721-1706*
*Accepting New Patients: No*
*NPI: 1962488007*

# F. Long-Term Care (LTC) and Skilled Nursing Facilities (SNF)

*Website: teriinc.org*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# G. Community-Based Adult Services (CBAS) - Adult Day Services

## CHULA VISTA

**OPEN ARMS ADHC**

*Provider ID: 417307*

301 E J ST
CHULA VISTA, CA 91910

*Phone: (619) 420-1404*

*Fax: (619) 420-1408*

*After Hours Phone: (619) 420-1404*

*Accepting New Patients: No*

*Hours: M-F 7AM-3PM*

*License Number: 060002076*

*NPI: 1598882169*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

*Language line interpreter services: N*

*If Facility has completed cultural competence training?:* N

*Facility has access to skilled medical interpreters on site?: N*

*Interpreter Non-English Languages: N*

*Medi-Cal: Y*

*Website: http://openarmsadhc.com*

## EL CAJON

**EL CAJON ADHC**

*Provider ID: 637126*

854 JACKMAN ST
EL CAJON, CA 92020

*Phone: (619) 328-2112*

*Fax: (619) 328-0069*

*After Hours Phone: (619) 328-2112*

*Accepting New Patients: No*

*Hours: SU-SA 9AM-3PM*

*License Number: 550008511*

*NPI: 1184207631*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

*Language line interpreter services: N*

*If Facility has completed cultural competence training?:* N

*Facility has access to skilled medical interpreters on site?: N*

*Interpreter Non-English Languages: N*

*Medi-Cal: Y*

*Website: N/A*

**MAGNOLIA ADULT DAY HEALTH CARE**

*Provider ID: 408541*

490 N MAGNOLIA AVE
EL CAJON, CA 92020

*Phone: (619) 444-1522*

*Fax: (619) 444-1516*

*After Hours Phone: (619) 444-1522*

*Accepting New Patients: No*

*Hours: M-F 8AM-4PM*

*License Number: 60000821*

*NPI: 1487864468*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

*Language line interpreter services: N*

*If Facility has completed cultural competence training?:* N

*Facility has access to skilled medical interpreters on site?: N*

*Interpreter Non-English Languages: N*

*Medi-Cal: Y*

*Website: http://magnoliaadhc.com*

**WESTERN ADULT DAY HEALTH CARE CENTER**

*Provider ID: 417305*

240 S MAGNOLIA AVE
EL CAJON, CA 92020

*Phone: (619) 631-7222*

*Fax: (619) 631-9228*

*After Hours Phone: (619) 631-7222*

*Accepting New Patients: No*

*Site Languages(s) Spoken: Chaldean Neo-Aramaic, Spanish, Arabic, Tagalog, Farsi*

*Hours: M-F 7AM-3:30PM*

*License Number: 060000892*

*NPI: 1821125550*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

# G. Community-Based Adult Services (CBAS) - Adult Day Services

*Language line interpreter services: Y*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: Y*
*Medi-Cal: Y*
*Website: https://westernadhc.wordpress.com/*

## LA MESA

**GOLDEN LIFE ADHC**
*Provider ID: 619502*
9158 FLETCHER PKWY
LA MESA, CA 91942
*Phone: (619) 357-7753*
*Fax: (619) 439-6038*
*After Hours Phone: (619) 357-7753*
*Accepting New Patients: No*
*NPI: 1093921900*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: N/A*

## NATIONAL CITY

**HORIZON CBAS**
*Provider ID: 642082*
1035 HARBISON AVE
NATIONAL CITY, CA 91950
*Phone: (619) 474-1822*
*Fax: (619) 474-1826*
*After Hours Phone: (619) 474-1822*
*Accepting New Patients: No*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Hours: M-F 8AM-4:30PM*
*License Number: 060000582*
*NPI: 1396476388*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: N/A*

## POWAY

**POWAY ADULT DAY HEALTH CARE CENTER**
*Provider ID: 404183*
12250 CROSTHWAITE CIR
POWAY, CA 92064
*Phone: (858) 748-5044*
*Fax: (858) 748-5405*
*After Hours Phone: (858) 748-5044*
*Accepting New Patients: No*
*License Number: 60000822*
*NPI: 1568659977*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: N/A*

## SAN DIEGO

**CASA PACIFICA ADHCC**
*Provider ID: 417303*
1424 30TH ST STE C
SAN DIEGO, CA 92154
*Phone: (619) 424-8181*
*After Hours Phone: (619)*

# G. Community-Based Adult Services (CBAS) - Adult Day Services

*424-8181*
*Accepting New Patients: No*
*NPI: 1609920305*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: www.casa- pacifica.com*

**LEGACY CARE ADHC CBAS**
*Provider ID: 705308*
11239 CAMINO RUIZ STE A
SAN DIEGO, CA 92126
*Phone: (858) 348-4074*
*Fax: (858) 397-2151*
*After Hours Phone: (858) 348-4074*
*Accepting New Patients: No*
*Hours: M-F 8AM-5PM*
*License Number: 550009443*
*NPI: 1164298337*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: WWW.LEGACYADHC.COM*

**LOVING CARE ADHC**
*Provider ID: 419961*
2565 CAMINO DEL RIO S STE 201
SAN DIEGO, CA 92108
*Phone: (619) 718-9777*
*Fax: (619) 569-2855*
*After Hours Phone: (619) 718-9777*
*Accepting New Patients: No*
*Hours: SU-SA 8:30AM-4PM*
*NPI: 1346455961*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Medi-Cal: Y*
*Website: www.lovingcareadhc.com*

**SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE**
*Provider ID: 539018*
4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
*Phone: (858) 244-4555*
*Fax: (858) 724-3302*
*After Hours Phone: (858) 244-4555*
*Accepting New Patients: No*
*Site Languages(s) Spoken: Vietnamese, Mandarin, Spanish*
*Hours: M-F 8AM-5PM*
*License Number: 550005837*
*NPI: 1396201828*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: Y*
*If Facility has completed cultural competence training?:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: Y*
*Medi-Cal: Y*
*Website: Sandiegofamilycircle.com*

# G. Community-Based Adult Services (CBAS) - Adult Day Services

## SAN MARCOS

**AMERICARE ADULT DAY HEALTH CARE CENTER**

*Provider ID: 420060*

340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069

*Phone: (760) 682-2424*

*Fax: (760) 471-5104*

*After Hours Phone: (760) 682-2424*

*Accepting New Patients: No*

*License Number: 060000832*

*NPI: 1528271186*

*Accessibility: CONTACT PROVIDER*

*American Sign Language (ASL): N*

*Language line interpreter services: N*

*If Facility has completed cultural competence training?:* N

*Facility has access to skilled medical interpreters on site?: N*

*Interpreter Non-English Languages: N*

*Medi-Cal: Y*

*Website: www.americareadhc.com*

# H. County In-Home Support Services (IHSS)

**SAN DIEGO**

**AGING & INDEPENDENCE SERVICES**

*Specialty: Case Management*

5560 OVERLAND AVE
SAN DIEGO, CA 92123

*Phone: (858) 495-5885*

*License Number: 1710308986*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:00PM*

*Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html*

# I. Mental Health Directory

## ALPINE

**TORRES, RANDALL**
*Provider Gender: Male*
*License Number: PSY31823*
*NPI: 1871696435*
*Provider English Spoken: Y*
*Cultural Competency: N*
RANDALL P TORRES
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## CAMPO

**CASTLEBERRY, DANI**
*Provider Gender: Female*
*License Number: LCS95022*
*NPI: 1053706853*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DANI E CASTLEBERRY
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
*Phone: (619) 662-4100*
*Fax: (619) 824-9071*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## CHULA VISTA

**BAYLON, ALDO**
*Provider Gender: Male*
*License Number: PSY29904*
*NPI: 1649429150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ALDO BAYLON
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 14\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-4PM*

**CASTLEBERRY, DANI**
*Provider Gender: Female*
*License Number: LCS95022*
*NPI: 1053706853*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DANI E CASTLEBERRY
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 240-7825*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CELAYA, PATRICIA**
*Provider Gender: Female*
*License Number: PSY33233*
*NPI: 1952656902*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
PATRICIA E CELAYA
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*

**GOULD, HILARY**
*Provider Gender: Female*
*License Number: PSY31088*
*NPI: 1104297696*
*Provider English Spoken: Y*
*Cultural Competency: N*
HILARY GOULD
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**JUAREZ, AMERICA**
*Provider Gender: Female*
*License Number: LCS92516*
*NPI: 1386281541*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMERICA P JUAREZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KURZ, TROY**
*Provider Gender: Male*
*License Number: A157190*
*NPI: 1154862357*
*Provider English Spoken: Y*
*Cultural Competency: N*
TROY L KURZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-6941*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*
*Cultural Competency: N*
LAWRENCE T MALAK
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
678 THIRD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SHIELDS, SEBASTIAN**
*Provider Gender: Male*
*License Number: MFC124495*
*NPI: 1558895342*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SEBASTIAN L SHIELDS
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*

# I. Mental Health Directory

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
678 THIRD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-4PM*

**WIJAYARATNE, IMANIE**
*Provider Gender: Female*
*License Number: PSY25044*
*NPI: 1932358355*
*Provider English Spoken: Y*
*Cultural Competency: N*
IMANIE S WIJAYARATNE
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 245-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## CMP PENDLETON

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
517 N HORNE ST
CMP PENDLETON, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
818 PIER VIEW WAY
CMP PENDLETON, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
818 PIER VIEW WAY
CMP PENDLETON, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
517 N HORNE ST
CMP PENDLETON, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## EL CAJON

**ARAIZA, ERNESTINA**
*Provider Gender: Female*
*License Number: PSY32549*
*NPI: 1568608636*
*Provider English Spoken: Y*
*Cultural Competency: N*
ERNESTINA ARAIZA

875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CRUZ, GUADALUPE**
*Provider Gender: Male*
*License Number: LCS101900*
*NPI: 1649727942*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
GUADALUPE A CRUZ
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KAHLY, BROOKE**
*Provider Gender: Female*
*License Number: LCS84367*
*NPI: 1649833120*
*Provider English Spoken: Y*
*Cultural Competency: N*
BROOKE N KAHLY
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Farsi, Italian, Japanese, Mandarin, Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LUCEY, MEGHAN**
*Provider Gender: Female*
*License Number: LCS122372*
*NPI: 1265105415*
*Provider English Spoken: Y*
*Cultural Competency: N*
MEGHAN F LUCEY
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Italian, Chinese, Farsi, Mandarin, Arabic, Japanese*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MAXWELL-JUNGE, MELISSA**
*Provider Gender: Female*
*License Number: LCS90791*
*NPI: 1275182826*
*Provider English Spoken: Y*
*Cultural Competency: N*

MELISSA K MAXWELL-JUNGE
215 W MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 667-6125*
*Fax: (619) 590-9036*
*After Hours Phone: (619) 667-6125*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SADDA, REEM**
*Provider Gender: Female*
*License Number: A163129*
*NPI: 1871921833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
REEM J SADDA
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**WEAVER, AMANDA**
*Provider Gender: Female*
*License Number: MFC105361*
*NPI: 1174266423*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMANDA R WEAVER
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WHEELER, KIM**
*Provider Gender: Female*
*License Number: PSY34237*
*NPI: 1700577434*
*Provider English Spoken: Y*
*Cultural Competency: N*
KIM N WHEELER
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 785-3356*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 11\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## ENCINITAS

**GARCIA, ROSEMARIE**
*Provider Gender: Female*
*License Number: MFC123590*
*NPI: 1710410980*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROSEMARIE C GARCIA
1130 2ND ST
ENCINITAS, CA 92024

# I. Mental Health Directory

*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GOMEZ, JUANITA**
*Provider Gender: Female*
*License Number: PSY27439*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JUANITA GOMEZ
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LOPEZ, JOANNA**
*Provider Gender: Female*
*License Number: MFC50381*
*NPI: 1275664385*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOANNA M LOPEZ
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ROJAS, LEONOR**
*Provider Gender: Female*
*License Number: LCS124195*
*NPI: 1346728862*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LEONOR ROJAS
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## ESCONDIDO

**ARLINGHAUS, RENE**
*Provider Gender: Female*
*License Number: LCS80909*
*NPI: 1568973964*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENE M ARLINGHAUS

704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BECKMAN, KARI**
*Provider Gender: Female*
*License Number: LCS121629*
*NPI: 1861243271*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
KARI L BECKMAN
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CASTILLO, TRINIDAD**
*Provider Gender: Female*
*License Number: LCS116651*
*NPI: 1508472911*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
TRINIDAD J CASTILLO
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*Fax: (360) 462-2747*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CASTILLO, TRINIDAD**
*Provider Gender: Female*
*License Number: LCS116651*
*NPI: 1508472911*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
TRINIDAD J CASTILLO
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FU, KATHERINE**

*Provider Gender: Female*
*License Number: A187562*
*NPI: 1356877807*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE FU
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KAHLY, BROOKE**
*Provider Gender: Female*
*License Number: LCS84367*
*NPI: 1649833120*
*Provider English Spoken: Y*
*Cultural Competency: N*
BROOKE N KAHLY
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LIM, STEVE**
*Provider Gender: Male*
*License Number: LCS122638*
*NPI: 1194590091*
*Provider English Spoken: Y*
*Cultural Competency: N*
STEVE S LIM
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (360) 462-2745*
*After Hours Phone: (760) 520-8100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Farsi, French, Urdu, Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**MARTINEZ, NORAYMA**
*Provider Gender: Female*
*License Number: LCS100019*
*NPI: 1669808267*
*Provider English Spoken: Y*
*Cultural Competency: N*
NORAYMA MARTINEZ
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# I. Mental Health Directory

**MCGHEE, JULEA**
*Provider Gender: Female*
*License Number: A95593*
*NPI: 1417016304*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JULEA L MCGHEE
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MORAN, CHRISTINA**
*Provider Gender: Female*
*License Number: PSY25925*
*NPI: 1063661577*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINA M MORAN
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\18*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PENT, MICHELLE**
*Provider Gender: Female*
*License Number: C55145*
*NPI: 1275627655*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE P PENT
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PRASAD, AMITHA**
*Provider Gender: Female*
*License Number: A158657*
*NPI: 1821436882*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMITHA PRASAD
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 294-9270*
*Fax: (760) 294-9268*
*After Hours Phone: (760) 294-9270*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*

**RIOS, SIERRA**
*Provider Gender: Female*
*License Number: LCS91970*
*NPI: 1942746128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SIERRA K RIOS
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*Fax: (360) 462-2752*
*After Hours Phone: (760) 520-8340*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIVERA, MELISSA**
*Provider Gender: Female*
*License Number: MFC131285*
*NPI: 1184171720*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MELISSA N RIVERA
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STONE, CALVIN**
*Provider Gender: Male*
*License Number: 20A18127*
*NPI: 1275995870*
*Provider English Spoken: Y*
*Cultural Competency: N*
CALVIN T STONE
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TEETER-WITT, ALYSSA**
*Provider Gender: Female*
*License Number: PSY31075*
*NPI: 1932308442*
*Provider English Spoken: Y*
*Cultural Competency: N*
ALYSSA TEETER-WITT
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# I. Mental Health Directory

*Accessibility: CONTACT PROVIDER*

**TEETER-WITT, ALYSSA**
*Provider Gender: Female*
*License Number: PSY31075*
*NPI: 1932308442*
*Provider English Spoken: Y*
*Cultural Competency: N*
ALYSSA TEETER-WITT
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*Fax: (858) 633-4693*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**VENNAM, VAMSI KRISHNA**
*Provider Gender: Male*
*License Number: 20A19415*
*NPI: 1679070569*
*Provider English Spoken: Y*
*Cultural Competency: N*
VAMSI KRISHNA K VENNAM
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**VERCHER, ROSHON**
*Provider Gender: Male*
*License Number: LCS101363*
*NPI: 1316611288*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROSHON VERCHER
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## FALLBROOK

**GILROY, LAURA**
*Provider Gender: Female*
*License Number: LCS27123*
*NPI: 1437427978*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LAURA L GILROY
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 7\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# I. Mental Health Directory

**MAGEE, ANNA**
*Provider Gender: Female*
*License Number: LCS107407*
*NPI: 1194234609*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANNA M MAGEE
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MAURIZ, GRAZIANO**
*Provider Gender: Male*
*License Number: LCS78433*
*NPI: 1962654327*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
GRAZIANO M MAURIZ
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM TU-F 8:30AM-5PM*

**MCAULEY, ROBERT**
*Provider Gender: Male*
*License Number: G23317*
*NPI: 1194881888*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT A MCAULEY
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4730*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4730*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MILES, RENEE**
*Provider Gender: Female*
*License Number: LCS70204*
*NPI: 1053763623*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENEE S MILES
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WAGONER, KENYADA**
*Provider Gender: Female*

*License Number: LCS114731*
*NPI: 1760172688*
*Provider English Spoken: Y*
*Cultural Competency: N*
KENYADA M WAGONER
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 11\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## IMPERIAL BEACH

**BENAVIDES MARTINEZ, CARIDAD**
*Provider Gender: Female*
*License Number: A180705*
*NPI: 1265995757*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARIDAD BENAVIDES MARTINEZ
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*

**WALSH, EMILY**
*Provider Gender: Female*
*License Number: MFC141158*
*NPI: 1134769490*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
EMILY A WALSH
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## LA JOLLA

**BACANI, AMY**
*Provider Gender: Female*
*License Number: MFC39634*
*NPI: 1073586863*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMY D BACANI
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BOOTH, CHRISTOPHER**
*Provider Gender: Male*
*License Number: PSY26073*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER R BOOTH
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BOOTH, CHRISTOPHER**
*Provider Gender: Male*
*License Number: PSY26073*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER R BOOTH
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BOUTELLE, KERRI**
*Provider Gender: Male*
*License Number: PSY21823*
*NPI: 1780620906*
*Provider English Spoken: Y*
*Cultural Competency: N*
KERRI N BOUTELLE
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BOUTELLE, KERRI**
*Provider Gender: Male*
*License Number: PSY21823*
*NPI: 1780620906*
*Provider English Spoken: Y*
*Cultural Competency: N*
KERRI N BOUTELLE
8950 VILLA LA JOLLA DR STE C212
LA JOLLA, CA 92037
*Phone: (858) 246-1654*
*After Hours Phone: (858) 246-1654*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# I. Mental Health Directory

**BOUTELLE, KERRI**
*Provider Gender: Male*
*License Number: PSY21823*
*NPI: 1780620906*
*Provider English Spoken: Y*
*Cultural Competency: N*
KERRI N BOUTELLE
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHESHER, NICHOLAS**
*Provider Gender: Male*
*License Number: PSY29290*
*NPI: 1124539697*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICHOLAS J CHESHER
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRANDAL, BRENT**
*Provider Gender: Male*
*License Number: PSY26294*
*NPI: 1588739452*
*Provider English Spoken: Y*
*Cultural Competency: N*
BRENT R CRANDAL
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DHILLON, RACHEL**
*Provider Gender: Female*
*License Number: A178513*
*NPI: 1992281026*
*Provider English Spoken: Y*
*Cultural Competency: N*
RACHEL E DHILLON
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 554-1212*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DUARTE, KRISTEN**
*Provider Gender: Female*
*License Number: PSY31227*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN L DUARTE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DUARTE, KRISTEN**
*Provider Gender: Female*
*License Number: PSY31227*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN L DUARTE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**EGAN, KAITLYN**
*Provider Gender: Female*
*License Number: PSY32214*
*NPI: 1629653860*
*Provider English Spoken: Y*
*Cultural Competency: N*
KAITLYN N EGAN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**EICHEN, DAWN**
*Provider Gender: Female*
*License Number: PSY27823*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
DAWN M EICHEN
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**EICHEN, DAWN**
*Provider Gender: Female*
*License Number: PSY27823*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
DAWN M EICHEN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**EICHEN, DAWN**
*Provider Gender: Female*
*License Number: PSY27823*
*NPI: 1861043366*
*Provider English Spoken: Y*
*Cultural Competency: N*
DAWN M EICHEN
8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
*Phone: (858) 246-1654*
*Fax: (858) 246-3181*
*After Hours Phone: (858) 246-1654*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ELLEDGE, LINDSAY**
*Provider Gender: Female*
*License Number: LCS96136*
*NPI: 1619428828*
*Provider English Spoken: Y*
*Cultural Competency: N*
LINDSAY E ELLEDGE
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FINN, DAPHNA**
*Provider Gender: Female*
*License Number: A152291*
*NPI: 1639522725*
*Provider English Spoken: Y*
*Cultural Competency: N*
DAPHNA M FINN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**HENDRIE, KYLE**
*Provider Gender: Male*
*License Number: 20A21374*
*NPI: 1720549827*
*Provider English Spoken: Y*
*Cultural Competency: N*
KYLE A HENDRIE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HOLMBERG, CARRIE**
*Provider Gender: Female*
*License Number: A122061*
*NPI: 1164714143*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARRIE HOLMBERG
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KHAFAJA, MOHAMAD**
*Provider Gender: Male*
*License Number: A115892*
*NPI: 1780867119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
MOHAMAD H KHAFAJA
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KOHLI, KANCHAN**
*Provider Gender: Female*
*License Number: C183282*
*NPI: 1235485343*
*Provider English Spoken: Y*
*Cultural Competency: N*
KANCHAN K KOHLI
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LASSWELL, EVE**
*Provider Gender: Female*
*License Number: PSY30220*
*NPI: 1013483635*
*Provider English Spoken: Y*
*Cultural Competency: N*
EVE N LASSWELL
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*

**LEDBETTER, ALEX**
*Provider Gender: Male*
*License Number: 20A20454*
*NPI: 1073017315*
*Provider English Spoken: Y*
*Cultural Competency: N*
ALEX W LEDBETTER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LEE, DAVID**
*Provider Gender: Male*
*License Number: A124329*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
DAVID J LEE
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*

**MAXWELL, BENJAMIN**
*Provider Gender: Male*
*License Number: A108124*
*NPI: 1740415926*
*Provider English Spoken: Y*
*Cultural Competency: N*
BENJAMIN K MAXWELL
8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (858) 534-8019*
*Fax: (858) 534-6727*
*After Hours Phone: (858) 534-8019*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**MENDEZ, ANDRES**
*Provider Gender: Male*
*License Number: PSY28907*
*NPI: 1841482692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ANDRES G MENDEZ
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MITCHELL, NORA**
*Provider Gender: Female*
*License Number: LCS88855*
*NPI: 1245607043*
*Provider English Spoken: Y*
*Cultural Competency: N*
NORA K MITCHELL
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MOORE, SHAVON**
*Provider Gender: Female*
*License Number: A152789*
*NPI: 1053682773*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHAVON C MOORE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

# I. Mental Health Directory

**MOORE, SHAVON**
*Provider Gender: Female*
*License Number: A152789*
*NPI: 1053682773*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHAVON C MOORE
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 826-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 826-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 497-6673*
*After Hours Phone: (619) 497-6673*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PELHAM, WILLIAM**
*Provider Gender: Male*
*License Number: PSY33091*

*NPI: 1306629399*
*Provider English Spoken: Y*
*Cultural Competency: N*
WILLIAM E PELHAM
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**QAYOUMI, WALI**
*Provider Gender: Male*
*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
*Phone: (619) 284-3746*
*Fax: (888) 579-8781*
*After Hours Phone: (619) 284-3746*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**QAYOUMI, WALI**
*Provider Gender: Male*
*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
*Phone: (858) 822-5881*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 822-5881*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REED, KRISTIE**
*Provider Gender: Female*
*License Number: PSY30934*
*NPI: 1679869556*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTIE L REED
8950 VILLA LA JOLLA DR STE C212
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REED, KRISTIE**
*Provider Gender: Female*
*License Number: PSY30934*
*NPI: 1679869556*
*Provider English Spoken: Y*

*Cultural Competency: N*
KRISTIE L REED
3344 N TORREY PINES CT
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARLA G RICHARD
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARLA G RICHARD
9300 MEDIAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHNEEBERGER, ANDRES**
*Provider Gender: Male*
*License Number: C175502*
*NPI: 1184867376*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANDRES R SCHNEEBERGER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TARLE, STEPHANIE**
*Provider Gender: Female*
*License Number: PSY32155*
*NPI: 1659920403*
*Provider English Spoken: Y*
*Cultural Competency: N*
STEPHANIE J TARLE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TARVER, LESLIE**
*Provider Gender: Female*
*License Number: A169181*
*NPI: 1811300957*
*Provider English Spoken: Y*
*Cultural Competency: N*
LESLIE B TARVER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**THOMAS, KELSEY**
*Provider Gender: Female*
*License Number: PSY29738*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
KELSEY R THOMAS
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**THOMAS, KELSEY**
*Provider Gender: Female*
*License Number: PSY29738*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
KELSEY R THOMAS
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WISHNEK, HANNAH**
*Provider Gender: Female*
*License Number: LCS105699*
*NPI: 1578012043*
*Provider English Spoken: Y*
*Cultural Competency: N*
HANNAH K WISHNEK
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ZLATAR, ZVINKA**
*Provider Gender: Female*
*License Number: PSY26230*
*NPI: 1497139059*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ZVINKA Z ZLATAR
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## NATIONAL CITY

**CHOI, MIN HU**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN HU H CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**CHOI, MIN HU**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN HU H CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-6PM*

**LAD, NIKISHA**
*Provider Gender: Female*
*License Number: LCS120676*
*NPI: 1942857107*
*Provider English Spoken: Y*
*Cultural Competency: N*
NIKISHA J LAD
2400 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM*
*M-F 8AM-5PM*

**SACHS, MELISSA**
*Provider Gender: Female*
*License Number: LCS76968*
*NPI: 1649760356*
*Provider English Spoken: Y*
*Cultural Competency: N*
MELISSA R SACHS
2400 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F*
*8:30AM-5:30PM*
*SA 8AM-2:30PM*

**SILVEY, CHRISTOPHER**
*Provider Gender: Male*
*License Number: LCS85942*
*NPI: 1932793502*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER J SILVEY
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SIMMONS IV, ROBERT**
*Provider Gender: Male*
*License Number: LCS117787*
*NPI: 1689269631*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT M SIMMONS IV
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-9853*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM*
*F 8AM-5PM*

# I. Mental Health Directory

**SIMMONS IV, ROBERT**
*Provider Gender: Male*
*License Number: LCS117787*
*NPI: 1689269631*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT M SIMMONS IV
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-9853*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

## OCEANSIDE

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Chinese, Farsi*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CHALMERS, VIRGINIA**
*Provider Gender: Female*
*License Number: LCS28053*
*NPI: 1265613715*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
VIRGINIA C CHALMERS
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

*Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*

*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-7PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 4\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-7PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DOUGHERTY, CHRISTINE**
*Provider Gender: Female*
*License Number: LCS26686*
*NPI: 1003194960*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINE A DOUGHERTY
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DOUGHERTY, CHRISTINE**
*Provider Gender: Female*
*License Number: LCS26686*
*NPI: 1003194960*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINE A DOUGHERTY
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 8AM-4PM*

**DOUGHERTY, CHRISTINE**
*Provider Gender: Female*
*License Number: LCS26686*
*NPI: 1003194960*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINE A DOUGHERTY
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**JENSEN, BRIAN**
*Provider Gender: Male*
*License Number: PSY26041*
*NPI: 1518138049*
*Provider English Spoken: Y*
*Cultural Competency: N*
BRIAN M JENSEN
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRAPES, MICHAEL**
*Provider Gender: Male*
*License Number: PSY25077*
*NPI: 1215233028*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHAEL B KRAPES
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# I. Mental Health Directory

*Accessibility: CONTACT PROVIDER*

**MONTEZ, REBECCA**
*Provider Gender: Female*
*License Number: LCS26869*
*NPI: 1396047809*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
REBECCA MONTEZ
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEVILLE, MARGARET**
*Provider Gender: Female*
*License Number: LCS82407*
*NPI: 1073682407*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARGARET R NEVILLE
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEVILLE, MARGARET**
*Provider Gender: Female*
*License Number: LCS82407*
*NPI: 1073682407*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARGARET R NEVILLE
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NEVILLE, MARGARET**
*Provider Gender: Female*
*License Number: LCS82407*
*NPI: 1073682407*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARGARET R NEVILLE
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ORTIZ, BEVERLY**
*Provider Gender: Female*
*License Number: MFC121355*
*NPI: 1760826572*

*Provider English Spoken: Y*
*Cultural Competency: N*
BEVERLY L ORTIZ
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (562) 264-6000*
*Fax: (760) 631-5000*
*After Hours Phone: (562) 264-6000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (562) 264-6000*
*Fax: (760) 631-5000*
*After Hours Phone: (562) 264-6000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (562) 264-6000*
*Fax: (760) 631-5000*
*After Hours Phone: (562) 264-6000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*

*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*

# I. Mental Health Directory

*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SONYA L SMITH
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SONYA L SMITH
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SMITH, SONYA**
*Provider Gender: Female*

# I. Mental Health Directory

*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SONYA L SMITH
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**WILSON, CARLENE**
*Provider Gender: Female*
*License Number: LCS74685*
*NPI: 1508327081*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARLENE WILSON
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WILSON, CARLENE**
*Provider Gender: Female*
*License Number: LCS74685*
*NPI: 1508327081*

*Provider English Spoken: Y*
*Cultural Competency: N*
CARLENE WILSON
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**WILSON, CARLENE**
*Provider Gender: Female*
*License Number: LCS74685*
*NPI: 1508327081*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARLENE WILSON
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## POWAY

**MODHWADIA, MAMTA**
*Provider Gender: Female*
*License Number: A113990*
*NPI: 1043353667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Gujarati*
*Cultural Competency: N*
MAMTA D MODHWADIA
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*Fax: (360) 462-2742*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 16\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

## SAN DIEGO

**ABERCROMBIE, SHERI**
*Provider Gender: Female*
*License Number: PSY18536*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHERI ABERCROMBIE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-4PM*

# I. Mental Health Directory

**ABERCROMBIE, SHERI**
*Provider Gender: Female*
*License Number: PSY18536*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHERI ABERCROMBIE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BANKS, SARAH**
*Provider Gender: Female*
*License Number: PSY30296*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
SARAH J BANKS
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BANKS, SARAH**
*Provider Gender: Female*
*License Number: PSY30296*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
SARAH J BANKS
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BANKS, SARAH**
*Provider Gender: Female*
*License Number: PSY30296*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
SARAH J BANKS
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR

# I. Mental Health Directory

350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BASS, GURGIANA**
*Provider Gender: Female*
*License Number: PSY24750*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
GURGIANA BASS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4:30PM*
*TU 8AM-12PM*
*W 8AM-4:30PM*
*TH 8AM-12PM*

**BASS, GURGIANA**
*Provider Gender: Female*
*License Number: PSY24750*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
GURGIANA BASS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BENAVIDES MARTINEZ, CARIDAD**
*Provider Gender: Female*
*License Number: A180705*
*NPI: 1265995757*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARIDAD BENAVIDES MARTINEZ
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-7:30PM*
*W 8AM-5PM*
*TH 8AM-7:30PM*
*F 8AM-5PM*
*SA 8AM-12PM*

**BREEDLOVE, AMANDA**
*Provider Gender: Female*
*License Number: MFC139230*
*NPI: 1316487119*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMANDA A BREEDLOVE
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BROWN, DARCIE**
*Provider Gender: Female*
*License Number: MFC119851*
*NPI: 1639796071*
*Provider English Spoken: Y*
*Cultural Competency: N*
DARCIE D BROWN
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CALLAGHAN, KATHRYN**
*Provider Gender: Female*
*License Number: MFC106901*
*NPI: 1558768812*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHRYN R CALLAGHAN
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CARINO DIOKNO, RHODA**
*Provider Gender: Female*
*License Number: PSY28073*
*NPI: 1629109483*
*Provider English Spoken: Y*
*Cultural Competency: N*
RHODA C CARINO DIOKNO
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CAZARES, DARIANA**
*Provider Gender: Female*
*License Number: LCS100887*
*NPI: 1609390665*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DARIANA CAZARES
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 7\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CEBALLOS, JACQUELINE**
*Provider Gender: Female*
*License Number: LCS110194*
*NPI: 1093350258*
*Provider English Spoken: Y*
*Cultural Competency: N*
JACQUELINE CEBALLOS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-9025*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-9025*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CEBALLOS, JACQUELINE**
*Provider Gender: Female*
*License Number: LCS110194*
*NPI: 1093350258*
*Provider English Spoken: Y*
*Cultural Competency: N*
JACQUELINE CEBALLOS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHESHER, NICHOLAS**
*Provider Gender: Male*
*License Number: PSY29290*
*NPI: 1124539697*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICHOLAS J CHESHER
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHOI, MIN HU**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN HU H CHOI
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**CIOBANU, COSMINA**
*Provider Gender: Female*
*License Number: A137628*
*NPI: 1285049932*
*Provider English Spoken: Y*
*Cultural Competency: N*
COSMINA S CIOBANU
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
*Phone: (858) 534-8019*
*After Hours Phone: (858) 534-8019*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CIOBANU, COSMINA**
*Provider Gender: Female*
*License Number: A137628*
*NPI: 1285049932*
*Provider English Spoken: Y*
*Cultural Competency: N*
COSMINA S CIOBANU
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*Fax: (858) 966-8164*
*After Hours Phone: (858) 576-1700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CIOBANU, COSMINA**
*Provider Gender: Female*
*License Number: A137628*
*NPI: 1285049932*
*Provider English Spoken: Y*
*Cultural Competency: N*
COSMINA S CIOBANU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*Fax: (858) 966-8164*
*After Hours Phone: (858) 576-1700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# I. Mental Health Directory

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CIOBANU, COSMINA**
*Provider Gender: Female*
*License Number: A137628*
*NPI: 1285049932*
*Provider English Spoken: Y*
*Cultural Competency: N*
COSMINA S CIOBANU
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*Fax: (858) 966-8164*
*After Hours Phone: (858) 576-1700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CLEMENT, LUIS**
*Provider Gender: Male*
*License Number: PSY28534*
*NPI: 1235364712*
*Provider English Spoken: Y*
*Cultural Competency: N*
LUIS F CLEMENT
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CRISOL, CAROLINE**
*Provider Gender: Female*
*License Number: MFC88616*
*NPI: 1962663617*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CAROLINE M CRISOL
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 662-4158*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DEACON, CASSIE**
*Provider Gender: Female*
*License Number: LCS94105*
*NPI: 1720452998*
*Provider English Spoken: Y*
*Cultural Competency: N*
CASSIE C DEACON
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**DEACON, CASSIE**
*Provider Gender: Female*
*License Number: LCS94105*
*NPI: 1720452998*
*Provider English Spoken: Y*
*Cultural Competency: N*
CASSIE C DEACON
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**DIAZ, JAENAI**
*Provider Gender: Female*
*License Number: LCS80689*
*NPI: 1508241811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JAENAI DIAZ
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DIAZ, JAENAI**
*Provider Gender: Female*
*License Number: LCS80689*
*NPI: 1508241811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JAENAI DIAZ
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DOSS, KATIE**
*Provider Gender: Female*
*License Number: LCS112693*
*NPI: 1134825979*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATIE L DOSS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DOSS, KATIE**
*Provider Gender: Female*
*License Number: LCS112693*
*NPI: 1134825979*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATIE L DOSS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DSOUZA, NICOLE**
*Provider Gender: Male*
*License Number: LCS101958*
*NPI: 1225462799*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE A DSOUZA
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DUNN-PIRIO, ANASTASIE**
*Provider Gender: Female*
*License Number: A157861*
*NPI: 1700177136*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANASTASIE M DUNN-PIRIO
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-3500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ESPERANZA, MELIZZA**
*Provider Gender: Female*
*License Number: LCS100093*
*NPI: 1184763005*
*Provider English Spoken: Y*
*Cultural Competency: N*
MELIZZA R ESPERANZA
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**ESTAVILLO, SAUL**
*Provider Gender: Male*
*License Number: MFC102610*
*NPI: 1528330073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SAUL J ESTAVILLO
286 EUCLID AVE STE 309
SAN DIEGO, CA 92114
*Phone: (619) 527-7390*
*Fax: (619) 527-7394*
*After Hours Phone: (619) 527-7390*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ESTAVILLO, SAUL**
*Provider Gender: Male*
*License Number: MFC102610*
*NPI: 1528330073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SAUL J ESTAVILLO
3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154
*Phone: (619) 662-4161*
*Fax: (619) 662-4109*
*After Hours Phone: (619) 662-4161*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FIRESTONE, MICHELLE**
*Provider Gender: Female*
*License Number: PSY33081*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE E FIRESTONE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FIRESTONE, MICHELLE**
*Provider Gender: Female*
*License Number: PSY33081*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE E FIRESTONE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FORZANI, CHRISTINA**
*Provider Gender: Female*
*License Number: PSY25710*
*NPI: 1902939630*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINA A FORZANI
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FRANK, GUIDO**
*Provider Gender: Male*
*License Number: A86429*
*NPI: 1578608733*
*Provider English Spoken: Y*
*Cultural Competency: N*
GUIDO K FRANK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8145*
*Fax: (858) 966-8154*
*After Hours Phone: (858) 966-8145*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FRY, LIANE**
*Provider Gender: Female*
*License Number: MFC42570*
*NPI: 1003110917*
*Provider English Spoken: Y*
*Cultural Competency: N*
LIANE M FRY
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 595-0258*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GARCIA, RICHARD**
*Provider Gender: Male*
*License Number: LCS28742*
*NPI: 1881198554*
*Provider English Spoken: Y*
*Cultural Competency: N*
RICHARD R GARCIA
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**GARCIA, JENNI**
*Provider Gender: Female*
*License Number: LPCC10346*
*NPI: 1437775863*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JENNI GARCIA
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GIAMONA, KRISTEN**
*Provider Gender: Female*
*License Number: PSY28419*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN M GIAMONA
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GIAMONA, KRISTEN**
*Provider Gender: Female*
*License Number: PSY28419*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN M GIAMONA
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GOMEZ, JUANITA**
*Provider Gender: Female*
*License Number: PSY27439*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JUANITA GOMEZ
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GULOTTA, SAMANTHA**
*Provider Gender: Female*
*License Number: MFC134199*
*NPI: 1790407732*
*Provider English Spoken: Y*
*Cultural Competency: N*
SAMANTHA L GULOTTA

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**HERNANDEZ, SILVIA**
*Provider Gender: Female*
*License Number: MFC51787*
*NPI: 1982821179*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SILVIA E HERNANDEZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**JOSHI, YASH**
*Provider Gender: Male*
*License Number: A147156*
*NPI: 1598151433*
*Provider English Spoken: Y*
*Cultural Competency: N*
YASH B JOSHI
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KHAFAJA, MOHAMAD**
*Provider Gender: Male*
*License Number: A115892*
*NPI: 1780867119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
MOHAMAD H KHAFAJA
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KHAFAJA, MOHAMAD**
*Provider Gender: Male*
*License Number: A115892*
*NPI: 1780867119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
MOHAMAD H KHAFAJA
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KHAMISA, SORAIYA**
*Provider Gender: Female*
*License Number: LCS81951*
*NPI: 1811254386*
*Provider English Spoken: Y*
*Cultural Competency: N*
SORAIYA N KHAMISA
4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KLIGIS, GABRIELLE**
*Provider Gender: Female*
*License Number: LCS125570*
*NPI: 1346802550*
*Provider English Spoken: Y*
*Cultural Competency: N*
GABRIELLE L KLIGIS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KLIGIS, GABRIELLE**
*Provider Gender: Female*
*License Number: LCS125570*
*NPI: 1346802550*
*Provider English Spoken: Y*
*Cultural Competency: N*
GABRIELLE L KLIGIS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KLUEMPER, NICOLE**
*Provider Gender: Female*
*License Number: PSY27064*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE S KLUEMPER
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*

*Min/Max Age: 2\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KLUEMPER, NICOLE**
*Provider Gender: Female*
*License Number: PSY27064*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE S KLUEMPER
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 2\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KOHLI, KANCHAN**
*Provider Gender: Female*
*License Number: C183282*
*NPI: 1235485343*
*Provider English Spoken: Y*
*Cultural Competency: N*
KANCHAN K KOHLI
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**
*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M KRUCKENBERG
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**
*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M KRUCKENBERG
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# I. Mental Health Directory

*PROVIDER*

**KRUCKENBERG, KATHERINE**
*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M KRUCKENBERG
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**
*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M KRUCKENBERG
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LAIDLAW, JOHN**
*Provider Gender: Male*
*License Number: MFC44560*
*NPI: 1689790073*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOHN K LAIDLAW
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LEBENSOHN CHIALVO, FLORENCIA**
*Provider Gender: Female*
*License Number: PSY30776*
*NPI: 1134788730*
*Provider English Spoken: Y*
*Cultural Competency: N*
FLORENCIA LEBENSOHN CHIALVO
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LEBENSOHN CHIALVO, FLORENCIA**

*Provider Gender: Female*
*License Number: PSY30776*
*NPI: 1134788730*
*Provider English Spoken: Y*
*Cultural Competency: N*
FLORENCIA LEBENSOHN CHIALVO
7910 FROST ST STE 350
SAN DIEGO, CA 92123
*Phone: (858) 496-4800*
*After Hours Phone: (858) 496-4800*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LEDBETTER, ALEX**
*Provider Gender: Male*
*License Number: 20A20454*
*NPI: 1073017315*
*Provider English Spoken: Y*
*Cultural Competency: N*
ALEX W LEDBETTER
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LEE, DAVID**
*Provider Gender: Male*
*License Number: A124329*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
DAVID J LEE
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LIU, TIMOTHY**
*Provider Gender: Male*
*License Number: A105535*
*NPI: 1720262801*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
TIMOTHY C LIU
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LIU, TIMOTHY**
*Provider Gender: Male*
*License Number: A105535*
*NPI: 1720262801*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
TIMOTHY C LIU
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LONGARDNER, KATHERINE**
*Provider Gender: Female*
*License Number: A137963*
*NPI: 1801215926*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M LONGARDNER
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*

*Cultural Competency: N*
LAWRENCE T MALAK
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 14\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*
*Cultural Competency: N*
LAWRENCE T MALAK
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

*Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MCCULLUM, TIFFANY**
*Provider Gender: Female*
*License Number: PSY29329*
*NPI: 1528306206*
*Provider English Spoken: Y*
*Cultural Competency: N*
TIFFANY MCCULLUM
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 428-7952*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 13\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MEIER, EMILY**
*Provider Gender: Female*
*License Number: Psy25266*
*NPI: 1255530572*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A MEIER
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MILLS, BRAD**
*Provider Gender: Male*
*License Number: LCS87409*
*NPI: 1598542813*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
BRAD A MILLS

# I. Mental Health Directory

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MONTOYA, JESSICA**
*Provider Gender: Female*
*License Number: PSY31647*
*NPI: 1003421256*
*Provider English Spoken: Y*
*Cultural Competency: N*
JESSICA L MONTOYA
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MOORE, SHAVON**
*Provider Gender: Female*
*License Number: A152789*
*NPI: 1053682773*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHAVON C MOORE
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MUHAMMAD, LAMA**
*Provider Gender: Female*
*License Number: A156500*
*NPI: 1558701623*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
LAMA MUHAMMAD
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MUHAMMAD, LAMA**
*Provider Gender: Female*
*License Number: A156500*
*NPI: 1558701623*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
LAMA MUHAMMAD
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NAKAMURA, TIFFANY**
*Provider Gender: Female*
*License Number: LPCC4383*
*NPI: 1356846349*
*Provider English Spoken: Y*
*Cultural Competency: N*
TIFFANY NAKAMURA
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
*Phone: (858) 534-8019*
*After Hours Phone: (858) 534-8019*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
410 DICKINSON ST STE 100
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**NING, GRACE**
*Provider Gender: Female*
*License Number: PSY27293*
*NPI: 1598911315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
GRACE J NING
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NING, GRACE**
*Provider Gender: Female*
*License Number: PSY27293*
*NPI: 1598911315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
GRACE J NING
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NORMAN, MARC**
*Provider Gender: Male*
*License Number: PSY16278*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARC A NORMAN
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2827*
*After Hours Phone: (619) 543-2827*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NORMAN, MARC**
*Provider Gender: Male*
*License Number: PSY16278*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARC A NORMAN
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ORFF, HENRY**
*Provider Gender: Male*
*License Number: PSY27099*

*NPI: 1144685215*
*Provider English Spoken: Y*
*Cultural Competency: N*
HENRY J ORFF
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (844) 757-5337*
*After Hours Phone: (844) 757-5337*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ORTIZ, MARIA**
*Provider Gender: Female*
*License Number: PSY30953*
*NPI: 1497980775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIA E ORTIZ
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 662-4158*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PASTORES, GLEN**
*Provider Gender: Male*
*License Number: MFC94162*
*NPI: 1609980234*
*Provider English Spoken: Y*
*Cultural Competency: N*
GLEN F PASTORES
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PATTON, MICHAEL**
*Provider Gender: Male*
*License Number: LCS18244*
*NPI: 1184756702*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHAEL A PATTON
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PRINCE, RENEE**
*Provider Gender: Female*
*License Number: PSY32206*
*NPI: 1467737908*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENEE K PRINCE
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**QAYOUMI, WALI**
*Provider Gender: Male*
*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (619) 294-3746*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 294-3746*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*

**RADOJEVIC, NATASHA**
*Provider Gender: Female*
*License Number: PSY28495*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
NATASHA RADOJEVIC
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*

**RADOJEVIC, NATASHA**
*Provider Gender: Female*
*License Number: PSY28495*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
NATASHA RADOJEVIC
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*

**REINEKE, ANKE**
*Provider Gender: Female*
*License Number: PSY22669*
*NPI: 1205154747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*

# I. Mental Health Directory

ANKE REINEKE
8060 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-6974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-6974*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REINEKE, ANKE**
*Provider Gender: Female*
*License Number: PSY22669*
*NPI: 1205154747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
ANKE REINEKE
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6974*
*Fax: (858) 966-6721*
*After Hours Phone: (858) 966-6974*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIBEIRO CALDAS DOMINGUES, ISABEL**
*Provider Gender: Female*
*License Number: A132160*
*NPI: 1023367216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
ISABEL A RIBEIRO CALDAS DOMINGUES
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARLA G RICHARD
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*

# I. Mental Health Directory

MARLA G RICHARD
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
6655 ALVARADO RD

# I. Mental Health Directory

SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RIVERA, KEVIN JOHN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN JOHN R RIVERA
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SACHS, MELISSA**
*Provider Gender: Female*
*License Number: LCS76968*
*NPI: 1649760356*
*Provider English Spoken: Y*
*Cultural Competency: N*
MELISSA R SACHS
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**SALO, STEPHANIE**
*Provider Gender: Female*
*License Number: PSY26290*
*NPI: 1477967784*
*Provider English Spoken: Y*
*Cultural Competency: N*
STEPHANIE P SALO
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 17\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SAWYER, CAROLYN**
*Provider Gender: Female*
*License Number: A149116*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
CAROLYN M SAWYER
3665 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
*Phone: (858) 966-5990*
*Fax: (858) 966-7508*
*After Hours Phone: (858) 966-5990*
*Website: N/A*

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SAWYER, CAROLYN**
*Provider Gender: Female*
*License Number: A149116*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
CAROLYN M SAWYER
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 246-0794*
*Fax: (858) 496-9257*
*After Hours Phone: (858) 246-0794*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SAWYER, CAROLYN**
*Provider Gender: Female*
*License Number: A149116*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
CAROLYN M SAWYER
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHELLINGER, KRISTON**
*Provider Gender: Female*
*License Number: PSY26313*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTON B SCHELLINGER
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (858) 246-1979*
*After Hours Phone: (858) 246-1979*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHELLINGER, KRISTON**
*Provider Gender: Female*
*License Number: PSY26313*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTON B SCHELLINGER
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHELLINGER, KRISTON**
*Provider Gender: Female*
*License Number: PSY26313*
*NPI: 1710234273*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTON B SCHELLINGER
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (858) 246-1979*
*After Hours Phone: (858) 246-1979*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHLOSSER, TARA**
*Provider Gender: Female*
*License Number: MFC107868*
*NPI: 1407220437*
*Provider English Spoken: Y*
*Cultural Competency: N*
TARA S SCHLOSSER
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SCHNEEBERGER, ANDRES**
*Provider Gender: Male*
*License Number: C175502*
*NPI: 1184867376*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANDRES R SCHNEEBERGER
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SERIO, TAYLOR**
*Provider Gender: Female*
*License Number: LCS107050*
*NPI: 1093217382*
*Provider English Spoken: Y*
*Cultural Competency: N*
TAYLOR L SERIO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SERIO, TAYLOR**
*Provider Gender: Female*
*License Number: LCS107050*
*NPI: 1093217382*

*Provider English Spoken: Y*
*Cultural Competency: N*
TAYLOR L SERIO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SHU, I WEI**
*Provider Gender: Male*
*License Number: A103813*
*NPI: 1992840144*
*Provider English Spoken: Y*
*Cultural Competency: N*
I WEI SHU
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 534-6200*
*Fax: (858) 534-6205*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SILVEY, CHRISTOPHER**
*Provider Gender: Male*
*License Number: LCS85942*
*NPI: 1932793502*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER J SILVEY
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (858) 578-4220*
*Fax: (858) 578-4417*
*After Hours Phone: (858) 578-4220*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SUAREZ, ROBERTO**
*Provider Gender: Male*
*License Number: MFC25098*
*NPI: 1386785160*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ROBERTO SUAREZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
6655 ALVARADO RD

# I. Mental Health Directory

SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SWEIGERT, JAMIE**
*Provider Gender: Female*
*License Number: LCS112304*
*NPI: 1396353595*
*Provider English Spoken: Y*
*Cultural Competency: N*
JAMIE L SWEIGERT
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TARLE, STEPHANIE**
*Provider Gender: Female*
*License Number: PSY32155*
*NPI: 1659920403*
*Provider English Spoken: Y*
*Cultural Competency: N*
STEPHANIE J TARLE
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**THACKABERRY, JESSICA**
*Provider Gender: Female*
*License Number: A128967*
*NPI: 1134478910*
*Provider English Spoken: Y*
*Cultural Competency: N*
JESSICA L THACKABERRY
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TILTON, PETER**
*Provider Gender: Male*
*License Number: G27781*
*NPI: 1538258694*
*Provider English Spoken: Y*
*Cultural Competency: N*
PETER A TILTON
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**TWAMLEY, ELIZABETH**
*Provider Gender: Female*
*License Number: PSY19150*
*NPI: 1700089141*
*Provider English Spoken: Y*
*Cultural Competency: N*
ELIZABETH W TWAMLEY
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM TH 8:30AM-9PM F 8:30AM-5PM*

**WEISSMAN, CORY**
*Provider Gender: Male*
*License Number: A174625*
*NPI: 1528720661*
*Provider English Spoken: Y*
*Cultural Competency: N*
CORY R WEISSMAN
16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*

# I. Mental Health Directory

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**WU, MICHELLE**
*Provider Gender: Female*
*License Number: A125139*
*NPI: 1043650088*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE L WU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8145*
*Fax: (858) 966-8164*
*After Hours Phone: (858) 966-8145*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**YAGUDAYEVA, RAISA**
*Provider Gender: Female*
*License Number: 20A14848*
*NPI: 1942555990*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
RAISA YAGUDAYEVA
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**YIDI, DIANA**
*Provider Gender: Female*
*License Number: LCS110300*
*NPI: 1194438663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DIANA L YIDI
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**ZIMMERMAN, JENNIFER**
*Provider Gender: Female*
*License Number: LCS28729*
*NPI: 1811449077*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER A ZIMMERMAN
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-9676*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-9676*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

*Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ZIMMERMAN, JENNIFER**
*Provider Gender: Female*
*License Number: LCS28729*
*NPI: 1811449077*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER A ZIMMERMAN
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## SAN MARCOS

**ALTAMIRANO, LEON**
*Provider Gender: Male*
*License Number: PSY23734*
*NPI: 1619271517*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LEON ALTAMIRANO
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ARIELLA, LYNDA**
*Provider Gender: Female*
*License Number: PSY19450*
*NPI: 1073518965*
*Provider English Spoken: Y*
*Cultural Competency: N*
LYNDA R ARIELLA
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\50*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CABREJOS, CLAUDIO**
*Provider Gender: Male*
*License Number: A71653*
*NPI: 1033133483*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
CLAUDIO O CABREJOS
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*

# I. Mental Health Directory

*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FLYNN, DANIELLE**
*Provider Gender: Female*
*License Number: PSY26184*
*NPI: 1477785137*
*Provider English Spoken: Y*
*Cultural Competency: N*
DANIELLE I FLYNN
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GEORGIEV, MARY-JO**
*Provider Gender: Female*
*License Number: PSY17954*
*NPI: 1518996875*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARY-JO GEORGIEV
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**IMAM, SYED**
*Provider Gender: Male*
*License Number: PSY27695*
*NPI: 1447428271*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
SYED IMAM
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 15\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MERGENTHALER, SIGRID**
*Provider Gender: Female*
*License Number: LCS123604*
*NPI: 1477759017*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
SIGRID F MERGENTHALER
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIVADENEYRA, KELLY**
*Provider Gender: Female*
*License Number: LCS122911*
*NPI: 1790242469*
*Provider English Spoken: Y*
*Cultural Competency: N*
KELLY RIVADENEYRA
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TONG, GARRICK**
*Provider Gender: Male*
*License Number: A102192*
*NPI: 1831361278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Cantonese*
*Cultural Competency: N*
GARRICK G TONG
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 4\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-5PM*

**TORRES, HECTOR**
*Provider Gender: Male*
*License Number: PSY13309*
*NPI: 1720265614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
HECTOR M TORRES
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WEBER, SARA**
*Provider Gender: Female*
*License Number: MFC121580*
*NPI: 1891856381*
*Provider English Spoken: Y*
*Cultural Competency: N*
SARA J WEBER
150 VALPREDA RD
SAN MARCOS, CA 92069

# I. Mental Health Directory

*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## SAN YSIDRO

**AGUILAR, JENNIFER**
*Provider Gender: Female*
*License Number: MFC101788*
*NPI: 1932474459*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER A AGUILAR
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BALTRUS, JUSTINE ANN**
*Provider Gender: Female*
*License Number: MFC132018*
*NPI: 1285040709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
JUSTINE ANN A BALTRUS
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRAWFORD-DAY, ANN**
*Provider Gender: Female*
*License Number: A166646*
*NPI: 1386149706*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ANN E CRAWFORD-DAY
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-2PM*

**DEPAOLO, AMANDA**
*Provider Gender: Female*
*License Number: LCS99056*
*NPI: 1215420138*

# I. Mental Health Directory

*Provider English Spoken: Y*
*Cultural Competency: N*
AMANDA L DEPAOLO
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FONTANA, LOUIS**
*Provider Gender: Male*
*License Number: G49072*
*NPI: 1780734343*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LOUIS A FONTANA
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**GONZALEZ-GARCIA, CAROLINA**
*Provider Gender: Female*
*License Number: MFC41111*
*NPI: 1215321955*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CAROLINA GONZALES GARCIA
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 600-4870*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**IBANEZ, BERENICE**
*Provider Gender: Female*
*License Number: PSY22080*
*NPI: 1740394386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
BERENICE B IBANEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**JENNINGS, AMY**

*Provider Gender: Female*
*License Number: LCS100075*
*NPI: 1609549161*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMY E JENNINGS
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**JIMENEZ, NANCY**
*Provider Gender: Female*
*License Number: MFC141209*
*NPI: 1568023596*
*Provider English Spoken: Y*
*Cultural Competency: N*
NANCY JIMENEZ
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LOPEZ, MARIBEL**
*Provider Gender: Female*
*License Number: LCS86171*
*NPI: 1669180600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIBEL, LOPEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**PETERSEN, KATE**
*Provider Gender: Female*
*License Number: MFC130200*
*NPI: 1598237281*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATE PETERSEN
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# I. Mental Health Directory

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TAPIA, ASHLEY**
*Provider Gender: Female*
*License Number: LCS118965*
*NPI: 1952821472*
*Provider English Spoken: Y*
*Cultural Competency: N*
ASHLEY TAPIA
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ZAYAS, MARIO**
*Provider Gender: Male*
*License Number: MFC111273*
*NPI: 1275943557*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIO E ZAYAS
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 6\21*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 9AM-7PM W-F 9AM-6PM*

## SANTEE

**MEAGHER, RAISHELLE**
*Provider Gender: Female*
*License Number: LCS109804*
*NPI: 1851821904*
*Provider English Spoken: Y*
*Cultural Competency: N*
RAISHELLE L MEAGHER
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## VALLEY CENTER

**PLASCENCIA, CINDY**
*Provider Gender: Female*
*License Number: MFC113536*
*NPI: 1952723736*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CINDY PLASCENCIA
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**VISTA**

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*

*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHONG, NUBIA**
*Provider Gender: Female*
*License Number: A147024*
*NPI: 1003202961*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
NUBIA A CHONG
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*

*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-8PM*
*W 9AM-7PM*
*TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu*
*TDD: U*
*Min/Max Age: 4\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-8PM*
*W 9AM-7PM*
*TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-7PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**CRUZ, VANESSA**
*Provider Gender: Female*
*License Number: LCS87166*
*NPI: 1285170662*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANESSA Y CRUZ
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 4\None*

# I. Mental Health Directory

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-7PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**DOUGHERTY, CHRISTINE**
*Provider Gender: Female*
*License Number: LCS26686*
*NPI: 1003194960*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINE A DOUGHERTY
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DOUGHERTY, CHRISTINE**
*Provider Gender: Female*
*License Number: LCS26686*
*NPI: 1003194960*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTINE A DOUGHERTY
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Telugu, Vietnamese, Tagalog*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**NEVILLE, MARGARET**
*Provider Gender: Female*
*License Number: LCS82407*
*NPI: 1073682407*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARGARET R NEVILLE
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Chinese, Lithuanian, Farsi, Spanish, Tagalog, Urdu, Vietnamese*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4PM*

**NEVILLE, MARGARET**
*Provider Gender: Female*
*License Number: LCS82407*
*NPI: 1073682407*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARGARET R NEVILLE
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (562) 264-6000*
*Fax: (760) 631-5000*
*After Hours Phone: (562) 264-6000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (562) 264-6000*
*Fax: (760) 631-5000*
*After Hours Phone: (562) 264-6000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760)*

# I. Mental Health Directory

*631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SONYA L SMITH
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SONYA L SMITH
1000 VALE TERRACE DR
VISTA, CA 92084

# I. Mental Health Directory

*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Chinese, Estonian, French, Hindi, Korean, Marathi, Farsi, Tagalog, Telugu, Vietnamese*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STEINBERG, JOEL**
*Provider Gender: Male*
*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Chinese, Estonian, French, Hindi, Korean, Marathi, Farsi, Tagalog, Telugu, Vietnamese*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*

**STEINBERG, JOEL**
*Provider Gender: Male*

# I. Mental Health Directory

*License Number: C41789*
*NPI: 1356566848*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOEL S STEINBERG
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**WILSON, CARLENE**
*Provider Gender: Female*
*License Number: LCS74685*
*NPI: 1508327081*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARLENE WILSON
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**WILSON, CARLENE**
*Provider Gender: Female*
*License Number: LCS74685*
*NPI: 1508327081*
*Provider English Spoken: Y*
*Cultural Competency: N*
CARLENE WILSON
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# J. Vision Provider Directory - Eye & Vision Services

## ALPINE

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*

# J. Vision Provider Directory - Eye & Vision Services

*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

# J. Vision Provider Directory - Eye & Vision Services

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

# J. Vision Provider Directory - Eye & Vision Services

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

## BONITA

**CHA, DANIEL, OD**
*Provider Gender: Male*
*License Number: 14779*
*NPI: 1386078020*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYECARE OF BONITA
4502 BONITA RD
BONITA, CA 91902
*Phone: (619) 479-7334*
*Fax: (619) 475-3456*
*After Hours Phone: (619) 479-7334*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-6:30PM*
*W 8AM-6PM*
*TH 8AM-1PM*
*F 8AM-6PM*
*SA 9AM-2PM*

## CARLSBAD

**HO, TRAM, OD**
*Provider Gender: Female*
*License Number: 13485*
*NPI: 1245464460*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
EYE STYLE OPTOMETRY
5814 VAN ALLEN WAY STE 146
CARLSBAD, CA 92008
*Phone: (760) 606-2020*
*After Hours Phone: (760) 606-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: TU 9AM-5PM*
*W 10AM-6PM*
*TH 9AM-5PM*
*F 8AM-4PM*
*SA 9AM-3PM*

**RAMOLIA, ANIKA, OD**
*Provider Gender: Female*
*License Number: 13802*
*NPI: 1205084787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: Y*
BEACON OPTOMETRY
7720 EL CAMINO REAL STE G
CARLSBAD, CA 92009
*Phone: (760) 278-8068*
*Fax: (760) 278-3539*
*After Hours Phone: (760) 278-8068*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 8:30AM-5PM*
*TH 10:30AM-7PM*
*F 8:30AM-5PM*

**THAN, CINDY, OD**
*Provider Gender: Female*
*License Number: 13602*
*NPI: 1316103633*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
PIER VISION OPTOMETRY
2525 EL CAMINO REAL STE 125
CARLSBAD, CA 92008
*Phone: (760) 912-5552*
*Fax: (619) 996-0700*
*After Hours Phone: (760) 912-5552*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: TU-F 11AM-6PM*

*SA 11AM-6PM*

## CHULA VISTA

**CASTILLEJOS, DAVID, MD**
*Provider Gender: Male*
*License Number: A44482*
*NPI: 1558446401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish, Tagalog*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**CASTILLEJOS, MARIA, MD**
*Provider Gender: Female*
*License Number: A37652*
*NPI: 1043395098*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**CHAN, KWOK FUNG, OD**
*Provider Gender: Male*
*License Number: 35087*
*NPI: 1407508385*
*Provider English Spoken: Y*
*Cultural Competency: Y*
VILLA OPTOMETRY INC
523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
*Phone: (619) 482-2020*
*Fax: (619) 482-2671*
*After Hours Phone: (619) 482-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 11AM-6PM*
*TH-F 9AM-6PM*

**CHISHOLM, KAREN, OD**
*License Number: 35450*
*NPI: 1568155190*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE

# J. Vision Provider Directory - Eye & Vision Services

101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**HUANG, PETER, OD**
*Provider Gender: Male*
*License Number: 11659*
*NPI: 1639100522*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910
*Phone: (619) 422-0139*
*Fax: (619) 422-0066*
*After Hours Phone: (619) 422-0139*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 8AM-4PM*
*SA 9AM-2PM*

**KALRA, ANKUR, OD**
*Provider Gender: Male*
*License Number: 11898*
*NPI: 1124195789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**KEDDINGTON, JOAN, OD**
*Provider Gender: Female*
*License Number: 6263*
*NPI: 1992872691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**KIM, JENNY, OD**
*Provider Gender: Female*
*License Number: 35831*
*NPI: 1497588362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**KING, MARY, OD**
*Provider Gender: Female*
*License Number: 13711*
*NPI: 1578792107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**MASCARENO, EFRAIN, OD**
*Provider Gender: Male*
*License Number: 10906*
*NPI: 1457507279*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CLEAR VISION OPTOMETRY DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-2020*
*Fax: (866) 254-5707*
*After Hours Phone: (619) 427-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 9AM-6PM*

# J. Vision Provider Directory - Eye & Vision Services

*F 9AM-5PM*

**NGUYEN, TRACY, OD**
*Provider Gender: Female*
*License Number: 10859*
*NPI: 1265596621*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ESSENTIAL EYECARE OPTOMETRY
345 F ST STE 240
CHULA VISTA, CA 91910
*Phone: (858) 467-0655*
*Fax: (619) 425-9797*
*After Hours Phone: (858) 467-0655*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 10AM-3PM*

**NGUYEN, THERESA, OD**
*Provider Gender: Female*
*License Number: 35530TLG*
*NPI: 1609555713*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**OSSAREH, DIBA, OD**
*Provider Gender: Female*
*License Number: 35830*
*NPI: 1235816067*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**PHAM, NINA, OD**
*Provider Gender: Female*
*License Number: 35360*
*NPI: 1598403867*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*

# J. Vision Provider Directory - Eye & Vision Services

*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**PLUCINIK, STANLEY, OD**
*Provider Gender: Male*
*License Number: 35255*
*NPI: 1124751417*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**SCOVILL, ALEXANDRA, OD**
*Provider Gender: Female*
*License Number: 33711*
*NPI: 1184146094*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**SOLIS, KEVIN, OD**
*Provider Gender: Male*
*License Number: 10420*
*NPI: 1538362116*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**TRINH, RACHELLE, OD**
*Provider Gender: Female*
*License Number: 35531*
*NPI: 1467139287*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**VILLA, ANGELICA, OD**
*Provider Gender: Female*
*License Number: 10561*
*NPI: 1962544965*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VILLA OPTOMETRY INC
523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
*Phone: (619) 482-2020*
*Fax: (619) 482-2671*
*After Hours Phone: (619) 482-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 11AM-6PM*
*TH-F 9AM-6PM*

## CORONADO

**COCKERHAM, KIMBERLY, MD**
*Provider Gender: Female*
*License Number: G86885*
*NPI: 1366493629*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC

# J. Vision Provider Directory - Eye & Vision Services

801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**GRAY, IGA, MD**
*Provider Gender: Female*
*License Number: A174875*
*NPI: 1033538350*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**KATZMAN, LEE, MD**
*Provider Gender: Male*
*License Number: A135673*
*NPI: 1912297284*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**MANNEN, JOSEPH, OD**
*Provider Gender: Male*
*License Number: 33650*
*NPI: 1851827034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**OU, JOCELYN, OD**
*Provider Gender: Female*
*License Number: 34063*

*NPI: 1225518996*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**YOUNG, ALLA, OD**
*Provider Gender: Female*
*License Number: 34191*
*NPI: 1285085142*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

## EL CAJON

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**ASIS, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 34013*
*NPI: 1902383540*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# J. Vision Provider Directory - Eye & Vision Services

*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**BUTLER, KIM, OD**
*Provider Gender: Male*
*License Number: 6405*
*NPI: 1467444844*
*Provider English Spoken: Y*
*Cultural Competency: Y*
KIM J BUTLER OD
1273 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 579-2345*
*Fax: (619) 579-0876*
*After Hours Phone: (619) 579-2345*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-12AM*

**CHAN, KWOK FUNG, OD**
*Provider Gender: Male*
*License Number: 35087*
*NPI: 1407508385*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**HAN, SULKI, OD**
*Provider Gender: Female*
*License Number: 34171*
*NPI: 1750802195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# J. Vision Provider Directory - Eye & Vision Services

*N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**HSU, CHRISTOPHER, MD**
*Provider Gender: Male*
*License Number: A65973*
*NPI: 1336167618*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

# J. Vision Provider Directory - Eye & Vision Services

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**MCMURREN, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 14824*
*NPI: 1104243815*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**PANDYA, BHUMIKA, OD**
*Provider Gender: Female*
*License Number: 35025*
*NPI: 1063182822*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619)*

# J. Vision Provider Directory - Eye & Vision Services

*440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**SCOTT, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 34978*
*NPI: 1568813434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619)*

# J. Vision Provider Directory - Eye & Vision Services

*440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**WERNER, R AARON, OD**
*Provider Gender: Male*
*License Number: 13478*
*NPI: 1821259458*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**WERNER, REX, OD**
*Provider Gender: Male*
*License Number: 9378*
*NPI: 1891760716*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

# J. Vision Provider Directory - Eye & Vision Services

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

## ENCINITAS

**ADAMS, MONA, OD**
*Provider Gender: Female*
*License Number: 14457*
*NPI: 1942564521*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

*1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BHATIA, SHAGUN, MD**
*Provider Gender: Female*
*License Number: A154902*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**CHANG, TOM, MD**
*Provider Gender: Male*
*License Number: A69909*
*NPI: 1609848969*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

# J. Vision Provider Directory - Eye & Vision Services

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**CHONG, TAMMY, OD**

*Provider Gender: Female*

*License Number: 35841*

*NPI: 1700612975*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

*Phone: (760) 943-7141*

*Fax: (760) 943-0371*

*After Hours Phone: (760) 943-7141*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**DEAN, MOENA, OD**

*Provider Gender: Female*

*License Number: 33955*

*NPI: 1265927578*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

*Phone: (760) 943-7141*

*Fax: (760) 943-0371*

*After Hours Phone: (760) 943-7141*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**DYER, SHARON, OD**

*Provider Gender: Female*

*License Number: 33450*

*NPI: 1063866887*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

*Phone: (760) 943-7141*

*Fax: (760) 943-0371*

*After Hours Phone: (760) 943-7141*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**HUDSON, HENRY, MD**

*Provider Gender: Male*

*License Number: G76091*

*NPI: 1851349195*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

*Phone: (760) 943-7141*

*Fax: (760) 943-0371*

*After Hours Phone: (760) 943-7141*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MOLL, ANGELA, MD**
*Provider Gender: Female*
*License Number: A105472*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**O HALLORAN, HENRY, MD**
*Provider Gender: Male*
*License Number: A73282*
*NPI: 1235287947*
*Provider English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**SAMUEL, MICHAEL, MD**
*Provider Gender: Male*
*License Number: A83237*
*NPI: 1730175670*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*

# J. Vision Provider Directory - Eye & Vision Services

*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

## ESCONDIDO

**ADAMS, MONA, OD**
*Provider Gender: Female*
*License Number: 14457*
*NPI: 1942564521*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

# J. Vision Provider Directory - Eye & Vision Services

**ASIS, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 34013*
*NPI: 1902383540*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BEAUDRY, AMANDA, OD**
*Provider Gender: Female*
*License Number: 33385*
*NPI: 1477903516*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

# J. Vision Provider Directory - Eye & Vision Services

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BERGMARK, JAMIE, OD**
*Provider Gender: Female*
*License Number: 33657*
*NPI: 1669920757*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BHATIA, SHAGUN, MD**
*Provider Gender: Female*
*License Number: A154902*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHANG, TOM, MD**
*Provider Gender: Male*
*License Number: A69909*
*NPI: 1609848969*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*

# J. Vision Provider Directory - Eye & Vision Services

*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHAU, VIVIAN, OD**
*Provider Gender: Female*
*License Number: 35427*
*NPI: 1558052951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**DUONG, KIM, OD**
*Provider Gender: Female*
*License Number: 34222*
*NPI: 1114448651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**GOLDSTONE, ADAM, OD**
*Provider Gender: Male*
*License Number: 11051*
*NPI: 1316972995*
*Provider English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HSU, CHRISTOPHER, MD**
*Provider Gender: Male*
*License Number: A65973*
*NPI: 1336167618*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KARAPETIAN, ELENA, OD**
*Provider Gender: Female*
*License Number: 34514*
*NPI: 1184250417*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

# J. Vision Provider Directory - Eye & Vision Services

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KLAREN, AMANDA, OD**
*Provider Gender: Female*
*License Number: 12617*
*NPI: 1396876611*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**LE, TAM, OD**
*Provider Gender: Female*
*License Number: 12951*
*NPI: 1235268707*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
TAM T LE OD INC
1711 E VALLEY PKWY STE 109
ESCONDIDO, CA 92027
*Phone: (760) 737-6064*
*Fax: (760) 737-6064*
*After Hours Phone: (760) 737-6064*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 9AM-5:30PM F 9AM-1PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MOLL, ANGELA, MD**
*Provider Gender: Female*
*License Number: A105472*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MOVAGHAR, MANSOOR, MD**
*Provider Gender: Male*
*License Number: A100897*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**O HALLORAN, HENRY, MD**
*Provider Gender: Male*
*License Number: A73282*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**PANSARA, MEGHA, MD**
*Provider Gender: Female*
*License Number: A143429*
*NPI: 1184983728*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**SAMUEL, MICHAEL, MD**
*Provider Gender: Male*
*License Number: A83237*
*NPI: 1730175670*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*

# J. Vision Provider Directory - Eye & Vision Services

*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**THACH, TERILYN, OD**
*Provider Gender: Female*
*License Number: 11456*
*NPI: 1710030861*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
INSIGHT VISION OPTOMETRY
2419 E VALLEY PKWY
ESCONDIDO, CA 92027
*Phone: (760) 738-9931*
*Fax: (760) 888-2181*
*After Hours Phone: (760) 738-9931*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9:30AM-5PM*
*TH 10AM-6PM*
*F 9:30AM-5PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*

# J. Vision Provider Directory - Eye & Vision Services

*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TRAN, ALEXANDER, OD**
*Provider Gender: Male*
*License Number: 14136*
*NPI: 1902414790*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**VERRET, ERIC, OD**
*Provider Gender: Male*
*License Number: 11401*
*NPI: 1194891853*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: Y*
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (760) 747-7979*
*Fax: (760) 747-7799*
*After Hours Phone: (760) 747-7979*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, French, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W-TH 9AM-8PM*
*F 9AM-5PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

## FALLBROOK

**ARCHIBALD, JOHN, OD**
*Provider Gender: Male*
*License Number: 11813*
*NPI: 1902893357*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**COLEMAN, BROOKE, OD**
*Provider Gender: Female*
*License Number: 13551*
*NPI: 1700040748*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**CONNOR, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 33683*
*NPI: 1063968980*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**COOPER, MICHAEL, OD**
*Provider Gender: Male*
*License Number: 10476*
*NPI: 1164586244*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**DUONG, CHERYL, OD**
*Provider Gender: Female*
*License Number: 34070*
*NPI: 1366935678*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**GEORGE, KENDALL, OD**
*Provider Gender: Male*
*License Number: 34270*
*NPI: 1619529948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
*Phone: (760) 723-8417*
*Fax: (760) 758-2063*
*After Hours Phone: (760) 723-8417*

# J. Vision Provider Directory - Eye & Vision Services

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 1PM-5PM*
*W 9AM-6PM*
*F 1PM-5PM*

**GEORGE, BRUCE, OD**
*Provider Gender: Male*
*License Number: 7696*
*NPI: 1356414551*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
*Phone: (760) 723-8417*
*Fax: (760) 758-2063*
*After Hours Phone: (760) 723-8417*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 1PM-5PM*
*W 9AM-6PM*
*F 1PM-5PM*

**KHINDA, SUNEHA, OD**
*Provider Gender: Female*
*License Number: 35494*
*NPI: 1750066726*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**NOORI, SARA, OD**
*Provider Gender: Female*
*License Number: 35457*
*NPI: 1477248912*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TEW, JOHN, MD**
*Provider Gender: Male*
*License Number: A83206*
*NPI: 1174593354*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

# J. Vision Provider Directory - Eye & Vision Services

*Portuguese*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

## IMPERIAL BEACH

**HANONO, HELFON, OD**
*Provider Gender: Male*
*License Number: 6681*
*NPI: 1619942034*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
IMPERIAL BEACH
OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
*Phone: (619) 424-9333*
*Fax: (619) 424-3356*
*After Hours Phone: (619) 424-9333*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*

**HANONO, ABRAHAM, OD**
*Provider Gender: Male*
*License Number: 14900*
*NPI: 1356754741*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: Y*
IMPERIAL BEACH
OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
*Phone: (619) 424-9333*
*Fax: (619) 424-3356*
*After Hours Phone: (619) 424-9333*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*

## LA JOLLA

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**CODEN, DANIEL, MD**
*Provider Gender: Male*
*License Number: G57587*
*NPI: 1942317508*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858)*

# J. Vision Provider Directory - Eye & Vision Services

*457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD

# J. Vision Provider Directory - Eye & Vision Services

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*

# J. Vision Provider Directory - Eye & Vision Services

*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

# J. Vision Provider Directory - Eye & Vision Services

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

*1/2 mile from Site): 1U*

*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**KULISCHAK, JOHN, OD**

*Provider Gender: Male*

*License Number: 9279*

*NPI: 1740205236*

*Provider English Spoken: Y*

*Cultural Competency: Y*

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (858) 534-6290*

*Fax: (858) 732-0921*

*After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**KULISCHAK, JOHN, OD**

*Provider Gender: Male*

*License Number: 9279*

*NPI: 1740205236*

*Provider English Spoken: Y*

*Cultural Competency: Y*

PERLMAN OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

*Phone: (858) 534-6290*

*Fax: (858) 732-0921*

*After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-4:30PM*

**LAM, ANNE, OD**

*Provider Gender: Female*

*License Number: 12810*

*NPI: 1174550768*

*Provider English Spoken: Y*

*Cultural Competency: Y*

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (858) 534-6290*

*Fax: (858) 732-0921*

*After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**LAM, ANNE, OD**

*Provider Gender: Female*

*License Number: 12810*

*NPI: 1174550768*

*Provider English Spoken: Y*

*Cultural Competency: Y*

PERLMAN OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

*Phone: (858) 534-6290*

*Fax: (858) 732-0921*

*After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within*

# J. Vision Provider Directory - Eye & Vision Services

*1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**LUSBY, FRANKLIN, MD**
*Provider Gender: Male*
*License Number: G41830*
*NPI: 1265526180*
*Provider English Spoken: Y*
*Cultural Competency: Y*
LUSBY VISION INSTITUTE
9850 GENESEE AVE STE 220
LA JOLLA, CA 92037
*Phone: (858) 459-6200*
*Fax: (858) 459-2025*
*After Hours Phone: (858) 459-6200*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PERRY, ARTHUR, MD**
*Provider Gender: Male*
*License Number: C37934*
*NPI: 1194832725*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PRATT, STEVEN, MD**
*Provider Gender: Male*
*License Number: G32379*
*NPI: 1407963044*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310

# J. Vision Provider Directory - Eye & Vision Services

LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

**TON-NU, MY LINH, OD**
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

**TONNU, ANH, OD**
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

**VINH, JOHN, OD**
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

**VO, ANDREW MINH, OD**
Provider Gender: Male
License Number: 33869

# J. Vision Provider Directory - Eye & Vision Services

*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**VO, ANDREW MINH, OD**
*Provider Gender: Male*
*License Number: 33869*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

## LA MESA

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

# J. Vision Provider Directory - Eye & Vision Services

*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ASIS, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 34013*
*NPI: 1902383540*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**AVALLONE, THOMAS, MD**
*Provider Gender: Male*
*License Number: A147199*
*NPI: 1679865950*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BAGHOUMIAN, MARINEH, OD**
*Provider Gender: Female*
*License Number: 14842*
*NPI: 1972929438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Armenian*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

# J. Vision Provider Directory - Eye & Vision Services

*Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BUI, TINA, OD**
*Provider Gender: Female*
*License Number: 33435*
*NPI: 1497107312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
BUITIQUE OPTOMETRY
5020 BALTIMORE DR STE B
LA MESA, CA 91942
*Phone: (619) 464-8303*
*Fax: (619) 464-4971*
*After Hours Phone: (619) 464-8303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-2PM*

**CHANG, TOM, MD**
*Provider Gender: Male*
*License Number: A69909*
*NPI: 1609848969*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**CHEW, WESLEY, OD**
*Provider Gender: Male*
*License Number: 14901*
*NPI: 1952714446*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**COCKERHAM, KIMBERLY, MD**
*Provider Gender: Female*
*License Number: G86885*
*NPI: 1366493629*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**CONRAD, RANDALL, OD**
*Provider Gender: Male*
*License Number: 6423*
*NPI: 1962617464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**GOLLOGLY, HEIDRUN, MD**
*Provider Gender: Female*
*License Number: A134761*

# J. Vision Provider Directory - Eye & Vision Services

*NPI: 1477879823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**GOLLOGLY, HEIDRUN, MD**
*Provider Gender: Female*
*License Number: A134761*
*NPI: 1477879823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**GRAY, IGA, MD**
*Provider Gender: Female*
*License Number: A174875*
*NPI: 1033538350*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**HAN, SULKI, OD**
*Provider Gender: Female*
*License Number: 34171*
*NPI: 1750802195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

# J. Vision Provider Directory - Eye & Vision Services

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**HIXSON, THOMAS, OD**

*Provider Gender: Male*

*License Number: 7490*

*NPI: 1528072683*

*Provider English Spoken: Y*

*Cultural Competency: Y*

LA MESA VISION CENTER OPTOMETRY

8007 LA MESA BLVD
LA MESA, CA 91942

*Phone: (619) 466-5665*

*Fax: (619) 466-5688*

*After Hours Phone: (619) 466-5665*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-TU 8AM-4PM W-TH 9AM-6PM F 9AM-5PM*

**HSU, CHRISTOPHER, MD**

*Provider Gender: Male*

*License Number: A65973*

*NPI: 1336167618*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**HUANG, GRACE, OD**

*Provider Gender: Female*

*License Number: 35485*

*NPI: 1013605526*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**HUANG, GRACE, OD**

*Provider Gender: Female*

*License Number: 35485*

*NPI: 1013605526*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

*Phone: (619) 465-2020*

*Fax: (619) 698-1189*

*After Hours Phone: (619)*

*465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KATZMAN, LEE, MD**
*Provider Gender: Male*
*License Number: A135673*
*NPI: 1912297284*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**LEE, SALLY, DO**
*Provider Gender: Female*
*License Number: 20A8088*
*NPI: 1457468514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
SAN DIEGO EYE PROFESSIONALS
8291 LA MESA BLVD
LA MESA, CA 91942
*Phone: (619) 583-4295*
*Fax: (619) 393-1133*

# J. Vision Provider Directory - Eye & Vision Services

*After Hours Phone: (619) 583-4295*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: German, Spanish, Chinese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU-F 9AM-5PM SA 9AM-5PM*

**LEVY, PHILLIP, OD**
*Provider Gender: Male*
*License Number: 4884*
*NPI: 1528189115*
*Provider English Spoken: Y*
*Cultural Competency: Y*
BUITIQUE OPTOMETRY
5020 BALTIMORE DR STE B
LA MESA, CA 91942
*Phone: (619) 464-8303*
*Fax: (619) 464-4971*
*After Hours Phone: (619) 464-8303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-2PM*

**MANNEN, JOSEPH, OD**
*Provider Gender: Male*
*License Number: 33650*
*NPI: 1851827034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*

# J. Vision Provider Directory - Eye & Vision Services

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**MERALI, MURTAZA, OD**
*Provider Gender: Female*
*License Number: 14558*
*NPI: 1972944189*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MORGAN, HUNTER, OD**
*Provider Gender: Male*
*License Number: 34799*
*NPI: 1023547221*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
*Phone: (619) 466-5665*
*Fax: (619) 466-5688*
*After Hours Phone: (619) 466-5665*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-4PM W-TH 9AM-6PM F 9AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**NGUYEN, THY, OD**
*Provider Gender: Female*
*License Number: 12746*
*NPI: 1750490413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**OU, JOCELYN, OD**
*Provider Gender: Female*
*License Number: 34063*
*NPI: 1225518996*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**PANDYA, BHUMIKA, OD**
*Provider Gender: Female*
*License Number: 35025*
*NPI: 1063182822*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*

# J. Vision Provider Directory - Eye & Vision Services

*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**QUACH, PHUC, OD**
*Provider Gender: Male*
*License Number: 12891*
*NPI: 1770617805*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**RAJADHYKSHA, SALOMI, OD**
*Provider Gender: Female*
*License Number: 34821*
*NPI: 1134641434*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Marathi, Spanish, Yiddish*
*Cultural Competency: Y*
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
*Phone: (619) 466-5665*
*Fax: (619) 466-5688*
*After Hours Phone: (619) 466-5665*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-4PM*
*W-TH 9AM-6PM*
*F 9AM-5PM*

**SAMUEL, MICHAEL, MD**
*Provider Gender: Male*
*License Number: A83237*
*NPI: 1730175670*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**SCOTT, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 34978*
*NPI: 1568813434*
*Provider English Spoken: Y*
*Cultural Competency: Y*

# J. Vision Provider Directory - Eye & Vision Services

ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TILLMAN, SYLVIA, OD**
*Provider Gender: Female*
*License Number: 9726*
*NPI: 1174730824*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TSUI, NANCY, OD**
*Provider Gender: Female*
*License Number: 33944*
*NPI: 1841785037*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TU, BEVERLY, OD**
*Provider Gender: Female*
*License Number: 34108*
*NPI: 1053892794*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TURRILL, MCKENNA, OD**
*Provider Gender: Female*
*License Number: 35777*
*NPI: 1194419960*
*Provider English Spoken: Y*
*Cultural Competency: Y*
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942

# J. Vision Provider Directory - Eye & Vision Services

*Phone: (619) 466-5665*
*Fax: (619) 466-5688*
*After Hours Phone: (619) 466-5665*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-4PM W-TH 9AM-6PM F 9AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**YOUNG, ALLA, OD**
*Provider Gender: Female*
*License Number: 34191*
*NPI: 1285085142*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*

# J. Vision Provider Directory - Eye & Vision Services

*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

## LAKESIDE

**FLEMING, JOHN, OD**
*Provider Gender: Male*
*License Number: 8461*
*NPI: 1033192133*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040
*Phone: (619) 443-1075*
*Fax: (619) 499-7916*
*After Hours Phone: (619) 443-1075*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**HOANG, KENNY, OD**
*Provider Gender: Male*
*License Number: 35207*
*NPI: 1740868603*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040
*Phone: (619) 443-1075*
*Fax: (619) 499-7916*
*After Hours Phone: (619) 443-1075*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**JOHNSON, CHRISTOPHER, OD**
*Provider Gender: Male*
*License Number: 15100*
*NPI: 1568861425*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040
*Phone: (619) 443-1075*
*Fax: (619) 499-7916*
*After Hours Phone: (619) 443-1075*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

## NATIONAL CITY

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

# J. Vision Provider Directory - Eye & Vision Services

*Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*

# J. Vision Provider Directory - Eye & Vision Services

*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**GOLLOGLY, HEIDRUN, MD**
*Provider Gender: Female*
*License Number: A134761*
*NPI: 1477879823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KALRA, ANKUR, OD**
*Provider Gender: Male*
*License Number: 11898*
*NPI: 1124195789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KEDDINGTON, JOAN, OD**
*Provider Gender: Female*
*License Number: 6263*
*NPI: 1992872691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*

# J. Vision Provider Directory - Eye & Vision Services

*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

# J. Vision Provider Directory - Eye & Vision Services

*Hours: M-F 8AM-4:30PM*

**KING, MARY, OD**
*Provider Gender: Female*
*License Number: 13711*
*NPI: 1578792107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**LEE, AUSTIN, OD**
*Provider Gender: Male*
*License Number: 14519*
*NPI: 1922356914*
*Provider English Spoken: Y*
*Cultural Competency: Y*
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 477-2771*
*Fax: (619) 477-1680*
*After Hours Phone: (619) 477-2771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU 10AM-5PM*
*W-F 9:30AM-5PM*

**MARLAY, GREG, OD**
*Provider Gender: Male*
*License Number: 6998*
*NPI: 1306903083*
*Provider English Spoken: Y*
*Cultural Competency: Y*
MARLAY ENTERPRISES
1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA 91950
*Phone: (619) 477-4166*
*After Hours Phone: (619) 477-4166*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 10AM-6PM*
*W 10AM-6PM*
*F 10AM-6PM*
*SA 10AM-2PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*

# J. Vision Provider Directory - Eye & Vision Services

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**MENDOZA, RAYMUNDO, OD**
*Provider Gender: Male*
*License Number: 8150*
*NPI: 1306837760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 475-2184*
*Fax: (619) 475-3917*

# J. Vision Provider Directory - Eye & Vision Services

*After Hours Phone: (619) 475-2184*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TU 10AM-5PM TH-F 10AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM W 8:30AM-5PM TH 8AM-6PM F 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**NGUYEN, THERESA, OD**
*Provider Gender: Female*
*License Number: 35530TLG*
*NPI: 1609555713*
*Provider English Spoken: Y*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM M-F 9AM-6PM*

# J. Vision Provider Directory - Eye & Vision Services

*SA 9AM-5PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**SCOTT, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 34978*
*NPI: 1568813434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

# J. Vision Provider Directory - Eye & Vision Services

*1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*

# J. Vision Provider Directory - Eye & Vision Services

*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302

# J. Vision Provider Directory - Eye & Vision Services

NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**WU, EVA, OD**
*Provider Gender: Female*
*License Number: 14743*
*NPI: 1073954442*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 477-2771*
*Fax: (619) 477-1680*
*After Hours Phone: (619) 477-2771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU 10AM-5PM*
*W-F 9:30AM-5PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

## OCEANSIDE

**KASAI, SARAH, OD**
*Provider Gender: Female*
*License Number: 34226*
*NPI: 1023406238*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
*Phone: (760) 757-8771*
*After Hours Phone: (760) 757-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**NGUYEN, BERLINDA, OD**
*Provider Gender: Female*
*License Number: 35862*
*NPI: 1417776238*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
*Phone: (760) 757-8771*
*After Hours Phone: (760) 757-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**NISKANEN, RACHEL, OD**

*Provider Gender: Female*

*License Number: 34663*

*NPI: 1467065797*

*Provider English Spoken: Y*

*Cultural Competency: Y*

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

*Phone: (760) 757-8771*

*After Hours Phone: (760) 757-8771*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**ROSA, ADAM, OD**

*Provider Gender: Male*

*License Number: 34093*

*NPI: 1295250264*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

*Phone: (760) 757-8771*

*After Hours Phone: (760) 757-8771*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

## SAN DIEGO

**ACKROYD, ARCHIE, OD**

*Provider Gender: Male*

*License Number: 4774*

*NPI: 1629107172*

*Provider English Spoken: Y*

*Cultural Competency: Y*

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111

*Phone: (858) 292-7193*

*Fax: (858) 292-8247*

*After Hours Phone: (858) 292-7193*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M 8AM-5PM*
*TU-TH 9AM-6PM*
*F 8AM-5PM*

**ADAMS, MONA, OD**

*Provider Gender: Female*

*License Number: 14457*

*NPI: 1942564521*

*Provider English Spoken: Y*

*Cultural Competency: Y*

RADY CHILDRENS

# J. Vision Provider Directory - Eye & Vision Services

SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**ARCHIBALD, JOHN, OD**
*Provider Gender: Male*
*License Number: 11813*
*NPI: 1902893357*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

# J. Vision Provider Directory - Eye & Vision Services

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**BEAUDRY, AMANDA, OD**
*Provider Gender: Female*
*License Number: 33385*
*NPI: 1477903516*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**BERGMARK, JAMIE, OD**
*Provider Gender: Female*
*License Number: 33657*
*NPI: 1669920757*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**BHATIA, SHAGUN, MD**
*Provider Gender: Female*
*License Number: A154902*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

# J. Vision Provider Directory - Eye & Vision Services

*Hours: M-F 7AM-5PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**BOECK, CARL, OD**
*Provider Gender: Male*
*License Number: 6620*
*NPI: 1588656151*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
*Phone: (858) 292-7193*
*Fax: (858) 292-8247*
*After Hours Phone: (858) 292-7193*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU-TH 9AM-6PM*
*F 8AM-5PM*

**CAO, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 35158*
*NPI: 1215660436*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9:30AM-6PM*
*SA 9AM-3PM*

**CAO, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 35158*
*NPI: 1215660436*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM*
*SA 9AM-3PM*

**CHAIN, PEI CHI, OD**
*Provider Gender: Female*
*License Number: 34439*
*NPI: 1730676727*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
SPOTLIGHT OPTOMETRY
7835 HIGHLANDS VLG PL D 106
SAN DIEGO, CA 92129
*Phone: (858) 250-0052*
*Fax: (858) 788-0287*
*After Hours Phone: (858) 250-0052*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*F 9AM-5PM*
*SA 9AM-1PM*

**CHEN, LESLIE, OD**
*Provider Gender: Female*
*License Number: 12792*
*NPI: 1508953332*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: Y*
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
*Phone: (619) 521-2020*
*Fax: (619) 521-2025*
*After Hours Phone: (619) 521-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-5PM*
*TH 9AM-1:30PM*
*F 9AM-5PM*
*SA 9AM-1PM*

**CHONG, TAMMY, OD**
*Provider Gender: Female*
*License Number: 35841*
*NPI: 1700612975*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

# J. Vision Provider Directory - Eye & Vision Services

**CHUNG, ALLEN, OD**
*Provider Gender: Male*
*License Number: 33974*
*NPI: 1003301391*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SPOTLIGHT OPTOMETRY
7835 HIGHLANDS VLG PL
D 106
SAN DIEGO, CA 92129
*Phone: (858) 250-0052*
*Fax: (858) 788-0287*
*After Hours Phone: (858) 250-0052*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*F 9AM-5PM*
*SA 9AM-1PM*

**COLEMAN, BROOKE, OD**
*Provider Gender: Female*
*License Number: 13551*
*NPI: 1700040748*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**COOPER, MICHAEL, OD**
*Provider Gender: Male*
*License Number: 10476*
*NPI: 1164586244*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**DAVIS, JADE, OD**
*Provider Gender: Female*
*License Number: 11765*
*NPI: 1457303398*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE
OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# J. Vision Provider Directory - Eye & Vision Services

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

**DUONG, CHERYL, OD**

*Provider Gender: Female*

*License Number: 34070*

*NPI: 1366935678*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYELUX OPTOMETRY

16615 DOVE CANYON RD STE 105
SAN DIEGO, CA 92127

*Phone: (858) 487-7900*

*Fax: (858) 487-1896*

*After Hours Phone: (858) 487-7900*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 8AM-5PM SA 8:30AM-2PM*

**DUONG, KIM, OD**

*Provider Gender: Female*

*License Number: 34222*

*NPI: 1114448651*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

RADY CHILDRENS SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 309-7702*

*Fax: (858) 966-8901*

*After Hours Phone: (858) 309-7702*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 7AM-5PM*

**DYER, SHARON, OD**

*Provider Gender: Female*

*License Number: 33450*

*NPI: 1063866887*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**GIANG, STEVEN, OD**

*Provider Gender: Male*

*License Number: 34489*

*NPI: 1730710104*

*Provider English Spoken: Y*

*Cultural Competency: Y*

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

*Phone: (619) 284-3937*

*Fax: (619) 284-3938*

*After Hours Phone: (619) 284-3937*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**HO, HOANG, OD**
*Provider Gender: Male*
*License Number: 12582*
*NPI: 1275684847*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HEALTHY I CARE OPTOMETRY
10737 CAMINO RUIZ STE 220
SAN DIEGO, CA 92126
*Phone: (619) 590-1994*
*After Hours Phone: (619) 590-1994*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TH-F 9AM-5PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**HOANG, KEVIN, OD**
*Provider Gender: Male*
*License Number: 34401*
*NPI: 1790339216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**HOFFMAN, STEVEN, OD**
*Provider Gender: Male*
*License Number: 34561*
*NPI: 1033736079*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**HOM, GREGORY, OD**
*Provider Gender: Male*
*License Number: 9694*
*NPI: 1154473916*
*Provider English Spoken: Y*
*Cultural Competency: Y*
GREGORY G HOM OD
11230 SORRENTO VLY RD STE 145
SAN DIEGO, CA 92121
*Phone: (858) 535-9835*
*Fax: (858) 535-1266*
*After Hours Phone: (858) 535-9835*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TH 9AM-5PM F 9AM-4PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*

# J. Vision Provider Directory - Eye & Vision Services

*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**HUYNH, PAUL, MD**
*Provider Gender: Male*
*License Number: A79141*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ADVANCED EYE AND LASER CTR OF CA INC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
*Phone: (858) 549-3200*
*Fax: (858) 549-3207*
*After Hours Phone: (858) 549-3200*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

# J. Vision Provider Directory - Eye & Vision Services

**HUYNH, CHI, OD**
*Provider Gender: Female*
*License Number: 12901*
*NPI: 1922187426*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
CRYSTAL EYESITE OPTOMETRY
9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
*Phone: (858) 547-3988*
*Fax: (844) 367-5161*
*After Hours Phone: (858) 547-3988*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9:30AM-6PM*
*W 9:30AM-6PM*
*TH-F 10AM-6PM*
*SA 9AM-3PM*

**HUYNH, LOAN, OD**
*Provider Gender: Female*
*License Number: 34472*
*NPI: 1003454604*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
*Phone: (858) 674-1276*
*Fax: (858) 674-5863*
*After Hours Phone: (858) 674-1276*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-4PM*
*TU 7AM-1PM*
*W-TH 10AM-6PM*
*F 10AM-3PM*
*SA 9AM-2PM*

**HUYNH, PAUL, MD**
*Provider Gender: Male*
*License Number: A79141*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ADVANCED EYE AND LASER CTR OF CA INC
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 283-1303*
*Fax: (619) 283-1666*
*After Hours Phone: (619) 283-1303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*

# J. Vision Provider Directory - Eye & Vision Services

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KHALIGHI, PAYMAN, OD**
*Provider Gender: Male*
*License Number: 13014*
*NPI: 1396897880*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

# J. Vision Provider Directory - Eye & Vision Services

*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KHAN, FAHAD, MD**
*Provider Gender: Male*
*License Number: A163142*
*NPI: 1548605843*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
VISION SPECIALISTS OF CALIFORNIA
233 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 501-9050*
*Fax: (619) 501-9054*
*After Hours Phone: (619) 501-9050*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Bengali, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 8AM-5PM*
*F 8AM-4PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

# J. Vision Provider Directory - Eye & Vision Services

*1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KHINDA, SUNEHA, OD**
*Provider Gender: Female*
*License Number: 35494*
*NPI: 1750066726*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE
CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**KLAREN, AMANDA, OD**
*Provider Gender: Female*
*License Number: 12617*
*NPI: 1396876611*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS
SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**KULISCHAK, JOHN, OD**
*Provider Gender: Male*
*License Number: 9279*
*NPI: 1740205236*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE
CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**LAM, ANNE, OD**
*Provider Gender: Female*
*License Number: 12810*
*NPI: 1174550768*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**LAU, JANICE, OD**
*Provider Gender: Female*
*License Number: 13037*
*NPI: 1952453300*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SABRE SPRINGS OPTOMETRY
12650 SABRE SPGS PKWY STE 203
SAN DIEGO, CA 92128
*Phone: (858) 748-1265*
*Fax: (844) 269-9527*
*After Hours Phone: (858) 748-1265*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*TH 9AM-5PM*
*F 10AM-6PM*

**LAU, KUEN CHINE, OD**
*Provider Gender: Male*
*License Number: 11166*
*NPI: 1821001645*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9:30AM-6PM*
*SA 9AM-3PM*

**LAU, KUEN CHINE, OD**
*Provider Gender: Male*
*License Number: 11166*
*NPI: 1821001645*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*

# J. Vision Provider Directory - Eye & Vision Services

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**LIN, HENRY, OD**
*Provider Gender: Male*
*License Number: 11368*
*NPI: 1861405664*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9:30AM-6PM SA 9AM-3PM*

**LIN, HENRY, OD**
*Provider Gender: Male*
*License Number: 11368*
*NPI: 1861405664*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

**LLANES, BENJAMIN, OD**
*Provider Gender: Male*
*License Number: 8782*
*NPI: 1053309005*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

*Spanish, Tagalog*
*Cultural Competency: Y*
SEE KLEER EYECARE CENTER
9580 BLACK MOUNTAIN RD STE J
SAN DIEGO, CA 92126
*Phone: (858) 536-8952*
*Fax: (858) 536-8951*
*After Hours Phone: (858) 536-8952*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 11AM-6PM*
*F 1PM-5PM*
*SA 9AM-1PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD STE F
SAN DIEGO, CA 92124
*Phone: (858) 279-6500*
*Fax: (858) 225-7174*
*After Hours Phone: (858) 279-6500*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-6PM*
*TH-F 9AM-5PM*
*SA 8AM-3PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-5:30PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

# J. Vision Provider Directory - Eye & Vision Services

*1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**MOLL, ANGELA, MD**
*Provider Gender: Female*
*License Number: A105472*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Vision Provider Directory - Eye & Vision Services

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**NGUYEN, THANH, OD**
*Provider Gender: Female*
*License Number: 13126*
*NPI: 1992813323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
SABRE SPRINGS OPTOMETRY
12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128
*Phone: (858) 748-1265*
*Fax: (844) 269-9527*
*After Hours Phone: (858) 748-1265*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*TH 9AM-5PM*
*F 10AM-6PM*

**NGUYEN, BRUCE, OD**
*Provider Gender: Male*
*License Number: 14156*
*NPI: 1376839019*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD
STE F
SAN DIEGO, CA 92124
*Phone: (858) 279-6500*
*Fax: (858) 225-7174*
*After Hours Phone: (858) 279-6500*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-6PM*
*TH-F 9AM-5PM*
*SA 8AM-3PM*

**NGUYEN, KELVIN, OD**
*Provider Gender: Male*
*License Number: 11085*
*NPI: 1518923572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

# J. Vision Provider Directory - Eye & Vision Services

*1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-5:30PM*

**NGUYEN, BRUCE, OD**
*Provider Gender: Male*
*License Number: 14156*
*NPI: 1376839019*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-5:30PM*

**NGUYEN, JASMINE, OD**
*Provider Gender: Female*
*License Number: 11189*
*NPI: 1497896922*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**NGUYEN, THANH, OD**
*Provider Gender: Female*
*License Number: 13126*
*NPI: 1992813323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**NGUYEN, VIET, OD**
*Provider Gender: Male*
*License Number: 35481*
*NPI: 1861170573*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*

# J. Vision Provider Directory - Eye & Vision Services

*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**O HALLORAN, HENRY, MD**
*Provider Gender: Male*
*License Number: A73282*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

# J. Vision Provider Directory - Eye & Vision Services

**PHAM, TONY, OD**
*Provider Gender: Male*
*License Number: 12348*
*NPI: 1841271434*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
MIRA MESA EYECARE
6755 MIRA MESA BLVD STE 141
SAN DIEGO, CA 92121
*Phone: (858) 535-8282*
*Fax: (858) 535-0537*
*After Hours Phone: (858) 535-8282*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9:30AM-6PM TH-F 9:30AM-6PM*

**PHUNG, RICHARD N V, OD**
*Provider Gender: Male*
*License Number: 9547*
*NPI: 1689661571*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese, Chinese*
*Cultural Competency: Y*
SCRIPPS RANCH OPTOMETRI CTR
9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
*Phone: (858) 693-9044*
*Fax: (858) 693-0704*
*After Hours Phone: (858) 693-9044*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 10AM-6PM TU 10AM-2PM W-TH 10AM-6PM F 9AM-2PM SA 9AM-2PM*

**POUSTI, SHEIVA, OD**
*Provider Gender: Female*
*License Number: 10403*
*NPI: 1730240052*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SAN DIEGO EYE CLINIC OPTOMETRY
3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 431-2020*
*Fax: (619) 376-2100*
*After Hours Phone: (619) 431-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU-SA 9AM-6PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619)*

*697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**SANDOC, EMILY, OD**
*Provider Gender: Female*
*License Number: 13535*
*NPI: 1992969794*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9:30AM-6PM*
*SA 9AM-3PM*

**SANDOC, EMILY, OD**
*Provider Gender: Female*
*License Number: 13535*
*NPI: 1992969794*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM*
*SA 9AM-3PM*

**SHULKIN, MITCHELL, OD**
*Provider Gender: Male*
*License Number: 8153*
*NPI: 1770531865*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD
STE 1313
SAN DIEGO, CA 92128
*Phone: (858) 674-1276*
*Fax: (858) 674-5863*
*After Hours Phone: (858) 674-1276*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-4PM*
*TU 7AM-1PM*
*W-TH 10AM-6PM*
*F 10AM-3PM*
*SA 9AM-2PM*

**TA, TRANG, OD**
*Provider Gender: Female*

# J. Vision Provider Directory - Eye & Vision Services

*License Number: 12100*
*NPI: 1518381045*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**TAM, MAY, OD**
*Provider Gender: Female*
*License Number: 11960*
*NPI: 1548255896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9:30AM-6PM SA 9AM-3PM*

**TAM, MAY, OD**
*Provider Gender: Female*
*License Number: 11960*
*NPI: 1548255896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

**TAVASSOLI, SARA, OD**
*Provider Gender: Female*
*License Number: 13395*
*NPI: 1184764011*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**TILLMAN, SYLVIA, OD**

*Provider Gender: Female*

*License Number: 9726*

*NPI: 1174730824*

*Provider English Spoken: Y*

*Cultural Competency: Y*

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

*Phone: (619) 284-3937*

*Fax: (619) 284-3938*

*After Hours Phone: (619) 284-3937*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish, Vietnamese*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**TO, BRITTANY, OD**

*Provider Gender: Female*

*License Number: 10651*

*NPI: 1306997143*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**TON-NU, MY LINH, OD**

*Provider Gender: Female*

*License Number: 34990*

*NPI: 1245733476*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**TONNU, ANH, OD**

*Provider Gender: Female*

*License Number: 11318*

*NPI: 1679521280*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

WEST COAST EYE CARE

# J. Vision Provider Directory - Eye & Vision Services

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**TRAN, ALEXANDER, OD**
*Provider Gender: Male*
*License Number: 14136*
*NPI: 1902414790*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**TRANG, CHAU, OD**
*Provider Gender: Female*
*License Number: 9556*
*NPI: 1073671087*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish, Vietnamese, Chinese*
*Cultural Competency: Y*
CHAU H TRANG OD
6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
*Phone: (858) 495-0592*
*Fax: (858) 495-0560*
*After Hours Phone: (858) 495-0592*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 10AM-3PM*
*W 10AM-3PM*
*F 10AM-5PM*
*SA 9AM-1PM*

**VAN HOOSE, MARC, OD**
*Provider Gender: Male*
*License Number: 12667*
*NPI: 1932280054*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
*Phone: (858) 292-7193*
*Fax: (858) 292-8247*
*After Hours Phone: (858) 292-7193*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM TU-TH 9AM-6PM F 8AM-5PM*

**VO, ANDREW MINH, OD**
*Provider Gender: Male*
*License Number: 33869*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**WONG, GORDON, OD**
*Provider Gender: Male*
*License Number: 9832*
*NPI: 1447338447*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103
*Phone: (619) 291-5505*
*Fax: (619) 291-4404*
*After Hours Phone: (619) 291-5505*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# J. Vision Provider Directory - Eye & Vision Services

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

## SAN MARCOS

**GARFF, KEVIN, MD**

*Provider Gender: Male*

*License Number: A160988*

*NPI: 1609258920*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

RSF OPHTHALMOLOGY

100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069

*Phone: (760) 598-0400*

*Fax: (760) 249-7394*

*After Hours Phone: (760) 598-0400*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**GUAN, HOWARD, MD**

*Provider Gender: Male*

*License Number: A119766*

*NPI: 1134427636*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Chinese*

*Cultural Competency: Y*

RSF OPHTHALMOLOGY

100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069

*Phone: (760) 598-0400*

*Fax: (760) 249-7394*

*After Hours Phone: (760) 598-0400*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**PRESTERA, TORY, MD**

*Provider Gender: Male*

*License Number: A62321*

*NPI: 1346224557*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

RSF OPHTHALMOLOGY

100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069

*Phone: (760) 598-0400*

*Fax: (760) 249-7394*

*After Hours Phone: (760) 598-0400*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

**SKAY, RICHARD, OD**

*Provider Gender: Male*

*License Number: 7649*

*NPI: 1639251945*

*Provider English Spoken: Y*

*Cultural Competency: Y*

# J. Vision Provider Directory - Eye & Vision Services

RICHARD M SKAY OD
1903 W SAN MARCOS BLVD STE 130
SAN MARCOS, CA 92078
*Phone: (760) 727-2211*
*Fax: (760) 727-2533*
*After Hours Phone: (760) 727-2211*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-3PM*

**TA, MINI, OD**
*Provider Gender: Female*
*License Number: 15170*
*NPI: 1578955605*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**THAI, AMANDA, OD**
*Provider Gender: Female*
*License Number: 34861*
*NPI: 1457928558*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**TRAN, MICHAEL, OD**
*Provider Gender: Male*
*License Number: 14530*
*NPI: 1649524216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# J. Vision Provider Directory - Eye & Vision Services

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 9AM-5PM*

## SPRING VALLEY

**FLEMING, JOHN, OD**

*Provider Gender: Male*
*License Number: 8461*
*NPI: 1033192133*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA 91977
*Phone: (619) 463-9318*
*Fax: (619) 463-9640*
*After Hours Phone: (619) 463-9318*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**HOANG, KENNY, OD**

*Provider Gender: Male*
*License Number: 35207*
*NPI: 1740868603*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA 91977
*Phone: (619) 463-9318*
*Fax: (619) 463-9640*
*After Hours Phone: (619) 463-9318*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**JOHNSON, CHRISTOPHER, OD**

*Provider Gender: Male*
*License Number: 15100*
*NPI: 1568861425*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA 91977
*Phone: (619) 463-9318*
*Fax: (619) 463-9640*
*After Hours Phone: (619) 463-9318*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

**KALRA, ANKUR, OD**

*Provider Gender: Male*
*License Number: 11898*
*NPI: 1124195789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# J. Vision Provider Directory - Eye & Vision Services

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**KEDDINGTON, JOAN, OD**
*Provider Gender: Female*
*License Number: 6263*
*NPI: 1992872691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**KING, MARY, OD**
*Provider Gender: Female*
*License Number: 13711*
*NPI: 1578792107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**NGUYEN, THERESA, OD**
*Provider Gender: Female*
*License Number: 35530TLG*
*NPI: 1609555713*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**SOLIS, KEVIN, OD**
*Provider Gender: Male*
*License Number: 10420*
*NPI: 1538362116*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*

# J. Vision Provider Directory - Eye & Vision Services

*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

## VALLEY CENTER

**JOYCE, ROBERT, OD**
*Provider Gender: Male*
*License Number: 11833*
*NPI: 1275585127*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD STE E
VALLEY CENTER, CA 92082
*Phone: (760) 751-8771*
*Fax: (760) 751-8772*
*After Hours Phone: (760) 751-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TH 9AM-5PM F 9AM-1PM*

## VISTA

**DEMLINGER, GLENN, OD**
*Provider Gender: Male*
*License Number: 8954*
*NPI: 1508932518*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
SHADOWRIDGE FAMILY VISION
741 SHADOWRIDGE DR
VISTA, CA 92083
*Phone: (760) 727-1844*
*Fax: (760) 727-3044*
*After Hours Phone: (760) 727-1844*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Vision Provider Directory - Eye & Vision Services

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 7AM-5PM*
*TH 9AM-6PM*

**GEORGE, KENDALL, OD**
*Provider Gender: Male*
*License Number: 34270*
*NPI: 1619529948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
*Phone: (760) 758-2340*
*Fax: (760) 867-2222*
*After Hours Phone: (760) 758-2340*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU-W 9AM-6PM*
*TH-F 9AM-5PM*

**GEORGE, BRUCE, OD**
*Provider Gender: Male*
*License Number: 7696*
*NPI: 1356414551*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
*Phone: (760) 758-2340*
*Fax: (760) 867-2222*
*After Hours Phone: (760) 758-2340*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU-W 9AM-6PM*
*TH-F 9AM-5PM*

**TRAN, THAO, OD**
*Provider Gender: Female*
*License Number: 12867*
*NPI: 1962581421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
KINDERSPECS-GOOD EYES OPTOMETRY
110 CIVIC CENTER DR STE 204
VISTA, CA 92084
*Phone: (760) 753-3665*
*Fax: (408) 969-1653*
*After Hours Phone: (760) 753-3665*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 10AM-5PM*

# K. Other Services Providers (Community Supports, Enhanced Care Management)

## ECM Populations of Focus (POF) Table

| ECM Population of Focus | | | Adults | Children & Youth |
|---|---|---|---|---|
| | 1 | Individuals Experiencing Homelessness | ✓ | ✓ |
| | 2 | Individuals At Risk for Avoidable Hospital or ED Utilization (formerly called "High Utilizers") | ✓ | ✓ |
| | 3 | Individuals with Serious Mental Health and/or Substance Use Disorder Needs | ✓ | ✓ |
| | 4 | Individuals Transitioning from Incarceration | ✓ | ✓ |
| | 5 | Adults Living in the Community and at-risk for LTC Institutionalization | ✓ | |
| | 6 | Adult Nursing Facility Residents Transitioning to the Community | ✓ | |
| | 7 | Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition | | ✓ |
| | 8 | Children and Youth Involved in Child Welfare | | ✓ |
| | 9 | Birth Equity Population of Focus | ✓ | ✓ |

# K. Other Services Providers (Community Supports, Enhanced Care Management)

**CARLSBAD**

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

7632 CORTINA CT
CARLSBAD, CA 92009
*Phone: (760) 707-9256*
*After Hours Phone: (760) 707-9256*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (760) 707-9256*

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

7632 CORTINA CT
CARLSBAD, CA 92009
*Phone: (760) 707-9256*
*After Hours Phone: (760) 707-9256*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (760) 707-9256*

**CORONA**

### TANGELO

1701 N DELILAH ST
CORONA, CA 92879
*Phone: (904) 671-2995*
*After Hours Phone: (904) 671-2995*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CHRIS.OCONNOR@JOINTANGELO.COM*
*Phone for New Referrals and Existing Patients: (904) 671-2995*

**CULVER CITY**

### MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE STE 465
CULVER CITY, CA 90230
*Phone: (323) 203-0070*
*After Hours Phone: (323) 203-0070*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: Housing Deposits,Housing*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@mymedzed.com*
*Phone for New Referrals and Existing Patients: (323) 203-0070*

### MEDZED PHYSICIAN SERVICES INC

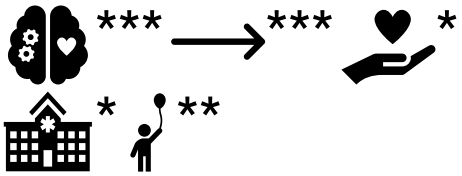
300 CORPORATE POINTE STE 465
CULVER CITY, CA 90230
*Phone: (323) 203-0070*
*After Hours Phone: (323) 203-0070*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@mymedzed.com*
*Phone for New Referrals and Existing Patients: (323) 203-0070*

## EL CAJON

### INTEGRATED HEALTH PARTNERS

855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (833) 867-4642*
*After Hours Phone: (833) 867-4642*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (833) 867-4642*
*Mailing Address: PO BOX 57216 9;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

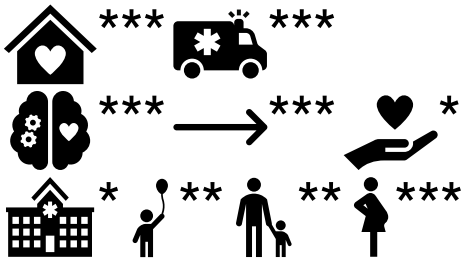
### LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

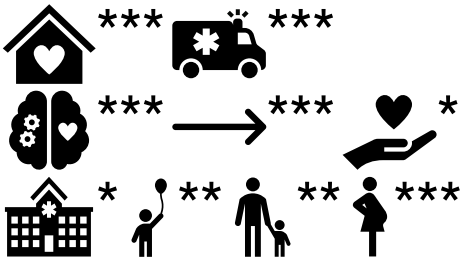
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**EL SEGUNDO**

## 24HR HOMECARE LLC

200 N PACIFIC COAST HWY STE 300
EL SEGUNDO, CA 90245
*Phone: (310) 906-3683*
*After Hours Phone: (310) 906-3683*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Personal Care and Homemaker Services,Respite Services*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

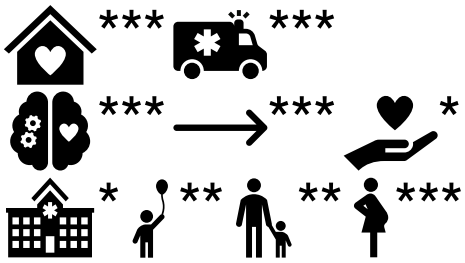
# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 906-3683*

**ENCINITAS**

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL STE B149
ENCINITAS, CA 92024
*Phone: (619) 273-3295*
*After Hours Phone: (619) 273-3295*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

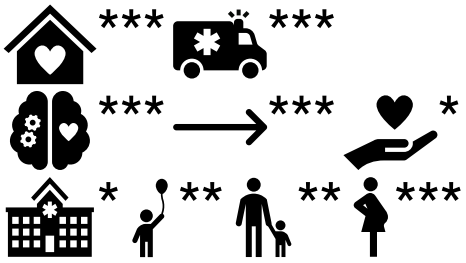


*Community Supports Services: N/A*

*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: referrals@sdwellnesscollaborative.org*
*Phone for New Referrals and Existing Patients: (619) 273-3295*
*Mailing Address: 1084 N EL CAMINO REAL STE B;Encinitas;CA;92024*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL STE B149
ENCINITAS, CA 92024
*Phone: (619) 273-3295*
*After Hours Phone: (619) 273-3295*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: referrals@sdwellnesscollaborative.org*
*Phone for New Referrals and Existing Patients: (619) 273-3295*
*Mailing Address: 1084 N EL CAMINO REAL STE B;Encinitas;CA;92024*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

**ESCONDIDO**

### TITANIUM HEALTHCARE

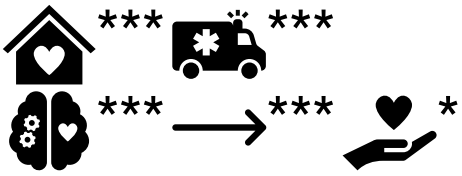
500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
*Phone: (310) 280-5203*
*After Hours Phone: (310) 280-5203*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 280-5203*

### TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
*Phone: (310) 280-5203*
*After Hours Phone: (310) 280-5203*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 280-5203*

### INTEGRATED HEALTH PARTNERS

460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (833) 867-4642*
*After Hours Phone: (833) 867-4642*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (833) 867-4642*
*Mailing Address: PO BOX 57216 9;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

### INTEGRATED HEALTH PARTNERS

215 S HICKORY ST
ESCONDIDO, CA 92025
*Phone: (833) 867-4642*
*After Hours Phone: (833) 867-4642*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (833) 867-4642*

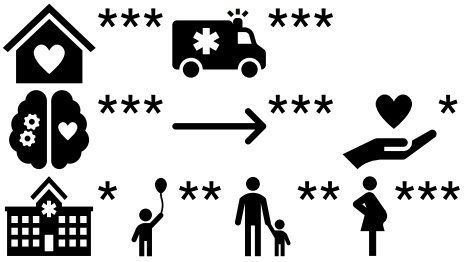
### INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 489-6380*
*After Hours Phone: (760) 489-6380*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (760) 489-6380*

## FALLBROOK

### INTEGRATED HEALTH PARTNERS

1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (951) 616-7026*
*After Hours Phone: (951) 616-7026*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: cmreferrals@chsica.org*
*Phone for New Referrals and Existing Patients: (951) 616-7026*
*Mailing Address: PO BOX 572169;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

## IMPERIAL BEACH

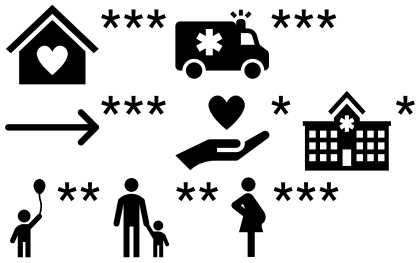
### INTEGRATED HEALTH PARTNERS

949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*
*Mailing Address: PO BOX 572169;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

### IMPERIAL BEACH HEALTH CENTER

949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: ibclinic.org*

*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*

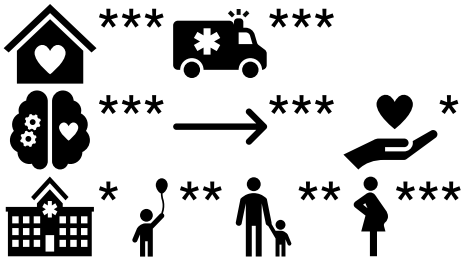
## LEMON GROVE

### LA MAESTRA

### COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMO*

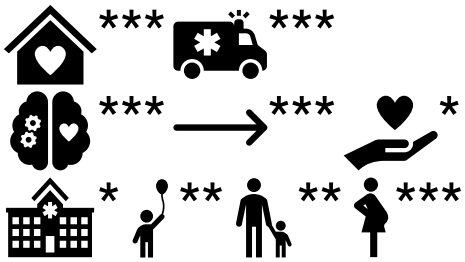
*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*UNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*

### SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*

## LOS ANGELES

### EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
*Phone: (323) 276-6471*
*After Hours Phone: (323) 276-6471*
*Hours: M-F 7:30AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 276-6471*

### EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
*Phone: (323) 276-6471*
*After Hours Phone: (323) 276-6471*
*Hours: M-F 7:30AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 276-6471*

### EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
*Phone: (323) 789-6492*
*After Hours Phone: (323) 789-6492*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 789-6492*

### EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
*Phone: (323) 789-6492*
*After Hours Phone: (323) 789-6492*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 789-6492*

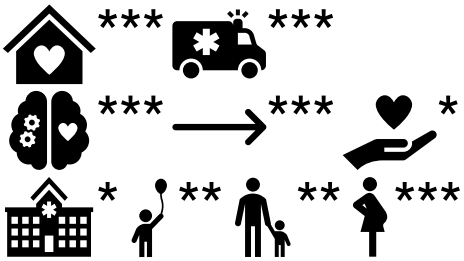
## NATIONAL CITY

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

### LA MAESTRA COMMUNITY HEALTH CENTERS

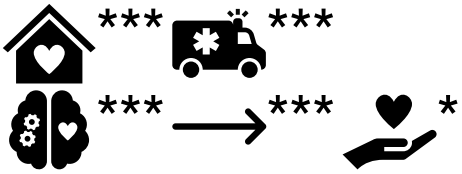
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## ORINDA

### PATHWAY HOME SOLUTIONS INC

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

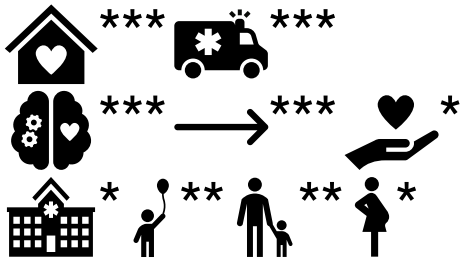
# K. Other Services Providers (Community Supports, Enhanced Care Management)

2 BIRCH CT
ORINDA, CA 94563
*Phone: (209) 601-0734*
*After Hours Phone: (209) 601-0734*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Environmental Accessibility Adaptations (Home Modifications)*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (209) 601-0734*

**PLAYA DEL REY**

## NURTURING CARE LLC

322 CULVER BLVD STE 1151
PLAYA DEL REY, CA 90293
*Phone: (323) 622-4911*
*After Hours Phone: (323) 622-4911*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ADMIN@NURTURINGCARELLC.COM*
*Phone for New Referrals and Existing Patients: (323) 622-4911*
*Mailing Address: 13736 STOCKBROOK RD;Moreno Valley;CA;92553*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**REDONDO BEACH**

## EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
*Phone: (424) 282-2255*
*After Hours Phone: (424) 282-2255*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (424) 282-2255*

## EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
*Phone: (424) 282-2255*
*After Hours Phone: (424) 282-2255*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

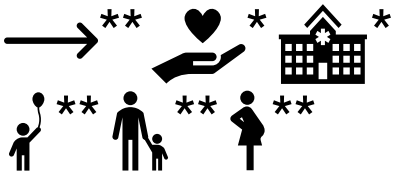
# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (424) 282-2255*

## SACRAMENTO

### FULL CIRCLE HEALTH NETWORK

2201 K ST
SACRAMENTO, CA 95816
*Phone: (888) 749-8877*
*After Hours Phone: (888) 749-8877*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

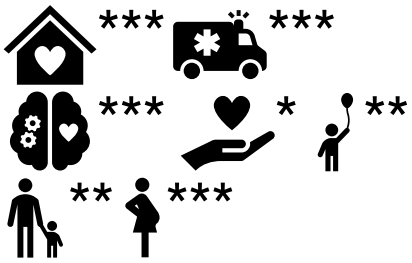


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: network@fullcirclehn.org*
*Phone for New Referrals and Existing Patients: (888) 749-8877*
*Mailing Address: 2201 K ST;Sacramento;CA;95816*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## SAN DIEGO

### HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD
SAN DIEGO, CA 92110
*Phone: (619) 507-9333*
*After Hours Phone: (619) 507-9333*
*Hours: M-F 8AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



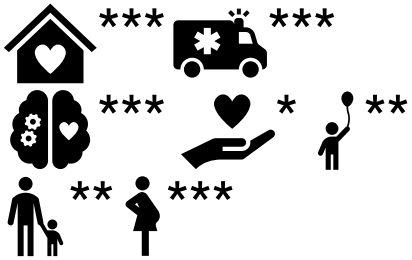
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

### HEALTHY CONNECT SAN DIEGO

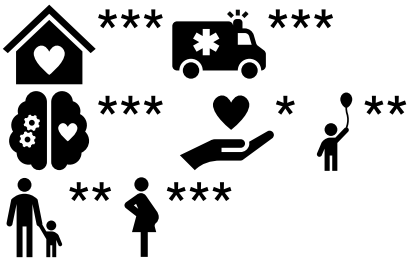
1202 MORENA BLVD
SAN DIEGO, CA 92110
*Phone: (619) 507-9333*
*After Hours Phone: (619) 507-9333*
*Hours: M-F 8AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

### HEALTHY CONNECT SAN DIEGO

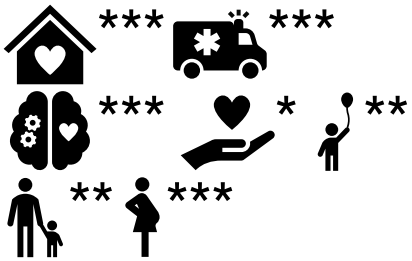
3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108
*Phone: (619) 507-9333*
*After Hours Phone: (619) 507-9333*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

### HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108
*Phone: (619) 507-9333*
*After Hours Phone: (619) 507-9333*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

*mresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

### HORIZON RECUPERATIVE CARE

3423 CHANNEL WAY
SAN DIEGO, CA 92110
*Phone: (858) 326-1100*
*After Hours Phone: (858) 326-1100*
*Accessibility: CONTACT PROVIDER*
*Website: www.horizoncenters.org*
*Community Supports Services: Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (858) 326-1100*

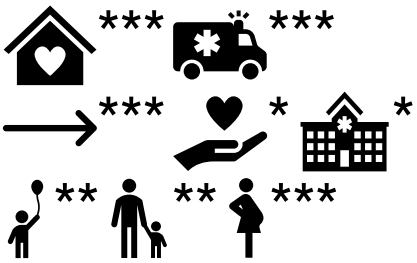
### IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: ibclinic.org*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*

### INTEGRATED HEALTH PARTNERS

1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*
*Mailing Address: PO BOX 572169;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Services-Warm Handoffs Only*

### 2-1-1 SAN DIEGO

3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
*Phone: (858) 380-5750*
*After Hours Phone: (858) 380-5750*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@211sandiego.org*
*Phone for New Referrals and Existing Patients: (858) 380-5750*

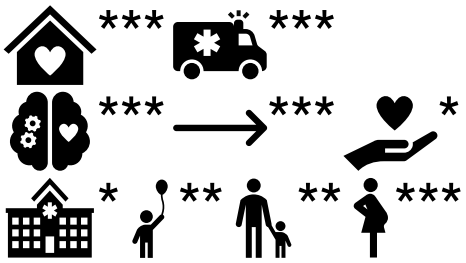
### 2-1-1 SAN DIEGO

3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
*Phone: (858) 380-5750*
*After Hours Phone: (858) 380-5750*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@211sandiego.org*
*Phone for New Referrals and Existing Patients: (858) 380-5750*

### FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
*Phone: (619) 876-4450*
*After Hours Phone: (619) 876-4450*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org*
*Phone for New Referrals and Existing Patients: (619) 876-4450*
*Mailing Address: 823 GATEWA*

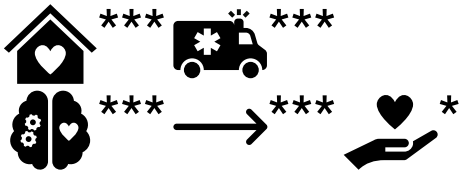
*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

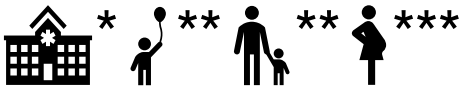
# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Y CENTER WAY;San Diego;CA; 92102*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
*Phone: (619) 876-4450*
*After Hours Phone: (619) 876-4450*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*





*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org*
*Phone for New Referrals and Existing Patients: (619) 876-4450*
*Mailing Address: 823 GATEWAY CENTER WAY;San Diego;CA; 92102*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### FATHER JOES VILLAGES

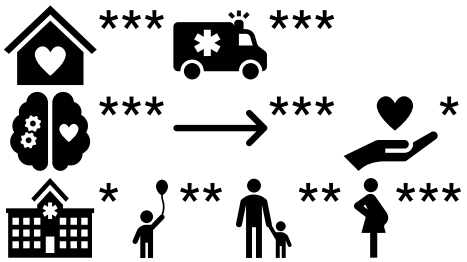
16 15TH ST
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Recuperative Care (Medical Respite)*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 645-6405*

### LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

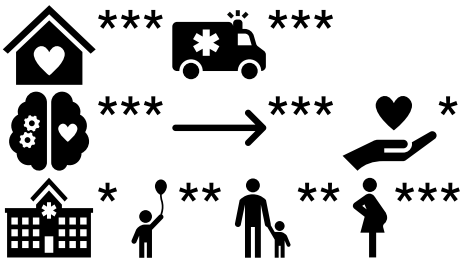
# K. Other Services Providers (Community Supports, Enhanced Care Management)



*Community Supports Services: Asthma Remediation,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Asthma Remediation,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

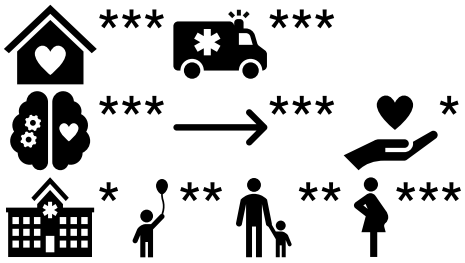
## LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

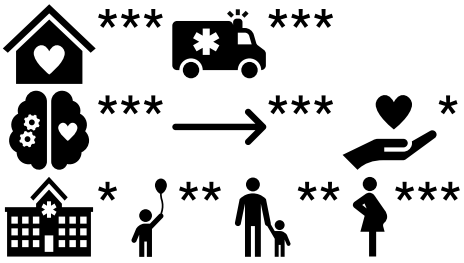
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## LA MAESTRA COMMUNITY HEALTH CENTERS

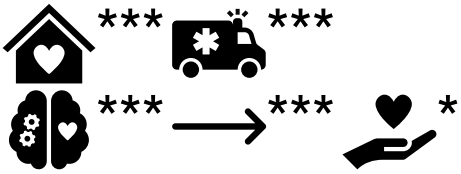
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

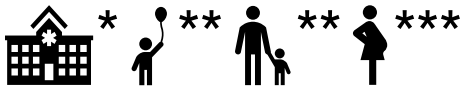
## LA MAESTRA COMMUNITY HEALTH CENTERS

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

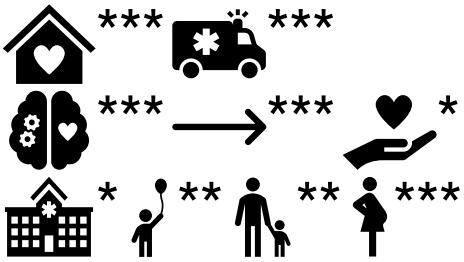
# K. Other Services Providers (Community Supports, Enhanced Care Management)



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

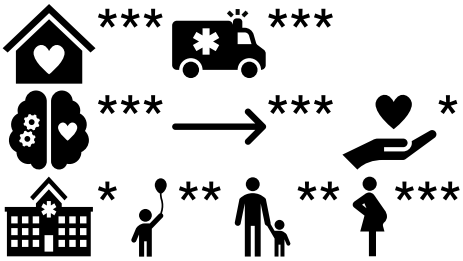
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*

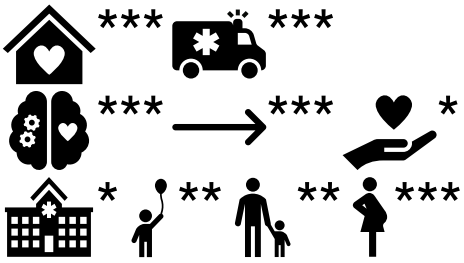
*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

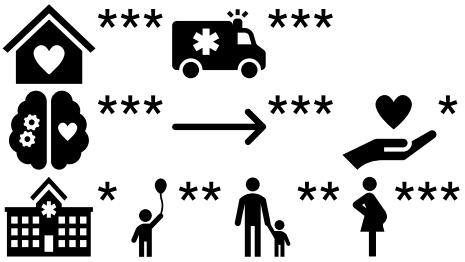
4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and*

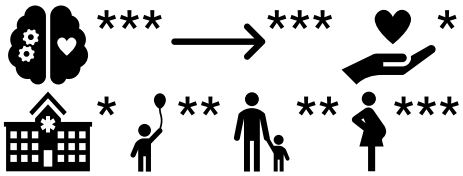
*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMO UNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

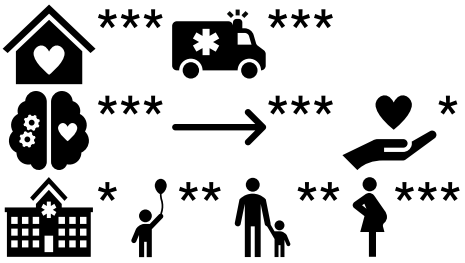
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMO UNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMO UNT AVE;San Diego;CA;92105*

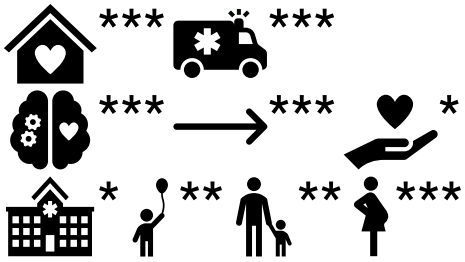
*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

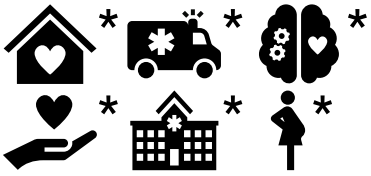
4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
*Phone: (858) 637-3221*
*After Hours Phone: (858) 637-3221*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: calaim@jfssd.org*
*Phone for New Referrals and Existing Patients: (858) 637-3221*

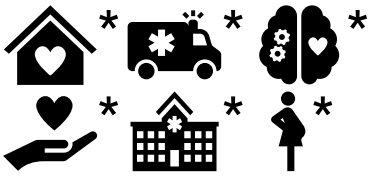
### JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

SAN DIEGO, CA 92123
*Phone: (858) 637-3221*
*After Hours Phone: (858) 637-3221*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: calaim@jfssd.org*
*Phone for New Referrals and Existing Patients: (858) 637-3221*

## INTEGRATED HEALTH PARTNERS

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: VHC_ECM@neighbor.org*
*Phone for New Referrals and Existing Patients: (619) 645-6405*

## INTEGRATED HEALTH PARTNERS

3710 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (619) 542-4381*
*After Hours Phone: (619) 542-4381*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: bescalante@ihpsocal.org*
*Phone for New Referrals and Existing Patients: (619) 542-4381*

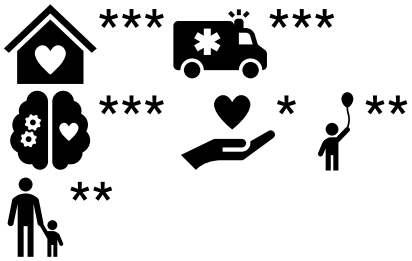
## INTEGRATED HEALTH PARTNERS

4004 BEYER BLVD
SAN DIEGO, CA 92173
*Phone: (833) 503-5910*
*After Hours Phone: (833) 503-5910*
*Accessibility: CONTACT*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@syhealth.org*
*Phone for New Referrals and Existing Patients: (833) 503-5910*

### PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
*Phone: (619) 810-8668*
*After Hours Phone: (619) 810-8668*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Day Habilitation Programs,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 810-8668*

### PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
*Phone: (619) 810-8668*
*After Hours Phone: (619) 810-8668*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Day Habilitation Programs,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 810-8668*

### SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (858) 279-0925*

### SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (858) 810-8700*

### LIGHTBRIDGE HOSPICE LLC

6155 CORNERSTONE CT E STE 220
SAN DIEGO, CA 92121
*Phone: (858) 500-7547*
*After Hours Phone: (858) 500-7547*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: amandas@lightbridgemedical.com*
*Phone for New Referrals and Existing Patients: (858) 500-7547*

### MAMAS KITCHEN

3960 HOME AVE
SAN DIEGO, CA 92105
*Phone: (619) 233-6262*
*After Hours Phone: (619) 233-6262*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 233-6262*

### MCALISTER INSTITUTE

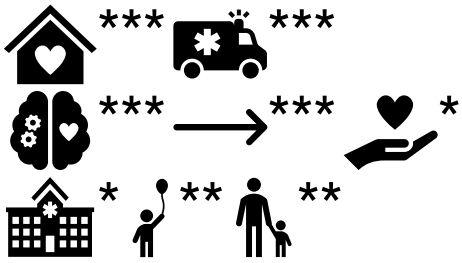
2506 MARKET ST
SAN DIEGO, CA 92102
*Phone: (916) 442-0277*
*After Hours Phone: (916) 442-0277*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Sobering Centers*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (916) 442-0277*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

### SERENE HEALTH

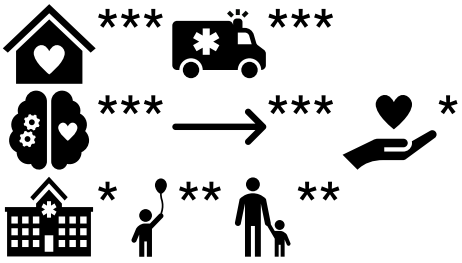
3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*
*Mailing Address: 4849 RONSON CT STE 207;San Diego;CA;92111*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

### SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*
*Mailing Address: 4849 RONSON CT STE 207;San Diego;CA;92111*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

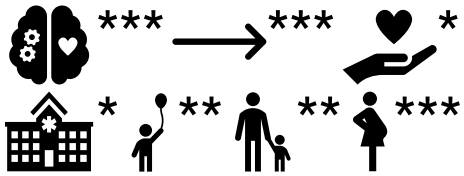
### VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION

3530 CAMINO DEL RIO N STE 300
SAN DIEGO, CA 92108
*Phone: (619) 398-4585*
*After Hours Phone: (619) 398-4585*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*
*Mailing Address: 4849 RONSON CT STE 207;San Diego;CA;92111*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

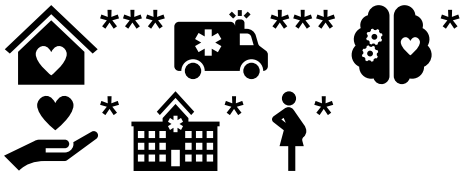


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@voasw.org*
*Phone for New Referrals and Existing Patients: (619) 398-4585*
*Mailing Address: 3530 CAMINO DEL RIO N STE 300;San Diego; CA;92108*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**SAN FERNANDO**

### PARTNERS IN CARE FOUNDATION

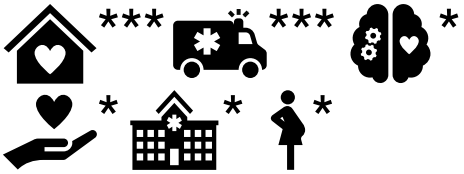
732 MOTT ST STE 150
SAN FERNANDO, CA 91340
*Phone: (747) 500-4609*
*After Hours Phone: (747) 500-4609*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@picf.org*
*Phone for New Referrals and Existing Patients: (747) 500-4609*

### PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340
*Phone: (747) 500-4609*
*After Hours Phone: (747) 500-4609*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@picf.org*
*Phone for New Referrals and Existing Patients: (747)*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

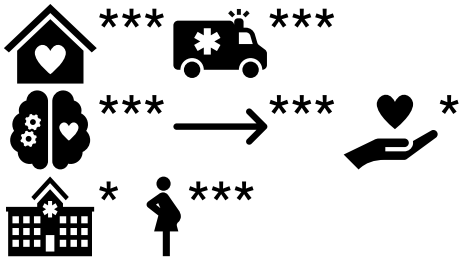
# K. Other Services Providers (Community Supports, Enhanced Care Management)

*500-4609*

## SAN MARCOS

### INTEGRATED HEALTH PARTNERS

150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 566-1922*
*After Hours Phone: (760) 566-1922*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: eva.diaz-leon@truecare.org*
*Phone for New Referrals and Existing Patients: (760) 566-1922*
*Mailing Address: PO BOX 57216 9;Tarzana;CA;91357*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

## VAN NUYS

### LIBERTANA HOME HEALTH OF SHERMAN OAKS

5805 SEPULVEDA BLVD STE 605
VAN NUYS, CA 91411
*Phone: (818) 902-5000*
*After Hours Phone: (818) 902-5000*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Community Transition Services/Nursing Facilities Transition to a Home,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Nursing Facility Transition/Diversion to Assisted Living Facilities,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (818) 902-5000*

## VISTA

### VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# K. Other Services Providers (Community Supports, Enhanced Care Management)

*Community Supports Services:*
*N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecmteam@vcc.org*
*Phone for New Referrals and Existing Patients: (760) 631-5000*

*Adults **Children ***Both Adults and Children †ECM and Community Supports require prior authorization and are limited to members who meet specific eligibility criteria. Street Medicine, or street health, is the practice of bringing health care to people experiencing unsheltered homelessness. Contact Blue Shield Promise Customer Care at 1-855-699-5557 for current information, Monday through Friday, 8:00 a.m. to 6:00 p.m. TTY/TDD: 711. Visit online at blueshieldca.com/promise/medi-cal. Information in this provider directory is subject to change.

# L. Blue Shield Promise Urgent Care Facilities

## SAN DIEGO

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1558788620

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1952995466

8260 MIRA MESA BLVD

# L. Blue Shield Promise Urgent Care Facilities

STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1952995466
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1558788620
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1952995466
1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1558788620
1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1558788620
8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1952995466
8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600

# L. Blue Shield Promise Urgent Care Facilities

SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

## SANTEE

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1396058137
10538 MISSION GORGE RD STE 100
SANTEE, CA 92071
(619) 456-0033
(619) 456-0033
Arabic, Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

## CHULA VISTA

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

# L. Blue Shield Promise Urgent Care Facilities

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM

# L. Blue Shield Promise Urgent Care Facilities

M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER

# L. Blue Shield Promise Urgent Care Facilities

N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720

# L. Blue Shield Promise Urgent Care Facilities

(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

## ESCONDIDO

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

## LA MESA

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2

# L. Blue Shield Promise Urgent Care Facilities

LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER

# L. Blue Shield Promise Urgent Care Facilities

N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED**

# L. Blue Shield Promise Urgent Care Facilities

**FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT

# L. Blue Shield Promise Urgent Care Facilities

CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375

# L. Blue Shield Promise Urgent Care Facilities

*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

# L. Blue Shield Promise Urgent Care Facilities

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197

# L. Blue Shield Promise Urgent Care Facilities

5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

# L. Blue Shield Promise Urgent Care Facilities

(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

## OCEANSIDE

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT

PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

# L. Blue Shield Promise Urgent Care Facilities

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER

# L. Blue Shield Promise Urgent Care Facilities

N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020

# L. Blue Shield Promise Urgent Care Facilities

*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

# L. Blue Shield Promise Urgent Care Facilities

(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

## SAN DIEGO

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Blue Shield Promise Urgent Care Facilities

*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

# L. Blue Shield Promise Urgent Care Facilities

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

# L. Blue Shield Promise Urgent Care Facilities

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER

# L. Blue Shield Promise Urgent Care Facilities

N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800

# L. Blue Shield Promise Urgent Care Facilities

*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

# L. Blue Shield Promise Urgent Care Facilities

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

**SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197

# L. Blue Shield Promise Urgent Care Facilities

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

# L. Blue Shield Promise Urgent Care Facilities

(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

# L. Blue Shield Promise Urgent Care Facilities

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**SOUTHBAY URGENT CARE INC**
*NPI:* 1558746750
1628 PALM AVE
SAN DIEGO, CA 92154
(619) 591-9999
(619) 591-9999
Spanish, Vietnamese
SU 10AM-6PM
M-F 9AM-8PM
SA 10AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.southbayurgentcare.com/
Accepting New Patients: No

# M. Primary Care Index


**2**

2-1-1 SAN DIEGO.....1865
24HR HOMECARE LLC.....1854

**A**

ABDALLAH, ALI. .....416
ABDULRAHIM, AHMED. ..... 57, 81
ABELHAD, NADIA. .....1595
ABELL, GEOFFREY.....552
ABERCROMBIE, SHERI.1483, 1672, 1673
ABRAMSON, RACHEL. .....552
ABSI, CHRISTIAN.....866
ABU-DOULEH, NADIA. .....1202
ACEVEDO, SUSANA.....712, 713
ACKROYD, ARCHIE. .....1816
ACOSTA, ANGELICA. .....809
ADAMI, REBECCA. .....1077, 1326, 1327
ADAMS, LAURA. .....1058, 1543
ADAMS, MONA.....1746, 1752, 1817
ADAMS, STEPHEN. ..... 1034, 1498
ADJAN, ROULA. .....190, 553
ADLER, ERIC. .....1318, 1319
ADLOUNI, LOUBABA.....553
AFC URGENT CARE OF SAN DIEGO. .....1880, 1881, 1882
AFSHAR, KAMYAR. .....1310
AGHILI, ROXANA. .... 782, 861, 1154, 1415
AGING & INDEPENDENCE SERVICES.....1633
AGNIHOTRI, PARAG. .....1318
AGUERO, AMETHYST.....225
AGUERO, PETER. .....1533
AGUILA, YESENIA. .....1202
AGUILAR, EDITA. ..... 227, 228
AGUILAR, JENNIFER.....1712
AHMAD, AAKIF.....411
AISAGBONHI, OMONIGHO.1008, 1403
AKONG, KATHRYN.....1447
AKRAMI, KEVAN. .....815
AKUTHOTA, PRAVEEN.....1311
AL ANI, NAJWAN. .....154, 155
AL AZZAWI, SARAH.....884, 1174
AL KHIAMI, BELAL. .....960, 1092, 1319
AL-BANAA, KADHIM. .....942, 1292
AL-MSHHDANI, AYSER.....518
AL-TAMEEMI, AHMED. .....167, 168
ALAGIRI, MADHU. ..... 1452
ALANI, ANAS.....1191
ALANIZ, MATEO.....84
ALASSIL, SALLY.....486
ALAYARI, AMETHYST. .....1103, 1415
ALBINO, NICHOLAS. .....553, 554
ALBO, MICHAEL.....1570, 1571
ALBRIGHT, KELSEY.....1013, 1464
ALDANA, NANCY. .....228
ALDERSON, CHEVON. .....1275
ALDOUS, JEANNETTE.487, 691, 692, 1296, 1589
ALEXANDER, BRENTON. ..... 884, 1175
ALFIDI, MARY. .....1498
ALFONSO, ALVIN.....912, 1240
ALGHAMDI, ASMA. .... 155, 271, 272, 664
ALGHURAIBI, OHOUD.....868
ALGRA, JEFFREY.....1112, 1462
ALKATIB, RHONDA. .....1407
ALLEN, ELIZABETH.....1009, 1403
ALLEN, KATHERINE. ..... 253, 877, 1203
ALLEN, RACHAEL. .....984, 1374
ALLERS, JENNA.....1013
ALOTAIBI, MONA. ..... 957
ALSHAWABKEH, LAITH. ..... 1191
ALSTEEN, STEPHANIE. .....1203
ALTAMIRANO, LEON. .....1585, 1709
ALVA, WENDY..... 801
ALVARADO, EDMUND.....583
ALVAREZ-ESTRADA, MIGUEL.417, 664, 665
ALWAHAB, AREEJ. .....191
ALWASH, MUSTAFA. ..... 168
ALYAS, ALISIA..... 198
AMANAT, SOROOSH. ..... 85
AMANN, CHRISTOPHER.815, 918, 1255
AMAYA, RICARDO.....135
AMBER HOME. .....1626
AMBO, STANLEY. .....750
AMBROSE, CHRISTOPHER.... 762, 1615
AMERICARE ADULT DAY HEALTH CARE CENTER. .....1632
AMINI, AFSANEH.....780, 856
AMIRNOVIN, RAMBOD.....1416
AMOS, MARIA.....1203
AMREEN HOME.....1626
ANAND, GOBIND. ..... 936, 1284
ANDAYA, MIKHAEL.....272
ANDER, AZIZ.....1581
ANDERSON, ELAINE.770, 804, 847, 1076, 1291
ANDERSON, MANDY.....702, 703
ANDREE, GREGOR..... 554, 555, 1452
ANDREWS, BRAD. ..... 1142
ANDRU HOME.....1625
ANG, LAWRENCE. .....1320
ANWAR, YASMIN. ..... 1113, 1594
ANZA HOUSE. .....1626
AOTO, KIM.1724, 1738, 1747, 1780, 1802, 1817
APPENZELLER, ERICA.....1197
APPLEGET, JOSEPH.....1240
AQUINO, FELINO.....264, 265, 350
ARAFAH, DEEMA.....1435
ARAIZA, ERNESTINA. .....810, 1639
ARCE GOMEZ, LAURA..... 85, 86
ARCHAMBAULT, CHRISTIAN.....555
ARCHIBALD, JOHN.....1764, 1817
ARELLANO, JACQUELINE.818, 896, 897, 1197, 1198, 1199
ARENAS, CECILY. .....1203
ARGOUD, GEORGES. ..... 487, 488
ARIELLA, LYNDA. .....1585, 1709
ARLATA, TAMANTHA. ..... 731
ARLINGHAUS, RENE.....1642
ARMANI, AVA. ..... 841, 1059, 1544, 1616
ARMEEN, GARY. .....1014, 1465
ARMENTA, JORGE. .....199, 294, 583
ARMSTON, LINDSEY. ..... 765, 801
ARRIETA, IRIS.....1610
ARRIETA, NOEMI.....211, 665, 666, 1586
ARROYO, ELYDE. ..... 755
ARTS, SERENA. .....351
ARUTYUNOV, BORIS.....1299
ARVIZU, MARGARITA.....351
ASHAK, DANI. ..... 828, 975, 1360, 1361
ASIMAKOPOULOS, FOTIOS. .....942

# M. Primary Care Index


ASIS, STEPHANIE.....1739, 1753, 1780
ASLIAN, AZITA.....289
ASSADIAN, MEHRAK.....401
ATIENZA, PAMELA.....121
ATIGA, SCHUBERT.....778, 1590
ATMAR, AKMAL.....1125
AUSTIN, ANDREA.....918, 1255
AUSTIN-PAGE, LUKAS.....1416
AVALLONE, THOMAS.....1780
AVILA, MICHAEL.....211, 212
AVILES, LEAH.....135, 136
AWDISHO, ALAN.....168, 169
AWDYKOVYCH, MARTA.....555, 556
AWWAD, REEM.....1035, 1498, 1499
AYELE, MAHOGANY.....1596
AYON MARTINEZ, CARLOS.....744
AYSON, NICOLE.....556
AZIMI, AYSUN.....557

**B**

BACANI, AMY.....1649
BACHARACH, REBECCA.....417, 733
BAEK, KILHYO.....296, 297
BAEZ, BEATRICE.....272, 273
BAGHOUMIAN, MARINEH.....1780
BAGRODIA, ADITYA.....1073, 1571
BAHRAMZI, MARIA.....418, 419
BAI-TONG, SHIYU.....826, 965, 1335
BAILEY, JACOB.....1032, 1493
BAILONY, AHMAD.....290
BAILONY, MOHAMMED.....289
BAIN, NATALIE.....419
BAIOU, MOHAMED.....729
BAISLEY, SHAWN.....62, 233, 234
BAKER, TANYA.....1204
BALDONADO, ANALICIA.....131, 132
BALDWIN, ANDREA.....1131
BALDWIN, DONNA.....346
BALIKIAN, PHILIP.....1170
BALL, SHELDON.....1299, 1300
BALL, STEPHEN.....1052, 1533
BALLAS, JERASIMOS.....823, 963
BALLOUT, REEM.....844
BALTRUS, JUSTINE ANN.....1712
BALUCH, NARGES.....1173
BAMFORD, LAURA.....1297
BANDAK, DIANA.1724, 1739, 1747, 1753, 1768, 1781, 1802, 1817
BANGS, SASHA.....294
BANKS, SARAH.....1483, 1484, 1673
BANSAL, PREETI.830, 853, 1096, 1148, 1375, 1747, 1753, 1818
BAQIR, HUMA.....1674
BARBA, DAVID.....818, 1063, 1553
BARBADILLO, FERDINAND.121, 713, 714
BARMAN, PRANAB.....946, 1294
BARNARD, LUKE.....1080, 1124
BARNES, LAURA.....957, 1311, 1312
BARNES, RYAN.....1545
BARRIOLA RUBARTH, RODRIGO.948, 1300
BARRY, JEFFREY.....919, 1255, 1256
BARSOTTI, ALEXANDRA.....912, 1241
BARTZ, BRYAN.....1533, 1534
BASS, GURGIANA.....1484, 1674, 1675
BAUM, PETER.....65, 66, 666, 758
BAUMAN, LAURA.....1284
BAUTISTA, LUIS.....58, 420
BAXTER, SALLY.....984, 1375
BAYAT, HAMED.....848, 1166
BAYLON, ALDO.....789, 1634
BEAUCHAMP-WALTERS, JULIA..1453
BEAUDRY, AMANDA.....1754, 1818
BEAUMONT, THOMAS.....1063
BECERRA SONGOLO, TOSHA.884, 1175
BECERRA, MAURA.....768
BECHIS, SETH.....1571
BECKMAN, KARI.....1642
BEGOVIC, ADNAN.815, 1090, 1312, 1313
BELANGER, TANYA.624, 625, 626, 1578
BELEN, NEZER.....139, 352
BELL, JENNIFER.....1662, 1663, 1716
BELL, TRACY.....1276
BELLINGHAUSEN, AMY.919, 1256, 1257
BELVERUD, SHAWN.....1553
BEN-HAIM, SHARONA.763, 1063, 1160, 1553
BENARD, ROBERT.....1204
BENAVIDES MARTINEZ, CARIDAD.....1648, 1675
BENCH, SHAWN.....1545, 1546
BENDER STERN, JULIA.....865
BENITEZ, MARTHA.....488
BERGEN, SOPHEA.....1465
BERGERON, PATRICK.....1052, 1534
BERGGREN, ERICA.....703
BERGMARK, JAMIE.....1754, 1818
BERMAN, ZACHARY.....1035, 1499
BERNADETT, ALEX.....1276
BERNARDO, RACHELLE.644, 645, 646
BERNETICH, MEGHAN.....1597
BERUMEN, JENNIFER.....1546
BHATIA, KARISHMA.....885, 1175
BHATIA, SHAGUN.831, 854, 1096, 1148, 1375, 1747, 1754, 1819
BHATTACHARJEE, RAKESH.1447, 1448
BIALOSTOZKY, MARIO.....1416
BICKLER, STEPHEN.....1562
BIFFL, SUSAN.....1112, 1463
BIGELOW, ELSIE.....885, 1175, 1176
BILOTTA, NATALIE.....1204
BINDER, NICHOLAS.1724, 1739, 1754, 1781, 1782, 1802, 1819
BINETTE, DONYA.....297, 298, 1131
BIRGERSDOTTER GREEN, ULRIKA.....1189
BIRS, ANTOINETTE.....894
BISHOP, MELISSA.....420
BISSET, LOGAN.....1035, 1499, 1500
BLACK, NICHOLAS.....919
BLACKWELL, CHRISTOPHER.1035, 1036, 1500
BLAKE, GARY.....518, 519, 1361
BLAND, JACELIS.....1163, 1576
BLASKIEWICZ, DONALD.....763, 1063
BLISS, MORGAN.833, 857, 1098, 1152, 1387
BLOCKER, NIRIT.....609, 610
BOCK, MATTHEW.....1409
BOCKHORN, LAUREN.....1066, 1555
BODIFORD, SAMANTHA.....421

# M. Primary Care Index


BOECK, CARL. ....1819
BOEHMER, ALEXANDRA. ....1053, 1534
BOEING, KRISTINA. ....1241
BOND, KIMBERLEE. ....1373
BONE, SAMUEL. ....1036, 1501
BONSU, BEMA. ....290, 557
BOOTH, CHRISTOPHER. ....1026, 1649
BORDIN-WOSK, TALYA.948, 949, 1300
BOROK, ZEA. ....957, 1313
BORQUEZ, ALEJANDRO. ....1100, 1409
BORSAN, COSMIN. ....666, 667
BORTZ, PASCAL. ....800, 1060
BOSTON, LAURA. ....80, 399
BOUTELLE, AMY. ....899
BOUTELLE, KERRI. ....1027, 1649, 1650
BOYD, LISA. ....1014, 1465
BOYS, JOSHUA. ....1071
BRADY HOME. ....1625
BRADY, KATELYN. ....899
BRADY, PATRICIA. ....421
BRANCH, CODY. ....1036, 1501
BRANCH, LAUREL. ....937, 1284, 1285
BRAZIER, SETH. ....787, 1168
BREEDLOVE, AMANDA. ....1675
BRIED, JAMES. ....1170
BRIGGS, BENJAMIN. ....1440
BRION, SONJA. ....207
BRIONES, NAOMI. ....1250
BRIONES-COLMAN, FELICIA. ....489
BRODSKY, MARK. ....422
BROOME, HELEN. ....1009, 1403
BROUDY, ABRAHAM. ....121
BROWN, BRANDON. ....155, 156, 422
BROWN, DARCIE. ....1675
BROWN, REGINA. ....1142, 1579
BROWN, TERESA. ....1036, 1502
BROWN, VICTORIA. ....1204, 1205
BRUBAKER, ALEAH. ....1546, 1547
BRUECKNER, TAMMIE. ....1014, 1465
BRUHN, JOSHUA. ....156
BRYL, AMY. ....1417
BUCKNER, JOSEPH. ....721
BUECHNER, CHARLENE.111, 179, 180, 257, 258, 519, 520, 521, 522, 523, 736
BUENROSTRO, CHRISTINA. 899, 1205
BUI, ANH. ....1205, 1206
BUI, CHRISTOPHER. ....1556
BUI, JACK. ....1009, 1404
BUI, JONATHAN. ....827, 1345
BUI, QUAN. ....960, 1320
BUI, TINA. ....1782
BUKATA, SUSAN. ....1066, 1556
BULLOCH, EDGAR. ....180
BULLUM, ANTHONY. ....876, 1087
BULOW, KWI. ....1589
BUNOSKY, ABIGAIL. ....1053, 1534, 1535
BURGAMY, ELIZABETH. ....73
BURNS, DELLA. ....352
BURROWS, TERENCE. ....912, 1241
BURROWS, WILLIAM. ....410
BURTON, LUCAS. ....423
BUTLER, KELLEY. ....1587
BUTLER, KIM. ....1739


## C


CABADING, DOREEN. ....138, 139
CABALLERO, JAMES. ....401, 402, 879
CABALLERO, NOE. ....1676
CABANISS, SCOTT. ....885, 1176
CABARLO, JEHRIB. ....557, 558, 714
CABRAL, ALEJANDRA. ....1576
CABREJOS, CLAUDIO. ....1710
CAGE, DORI. ....1552
CAINE, SAMUEL. ....787, 788, 1083, 1126
CALAME, ANTOANELLA. ....1251
CALDERON, JORGE. ....690
CALHOUN, CHANELLE. ....333, 334
CALIFANO, JOSEPH.991, 992, 1387, 1388
CALLAGHAN, KATHRYN. ....1676
CALLAWAY, MALLORY. ....1531
CAMERON, IAN. ....610
CAMERON, MELISSA. ....1453
CAMP, ANDREW. ....1376
CAMPA, PATRICIA. ....811
CAMPBELL, BRIANNA. ....273, 424
CAMPBELL, PATRICK. ....866
CAMPBELL, SARA. ....1417
CAMPOS, MELISSA. ....86, 667
CAMPOS, PRISCILLA. ....66, 759
CANLAS, AVELINO. ....273, 274
CANO, SARAH. ....1176
CANTU, ALICIA. ....1453, 1454
CANTU-REYNA, GUILLERMO.288, 289, 515
CAO, STEPHANIE. ....1819, 1820
CAPETANAKIS, ELENI. ....122
CAPOZZI, JENNIFER. ....899, 1206
CARAWAY, ARLENE. ....755
CARAZO, MATTHEW. ....1191
CARDINELL, ANNA. ....819, 1597
CARDONES, ARTHUR. ....734
CARETHERS, JOHN. ....937, 1285
CARINO DIOKNO, RHODA. ....1484, 1677
CARLO HOUSE. ....1626
CARLSON, BLAKE. ....1037, 1502
CARMONA, RUBEN. ....790, 1084, 1496
CARNEY, AMY. ....208
CARR, MIANDA. ....703, 704
CARRAGEE, CATHERINE. ....1277
CARRERA, JORGE. ....225, 226
CARRIEDO-CENICEROS, MARIA.274, 424, 667, 668
CARRILLO, MARITZA. ....83, 768
CARRION-GELABERT, ANA. ....765, 801
CARROLL, JEANNE. ....1335
CARROLL, MAYA. ....1131
CARSON, LATISA. ....705
CARSON, STEPHEN. ....558
CARSWELL, AIMEE. ....1037, 1503
CARTER, KHALIL.112, 180, 181, 258, 523, 524, 525, 526, 736, 737
CARTER, LEXXUS. ....755
CARTER, NATASHA. ....410, 411
CARVALHO, DANIELA. ....1098, 1388
CASA PACIFICA ADHCC. ....1631
CASAS, TAMARA. ....920, 1090, 1257
CASILLAS BERUMEN, SERGIO.799, 872, 1547
CASTANER, ZALYA. ....212, 213, 744
CASTELLANO, TIFFANY. ....920, 1258
CASTELLANOS, JOEL. ....894, 1188
CASTELLANOS, LUIS. ....1192
CASTELNOVI, CLAUDIA. ....558, 559
CASTILLEJOS, DAVID. ....1731

# M. Primary Care Index


CASTILLEJOS, MARIA. ....1731
CASTILLO, PATRICIA. .... 584, 1466
CASTILLO, STEPHANIE. .... 668
CASTILLO, TRINIDAD. ....1642
CASTLEBERRY, DANI. ....1634, 1635
CATES, DANIEL. ....1389
CAZARES, DARIANA. ....1677
CEBALLOS, JACQUELINE. ....1677
CELAYA, PATRICIA. ....789, 1635
CELESTIN-RAMSEY, AKANKE.352, 353
CELIZ, ADRIANA. .... 657, 765
CENTENO QUIEL, JULISSA. .... 755
CERNELC-KOHAN, MATEJKA.838, 1448
CEVALLOS, JAMES. 274, 275, 668, 669
CHA, DANIEL. ....1730
CHAIN, PEI CHI. .... 780, 1820
CHAIT LLAMAS, LWBBA. ....714, 715
CHAKRABARTI, PRIYA.112, 181, 259, 527, 528, 529, 737
CHALMERS, VIRGINIA. ....1663
CHAMBERS, KATRINA. .... 819
CHAMPAGNE, ALLISON. ....1249
CHAN, ANDY. .... 489, 490
CHAN, CHI-BEW. ....885, 1177
CHAN, KWOK FUNG. ....1731, 1740
CHANDRADAS, SAJIV. .... 490
CHANG, AMY. ....411, 412
CHANG, EDWARD. ....761, 782, 1389
CHANG, JEREMY. ....942
CHANG, JOHANNA. ....838, 1451
CHANG, TOM. ....1748, 1755, 1782
CHANTALA, ELIZABETH. ....1206
CHARP, KENNETH. ....203
CHASE AVENUE FAMILY HEALTH CTRS INC. ....30
CHASE AVENUE FAMILY HEALTH CTRS INC, ....164
CHASE, AVA. ....353
CHAU, PETER. ....1410
CHAU, VIVIAN. ....1755
CHAUSSE CASTRO, EKATERINA.657, 658
CHAVEZ SANTOS, MARIA. ....760
CHAVEZ, ALEXANDRIA. ....1206
CHAVEZ, LUIS. ....769, 804, 1285
CHEATHAM, BRITTANY. .... 1207
CHEHABI, HAZEM. ....974, 1360
CHEN, ALICE. 921, 935, 1258, 1259, 1277
CHEN, ANDREW. .... 847, 1165
CHEN, EILEEN. ....559
CHEN, JAMES. ....490, 491
CHEN, JENNIFER. ....559
CHEN, LESLIE. ....1820
CHEN, MARGARET. ....226
CHEN, TONY. ....1571
CHEN, TSUH-YIN. ....108, 692
CHEN, YU-WEI. ....942, 943, 1292
CHENG, BRANDON.791, 792, 880, 1127
CHENG, GEORGE. ....949, 1300
CHENG, KAREN. ....1037, 1503, 1504
CHENG, SARAH. .... 984, 985, 1376
CHENG, YU-TSUN. .... 1116, 1556
CHERRY, REENA. ....1014, 1015
CHERY, FARAH. ....86, 87
CHESHER, NICHOLAS.1027, 1485, 1650, 1678
CHEW, WESLEY. ....1782
CHEWNING, RUSH. ....1504
CHIARAPPA, FRANK. ....1067, 1557
CHIEN, PEI. ....1053
CHILAKA, SAMUEL.298, 299, 1132, 1597, 1598
CHILDERS, DIANA. ....946, 947, 1295
CHIN, BRIAN. .... 921, 1259
CHISHOLM, KAREN. ....1732
CHISWICK, GARY. .... 646, 647
CHOATE, BERNADETTE. .... 1207
CHOI, JIHOON. ....1067, 1557
CHOI, MIN HU. .... 1660, 1661, 1678
CHOI, NATHALIE. ....916, 1246
CHONG, AMY. ....1454
CHONG, NUBIA. ....1663, 1664, 1717
CHONG, TAMMY.1725, 1740, 1748, 1755, 1768, 1783, 1803, 1820
CHOO, SUN. .... 1154, 1417, 1418, 1441
CHOU, BILL. ....425, 426
CHOU, SUSANNA. ....1587
CHOW, BYRON. ....228, 229
CHRISTENSEN, DIANA.1037, 1038, 1504, 1505
CHRISTY, TYLER. .... 300, 301
CHU, CHRISTOPHER.836, 864, 1108, 1157, 1437
CHULA VISTA FAMILY HLTH CTR. .. 28
CHULA VISTA FAMILY HLTH CTR, . ....104, 105
CHUN, HYUN. ....426
CHUNG, ALLEN. ....1821
CHUNG, PETER. ....792, 880, 1127
CHUNG, SUEMIN. .... 1207
CHWA, JEFFREY. ....799
CIDAMBI, EMILY. ....1161, 1557
CIOBANU, COSMINA. .... 1678, 1679
CIRIELLO, JONATHAN. .... 1038, 1505
CLARY, BRYAN. ....1060
CLEMENT, LUIS. .... 1485, 1679
COBB, DAMON. ....1167
COBIAN, VANESSA. ....213
COBLENTZ, IAN. ....886, 1177, 1178
COCKERHAM, KIMBERLY. ... 1737, 1783
CODEN, DANIEL. .... 1768
COFFEY, CHARLES.992, 993, 1389, 1390
COHEN, CARA. ....229
COLEMAN, BROOKE. ....1765, 1821
COLEMAN, LORI. . 790, 870, 1084, 1497
COLEMAN, PAGE. ....1208
COMUNALE, RODERICK. ....1122
CONE, STEPHANIE. ....191, 192, 291, 560
CONNER, PAMELA. .... 900, 1208
CONNOR, CAROLINE. .... 900, 1209
CONNOR, JEFFREY. ....1765
CONRAD, HEATHER. ....1418
CONRAD, RANDALL. .... 1783
CONSTANTINO, STEPHANIE. .... 734
CONTRERAS, LORETTA. ....585
COOK, LEANNE. .... 921, 922, 1259
COOKISH, DAVID. ....1015
COOPER, MICHAEL. ....1765, 1821
COPELAND, ARDETH. 750, 1608, 1609
CORBIN, DAVID. ....730
CORDES, WILLIAM. ....560, 561
CORDOBA, MIGUEL. ....122

# M. Primary Care Index


CORLEY MILNER, JANTENEE. ..... 756
CORMAN, DANIEL. ..... 156, 157, 427
CORONADO, MYRNA. ..... 66, 669, 670
CORREA, ANN MARIE. ..... 1209
CORTES, ALEJANDRO. 1067, 1068, 1558
CORTEZ, AARON. ..... 1535
CORTEZ, JAIME. ..... 1607
CORVINI, NICOLAS. ..... 866, 877
CORY, ALLISON. ..... 301, 302, 1598
COSINO, ANJELICA. ..... 1209
COSTELLO, MARK. ..... 1535
COTTER, BRUNO. ..... 1192
COULLAHAN, JESSICA. ..... 229
COX, VICTORIA. ..... 213, 214
COYNE, CHRISTOPHER. ..... 1259
CRAFT, KEVIN. ..... 800, 874, 1199, 1593
CRAMER, SCOTT. ..... 1038, 1506
CRANDAL, BRENT. ..... 1028, 1650
CRANE, CLARKSON. ..... 1013, 1445
CRAWFORD, ELWARD. ..... 1074
CRAWFORD, MARK. ..... 1210
CRAWFORD, MICHAEL. 783, 861, 1154, 1418, 1419
CRAWFORD-DAY, ANN. ..... 1712
CRAYCHEE, LEO. ..... 746
CRIPE, TAYLOR. ..... 1015
CRISOL, CAROLINE. ..... 1679
CROSS, JOHN. ..... 1372
CROUCH, DANIEL. ..... 1314
CRUZ RODRIGUEZ, JOSE. 960, 1320, 1321
CRUZ, GUADALUPE. ..... 1639
CRUZ, MICHAEL. ..... 84, 663, 664
CRUZ, VANESSA. ..... 1665, 1718, 1719
CSAPOCZI, PETER. ..... 491
CUMMINGS, GEORGE. 136, 204, 205, 610, 611
CUMMINS, ANDREW. ..... 491, 492
CUNNINGHAM, ISIS. ..... 1117
CUNNINGHAM, STEPHANIE. ..... 877
CURET, ZULMA. ..... 229, 230, 344
CURLEY, EDWARD. ..... 334, 335
CURRAN, BRIAN. ..... 886, 1178
CYMBALUK, ANNA. ..... 1436
CYPRO, ALEXANDER. ..... 1032, 1494
CZYPULL, MONICA. ..... 900


## D


DABU, LISA. ..... 291
DAHMS, ERIC. ..... 492
DAIRO, BRANDON. 764, 843, 1131, 1188, 1189
DALAL, PRITHA. ..... 1112, 1463
DALUGDUGAN, ESTHER. ..... 670, 1587
DAMANI, SAMIR. ..... 894, 961, 1117, 1121
DANESHMAND, SHAHRAM. 705, 706, 707
DANG, ERIC. ..... 1535
DANG, KAYLEE. ..... 1536
DANG, LAUREL. ..... 1278
DANG, TIMOTHY. ..... 918, 1251
DANIELS, SARAH. ..... 335
DAO, MARC. ..... 1609
DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR. ..... 27
DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR, ..... 64
DAP HEALTH-CENTRO MEDICO EL CAJON. ..... 30
DAP HEALTH-CENTRO MEDICO EL CAJON, . ..... 164
DAP HEALTH-CENTRO MEDICO ESCONDIDO. ..... 32
DAP HEALTH-CENTRO MEDICO ESCONDIDO, . ..... 222
DAPPEN, AMANDA. ..... 427
DARWISH, ALEX. ..... 886, 1178
DASCENZO, EMILY. ..... 205
DASGUPTA, DEBORSHI. 654, 655, 656
DAVE, SHRAVAN. ..... 938, 1285, 1286
DAVID, MARVIC. ..... 585
DAVIDSON III, JOHN. ..... 788, 1126, 1127
DAVIES, SUMMER. ..... 901, 1210
DAVIES-UPPAL, ALLISON. 353, 354, 1210
DAVIS, CHARLES. ..... 670, 671
DAVIS, CHRISTOPHER. . 859, 1101, 1410
DAVIS, DEIRDRE. ..... 427, 428
DAVIS, JADE. ..... 1822
DAVIS, JANET. ..... 1211
DAVIS, KELLE. 760, 770, 800, 805, 1291
DAY, CHRISTOPHER. ..... 291, 292
DE DIOS, SARAH JANE. 766, 802, 901, 1211
DE LA CRUZ, ALEKSANDRYA. 766, 802
DE LA ROSA, JOSE. ..... 692, 693
DE MIK, TRAVIS. 113, 182, 259, 529, 530, 737, 738
DEACON, CASSIE. ..... 1680
DEAN, MOENA. 1725, 1740, 1748, 1768, 1784, 1803
DECAMPS, SCARLETT. ..... 934, 1272
DECARLI, TASIA. 303, 304, 1132, 1133, 1598, 1599
DECONDE, ADAM. ..... 993, 994, 1390
DECOOL, TAYLOR. ..... 1211
DEISS, ROBERT. ..... 1297
DEL RE, AMANDA. ..... 244
DEL RE, ANGELO. ..... 1419
DEL ROSARIO, GELEN. ..... 1122, 1123
DEL ROSARIO, PAMELA. ..... 966, 1335
DEL VECCHIO, MEGAN. ..... 1211, 1212
DELCAMPOCASANELLES, MIGUEL. ..... 1290
DELCORE, LAURA. 828, 975, 1362, 1363
DEMASCO, MICHAEL. ..... 1015
DEMESSIE, RAHEL. ..... 354
DEMLINGER, GLENN. ..... 1849
DEMOOR, PATRICIA. ..... 1016
DENTICO-OLIN, MARC. ..... 1386, 1387
DEPAOLO, AMANDA. ..... 1713
DERISSI, DANA. ..... 1466
DEUTSCH, KAREN. ..... 1212
DEVERA, GEMMIE. ..... 783, 1103, 1419
DEWOLF, SEAN. ..... 957, 1314
DHARKAR-SURBER, SAPNA. . 265, 355
DHILLON, NAVNEET. ..... 1259
DHILLON, RACHEL. ..... 1650
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC. ..... 48
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC, . ..... 467
DIAZ, JAENAI. ..... 1680

# M. Primary Care Index


DICKERSON, ANDREW.837, 865, 1108, 1437, 1438
DIEP, KEVIN. ....493
DIJANIC, CHRISTOPHER. ... 1068, 1558
DILLON, BENEDICT. .... 693
DILLON, MAYRA. ....275
DIMAIRA, FRANCESCA. .... 902
DINH, MY. ....707, 1590
DISTEFANO, KIMBERLY.819, 897, 1199
DIXON, SARAH. ....561
DJEKIC, KRISTINA. .... 949, 1301
DO, HULBERT. .... 1579, 1580, 1595
DO, STEPHANIE. ....1103, 1420
DOAN STEPHENS, CRYSTAL.483, 484, 1454
DOAN, ANGELA. ....1212, 1213
DOAN, CHINH. .... 347
DODGE, JOHN. ....493
DOKICH, SRETENKA. ....247, 1591
DOLLAND, STEVEN. .... 913, 1242
DOMINGUEZ, DENNIS. .... 157
DOMINGUEZ, FERNANDO. ....494
DON, MICHELLE. .... 1009, 1010
DONALDSON, CHADWICK. ....761
DONG, TAMMY. ....122
DONOFRIO-ODMANN, JOY. ....1420
DORINGO, ELAINIE. ....123
DORN, TIA. ....255, 256
DOROS, JOSHUA. ....1260
DORUELO, ASHLEY.113, 182, 260, 531, 532, 533, 738
DOSHI, AMI. .... 1455
DOSHI, NEELIMA. ....230
DOSS, KATIE. ....1681
DOUGHERTY, CHRISTINE. .... 1666, 1719
DOVE, KATHERINE. .... 1345
DOWNEY, NANCY. .... 802
DOWNTOWN FAMILY CTR AT CONNECTIONS. ....47
DOWNTOWN FAMILY CTR AT CONNECTIONS, ....467
DRAME, SALWA. .... 586
DRIEBE, AMY. .... 829, 976, 1363, 1364
DRISCOLL, KARRIE. ....902, 1213
DRISCOLL, SUSAN. ....139, 140
DROKER, BRIAN. ....760
DSOUZA, NICOLE. ....1681
DU, SARAH. ....1466
DUARTE, KRISTEN. ....1028, 1651
DUARTE, ZULMA. ....1171
DUBE, AMANDA. .... 1076, 1295
DUBE, BIANCA. .... 59
DUMMER, KIRSTEN. ....1101, 1410
DUNN-PIRIO, ANASTASIE.1345, 1346, 1681
DUONG, CHERYL. ....1765, 1822
DUONG, KIM. ....1755, 1822
DUONG, MAI. ....169
DUONG, NGHI. .... 856, 988, 1383, 1384
DURAN, EDWARD. .... 818
DURNAN, CASSANDRA. 799, 871, 1540
DUSTIN, ADAM. .... 840
DWYER, ERIN. ....820, 1213
DY, DIANE. ....87, 88
DYER, SHARON.1725, 1740, 1748, 1769, 1784, 1804, 1822


## E


EAGLE, SONJA. ....922, 1260
EARLEY, SAMANTHA. .... 1455
ECLARINO, GALELEO. .... 1213
EDMONDS, ERIC. .... 872, 1558
EDNACOT, KARYNNE. .... 1214
EGAN, KAITLYN. ....1028, 1651
EICHEN, DAWN. ....1029, 1651, 1652
EICHENFIELD, DAWN. ....1414, 1415
EISENSTEIN, SAMUEL. ....1541, 1542
EKANAYAKE, PREETHIKA. ....1272
EKHOLM, JANNA. ....1246
EKPENYONG, ATIM. ....1420
EL CAJON ADHC. ....1629
EL-GHONEIMY, AHMED. .... 494, 495
ELLEDGE, LINDSAY. .... 1652
ELSTER, JENNIFER. .... 1441
EMERUWA, UKACHI. .... 963, 1327
EPPERSON, KATRINA. ....1446
ERICKSON, LISA. .... 1214
ESCONDIDO FAMILY HEALTH CENTER. ....32
ESCONDIDO FAMILY HEALTH CENTER, .... 222
ESKANDER, RAMEZ.823, 941, 1144, 1608
ESPERANZA, MELIZZA. ....1682
ESPINOSA-SILVA, YAMINAH.315, 316, 317, 748
ESTAVILLO, SAUL. ....1682
ESTEINOU, ENRIQUE. ....1599
ESTRADA, JOHANNA. .... 671
EVERETT, ELIZABETH.235, 236, 304, 305, 306
EXODUS RECOVERY INC.1859, 1861, 1862


## F


FABELLA, GABRIEL. ....495
FADARE, OLUWOLE. ....1006, 1401
FAIRBANKS, TIMOTHY.841, 1115, 1162, 1547
FALLBROOK FAMILY HLTH CTR. ....35
FALLBROOK FAMILY HLTH CTR, .241, 242
FAMBRO, CYNTHIA. ....428
FAMILY HEALTH CENTERS OF SAN DIEGO. ....1866
FAMILY HEALTH CTR IBARRA. .... 49
FAMILY HEALTH CTR IBARRA, .... 468
FAMILY HEALTH CTR OF SD- ELM ST. ....47
FAMILY HEALTH CTR OF SD- ELM ST, . .... 468
FAMILY HEALTH CTR SAN DIEGO-OAK PARK. ....45, 46
FAMILY HEALTH CTR SAN DIEGO-OAK PARK, ....468, 469
FAMILY HEALTH CTR SD NATIONAL CITY. .... 36
FAMILY HEALTH CTR SD NATIONAL CITY, ....283
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL. .... 48
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL, . .... 469, 470
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE. .... 46

# M. Primary Care Index


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE, .....470
FAMILY HLTH CTR SAN DIEGO-BEACH AREA.....49
FAMILY HLTH CTR SAN DIEGO-BEACH AREA, .....470
FAMILY HLTH CTR SAN DIEGO-EL CAJON.....30
FAMILY HLTH CTR SAN DIEGO-EL CAJON, .....165
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC.....29
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC, .....105
FAMILY HLTH CTR SD HILLCREST..47
FAMILY HLTH CTR SD HILLCREST, .....471
FARBER, EMILY.....982
FARRIS, AMANDA. .....913, 1242
FARSHLER, ANTHONY. .....876
FATHER JOES VILLAGES.....1866
FATLAND, SARAH. .....317, 318
FAZELI, SOUDABEH. . 1039, 1506, 1507
FEJLEH, ASHLEY. .....886, 1178
FEJLEH, MOHAMMAD. ..... 938
FELD, KEREN. .....1215
FERMIL MITCHELL, YVONNE.....1215
FERNANDEZ LEYVA, JUAN CARLOS. .....75
FERRAIOLO, NATALIE.....214, 251
FERRANDO, CECILE.....976, 1364
FERRITER, STACY..... 913, 1242
FIELDING, JOSEPH.....611
FIGUEROA RODRIGUEZ, BRENDA. .....192
FIGUEROA, CHRISTOPHER.....1086
FINCH, CHRISTINA. .....1449, 1539, 1540
FINK, PATRICK. ..... 586
FINN, DAPHNA.....1652
FIREIZEN, YARON. .....1449
FIRESTEIN, CATHERINE.....947, 1296
FIRESTONE, MICHELLE.1485, 1682, 1683
FISHER, JAY.....1420
FISHER, JENNIFER..... 1532
FISHER, SLOANE.....1215
FISHMAN, ELENA. .....561
FLEMING, DAVID..... 263, 264
FLEMING, JOHN..... 1801, 1846
FLEMING, SARAH. .....774, 1335
FLEMING, TARA. .....193
FLETCHER, EMILY. .....123
FLORES, BERTHA.....1576
FLORES, ERNEST. .....123
FLORES, JOE. ..... 428, 429
FLYNN, DANIELLE. ..... 1585, 1710
FODDA, RAMI. ..... 617, 618, 1576
FONTANA, LOUIS. .....1713
FONTANILLA, ROBERT. .....867
FOR THE VILLAGE INC, . ..... 756
FORCIER, NANCY. .....1039, 1507
FORTUNE, ERIN. .....562
FORZANI, CHRISTINA.....1485, 1683
FOWLER, KATHRYN.....1039, 1508
FOX, KENNETH. .....1568
FOX, SUTTON. ..... 949, 1301
FRANK, ETHAN.833, 858, 1098, 1152, 1390
FRANK, GUIDO.....1683
FREEMAN, WANDA.....619, 620
FRENETTE, CATHERINE.....495
FRESNO, BLANCA. .....124, 292
FRIEDMAN, JAIME. .....563
FRIESEN, TZYYNONG.833, 858, 1099, 1152, 1391
FRUGONI, GINA.....1364
FRY, LIANE.....1683
FU, KATHERINE.....1643
FUJII, CINDY.....715, 1592
FULL CIRCLE HEALTH NETWORK. .....1862
FUNARI, CHRISTOPHER. .....867
FUNDINGSLAND, BRENT. ..... 887, 1179


**G**


GAFFEY, ANN.....1061
GAINOR, GRETCHEN.....248
GALLARES, DANIEL.....257
GALLEGOS, CYNTHIA.....355
GALLO, PHILIP.....1596
GANDHI, SHEETAL.....249
GANESAN, ANUSHA.....1441
GANTA, SRUJAN.....1568, 1569
GARA, NAVEEN..... 846, 847
GARCIA CABRERA, ANA.....1548
GARCIA, CALVIN.....914, 1243
GARCIA, CATALINA. ..... 802
GARCIA, DEANA.....587
GARCIA, JENNI.....1326, 1684
GARCIA, JOHNNY.....140, 356
GARCIA, KARLA.....88
GARCIA, RAFAEL. .....124, 292
GARCIA, REGINA. .....1577
GARCIA, RICHARD.....1683
GARCIA, ROSEMARIE. .....1641
GARCIA, TEDAYSHIA. ..... 658
GARFF, KEVIN. .....1844
GARRETT, RILEY. ..... 887, 1179
GARTH, MELISSA.....902, 903, 1215
GEBAUER, HEATHER.....1016, 1467
GEE, JENNIFER....1086, 1150, 1610, 1611
GEHR, MARC..... 496
GENG, BOB.....1407, 1408
GENOVESE, KELLY. .....1133
GEORGE, BRUCE. .....1766, 1849
GEORGE, JOSE.....1068, 1069, 1559
GEORGE, KENDALL. .....1766, 1849
GEORGIEV, MARY-JO. .....1586, 1710
GEPSHTEIN, YANA.....400
GERST, SCOTT.....1039, 1508
GERWER, JOHANNA. ..... 496
GHAFARI, DAUOD. ..... 63, 157, 158
GHAHREMANI, SIMIN.124, 125, 715, 716
GHOLIPOUR, TAHA.....970, 1346
GI, HUNG. .....722, 785
GIAMONA, KRISTEN..... 1486, 1684
GIANG, STEVEN. .....1823
GIBONEY, JENNIFER...1421, 1455, 1456
GILANI, SAPIDEH. .....994, 995, 1391
GILIBERTO, JOSEPH.402, 403, 1119, 1249, 1250
GILROY, LAURA. .....1646
GIOVANNETTI, ERIN. ..... 903
GIRGIS, CHERIF. ..... 429, 430
GIRKIN, CHRISTOPHER.985, 1376, 1377

# M. Primary Care Index


GISH, ROBERT.....167, 286, 484, 485
GLEASON-ROHRER, GWEN. 430, 431
GLENN, TARA.....1336
GOEB, YANNICK.....1069, 1559
GOGGIN, SAMANTHA.....563
GOH, REGINE.....887, 1179, 1180
GOLD, JEFFREY.. 851, 1094, 1095, 1347
GOLDEN LIFE ADHC.....1630
GOLDFINGER, SARAH.....356
GOLDING, IAN.....1410
GOLDMAN, DAVID.....778, 779
GOLDSTEIN, EDWARD.....708
GOLDSTONE, ADAM.....1756
GOLLOGLY, HEIDRUN.....1785, 1804
GOLU, CRISTIANA.....1588
GOMEZ, DANIELA.708, 709, 1590, 1591
GOMEZ, JUANITA.840, 1486, 1641, 1684
GOMEZ, LESLIE..... 903, 904, 1216
GONZALES, MICHELLE.....136, 137
GONZALEZ, JUSTINE ARIEL. 205, 206
GONZALEZ, LISA.....914, 1243
GONZALEZ-GARCIA, CAROLINA..1713
GOODRICH, ANDREW.....922
GOODWIN, RACHEL..... 916, 1247
GORDON, BRENT.....1411
GORDON, CHRISTOPHER.....158
GORDON, EMILE.....1040, 1509
GORGES, RANDA..... 169, 170
GORHAM, LAURA. . 783, 862, 1155, 1421
GOSHEN, KIRSTEN. ..... 904
GOSMAN, AMANDA. .....1562
GOULD, HILARY.....789, 1635
GOWDA, ASHWIN..... 816
GOYAL, NIDHI.....1438
GRACE HOUSE. .....1626
GRANT, PERRIETTE. .....756
GRANT, REBEKAH. .....533
GRAVES, JENNIFER.....1359
GRAY, IGA. .....1737, 1785
GRAY, SARAH. ..... 563, 564, 1456
GRAYSON, ANDREA.....357, 1216
GREAR MANN, MELISSA.916, 1247, 1248
GREENE, JACQUELINE.995, 996, 1392
GREENWAY, HUBERT. ..... 64
GREINER, ALEXANDER.....834, 1408
GREINER, KAREN. 976, 977, 1364, 1365
GRIFFITHS, KENNETH.....431, 432
GRIFFITHS, LUKE. .....1074
GRISSOM, MURRAY....1040, 1509, 1510
GROGAN, BRIAN.....1365
GROSSMONT HOSPITAL. .....1619
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC.....54
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC, . ..... 735
GROVE, JAY..... 872, 1170, 1616
GRUNVALD, EDUARDO.....1301
GUADARRAMA, IGNACIO.....658, 659
GUALTIERI, CHRISTOPHER.....1377
GUAN, HOWARD.....1844
GUERRA, JACQUELINE..... 731
GUIDI, CASEY..... 874, 1606, 1607
GUIDO-ESTRADA, NATALIE.1095, 1347, 1359
GULLY, MICHELLE. .....1118
GULOTTA, SAMANTHA. .....1685
GUNDOGDU, MELEK.....1347
GUNTA, SUJANA. .....336, 337
GUNTHER, HOPE..... 917, 1248
GUPTA, ANUJ.....1595
GUPTA, MONIKA. .....776, 807, 1581
GUPTA, TRIPTI..... 894
GUPTA, VARSHA.....564
GUPTA, VINEET.....1302
GUTH, CARA.....785, 1467
GUTIERREZ DAVILA, ANGELICA...497
GUTIERREZ, TANIA. .....432


## H


HA, THU. .....357, 358, 1217
HACINAS, REYNALDO. .....209, 659
HAI, FAIZI. ..... 481, 482
HALEY, JESSICA.....835, 860, 1411
HALEY, STEVEN. .....403, 404
HALGEDAHL, YI TING.306, 307, 308, 309, 746, 1600
HALVORSON, PAULA. .....876
HAMDAN, AYAD. .....943
HAMID, WAHIDA. ..... 140, 141, 803
HAMILTON, LISA MARIE.214, 215, 432, 433
HAMILTON, ROSS.....760, 852, 971, 1167
HAMMETT, ERIN.....109
HAMMOND, CHARLES.....947, 1296
HAN, ANGELA.....1577
HAN, FREDERICK.....1088, 1189, 1190
HAN, KYOUNG. .....1168
HAN, PAUL.....497
HAN, SULKI.....1741, 1786
HANLEY, LAUREN.114, 183, 260, 533, 534, 535, 738, 739
HANNAWI, ANDREW.....1348
HANNSUN, GEMMY. .....1040, 1510
HANONO, ABRAHAM. .....1767
HANONO, HELFON. .....1767
HANSCH, ERNST. .....1041, 1511
HANSEN, LAWRENCE.....1007, 1402
HARKNESS, RUMIKO. .....904, 1217
HARMIS, NATASHA. .....722
HARPEL, SHERYL.....141
HARRINGTON, BARBARA LORRAINE. .....359
HARRIS, JEFFREY.996, 997, 1392, 1393
HARRIS, PAMELA. ..... 309, 310, 311
HART, BECKY.....359, 1217
HARTFORD, NICOLE. ..... 751
HARTMANN, PHILLIPP.....1438
HARVEY, SCOTT. ..... 977, 1366
HASEGAWA, CHRIS.....1016, 1467, 1468
HASHEM, SHIVA..... 81
HASSANEIN, TAREK. .....485
HASSANI, FARZANEH.....331, 332
HASTANAN, CAROL..... 158, 159
HASTIE, ELIZABETH.....1302
HATEFI, DUSTIN...872, 1064, 1160, 1553
HAWKINS, MELISSA.....1610
HAYDEN HOME. .....1626
HAZELBAKER, PAUL. ..... 498
HEAD, KRISTIN.820, 844, 1088, 1133, 1218
HEADLEY, ALISON. .....1348

# M. Primary Care Index


HEALTHY CONNECT SAN DIEGO. ..... 1862, 1863, 1864
HEFNER, ANNA. ..... 360, 1218
HEINRICI, ALEKA. ..... 671, 672
HELMY, MARWAH. .....1041, 1511, 1512
HENDERSON, PHILIP. ..... 498
HENDERSON, TREVOR. .....565
HENDRIE, KYLE. .....1653
HENDRIX, JEFFERSON...433, 434, 672
HENLEY, MEARA. ..... 620, 621
HENNEIN, LAUREN.831, 854, 1096, 1148, 1377
HENNEMEYER, CHARLES. ..1041, 1042
HENNESSY, JAMES.....867
HEPOKOSKI, MARK.....958, 1314
HERMAN, ANDREA.....716
HERMANSON, KATHLEEN. .....761
HERMES, MARY. .....611, 612
HERNANDEZ, GABRIELA. .....1468
HERNANDEZ, JESSICA.1134, 1135, 1600, 1601
HERNANDEZ, MIRIAM. .....1584
HERNANDEZ, RALPH..... 672, 673
HERNANDEZ, SILVIA. .....1685
HERSKOVITZ, SCOTT. ..... 1421
HEYMAN, BENJAMIN..... 943, 944
HIBBS, NICOLE. .....565
HIETALATI, SAMANTHA..... 966, 1336
HIGGINS, JOSHUA.838, 1016, 1017, 1468
HIGGINSON, MICHELLE. ..... 499
HIGUERA, EDITH. ..... 587
HILL, CARLA. .....727
HILL, GENIELYN. ..... 360
HILL, LINDA..... 605, 606
HILLDALE HABILITATION CENTER. .....1624
HILLIARD, THESALONICA.....361, 1218
HINCHCLIFF, KATHARINE. .. 1071, 1565
HIRSCH, JENNIFER..... 917, 1248, 1249
HIXSON, THOMAS. ..... 1786
HO, AMIEE.....780, 1769, 1823
HO, GORDON.....1190
HO, HOANG.....1823
HO, LYSA. .....348
HO, TRAM. ..... 1730
HOANG, CHI. .....361
HOANG, KENNY. ..... 1801, 1846
HOANG, KEVIN.....1824
HODGKIN, EDWARD. .....159
HOERRES, LYNN. ..... 1218
HOFFMAN, MICHAEL. .....853
HOFFMAN, STEVEN. ..... 1824
HOGAN, NICHOLAS.....1032, 1494
HOGAN, ROSELYNN JOY. ..... 362, 363
HOGARTH, MICHAEL. ..... 950, 1302
HOGUE, BRENNA. ..... 922, 923, 1260
HOLLANDSWORTH, HANNAH.1060, 1548
HOLLICK, NATALIE. ..... 125
HOLMBERG, CARRIE. ..... 1653
HOM, DAVID. ..... 997, 998, 1393
HOM, GREGORY. ..... 1824
HONG, DANA. .....1278
HONG, KIMBERLY. ..... 884, 1172
HONOLD, JOSE. .....1336, 1337
HOO, PAMELA. .... 989, 1769, 1770, 1824
HOPPER, AUSTIN..... 1033, 1034
HORGAN, SANTIAGO.1060, 1548, 1549
HORIZON CBAS. .....1630
HORIZON RECUPERATIVE CARE. .....1864
HORMOZDYARAN, SANAYA. .....565
HORNBEAK, KIRSTEN... 813, 923, 1260
HORNEY, KRISTAN. ..... 363, 364
HORTON, LUCY. .....1297
HOSALKAR, HETAL. .....887
HOSEIN, NADEEN. ..... 412
HOSSEIN ZADEH MALEKI, ANA.776, 807, 1582
HOULE, STEPHANIE.....1594
HOURIHAN, KEITH.151, 152, 271, 404, 1087
HOUSELY, ALEXIS.....1054
HOWE, STEVEN. ....1062, 1115, 1117, 1594
HOWELL, AMANDA. ..... 311, 312
HOXMEIER, KRYSTA. ..... 588
HOYT, BRIGGS. .....986, 1378
HRYNIEWICKI, ADAM. ..... 1261
HSIEH, STEPHANIE. .....879, 1468
HSU, CHRISTOPHER. ... 1741, 1756, 1786
HSUEH, JESSICA. .....986, 1378
HU, JINGJING. ..... 1010
HUANG, GRACE.1725, 1741, 1756, 1770, 1786, 1787, 1804, 1805, 1825
HUANG, MARIA. .....1456
HUANG, PETER. .....1732
HUBLEY, PAUL. ..... 88, 89
HUDSON, HENRY.1081, 1082, 1749, 1756, 1770, 1787, 1805, 1825
HUERTA, STEVEN.1135, 1136, 1601, 1602
HULL, ANDREW. ..... 824, 963
HUNTER, JACOB. .....1017, 1018, 1469
HUPFELD, CHRISTOPHER. .....822
HURST, MICHAEL. ..... 694
HURT, BRIAN. ..... 1042, 1512
HURVITZ, ANDREW. .....1069, 1559
HUSSEMAN, JACOB. ..... 998, 1394
HUSTANA, LARA. .....1770, 1771, 1825
HUTCHISON, HEIDI. .....814
HUYNH, CHI. .....1826
HUYNH, LOAN. .....1826
HUYNH, PAUL.....1378, 1379, 1825, 1826
HYLTON, DIANA.812, 888, 1088, 1180, 1616


## I


IBANEZ, BERENICE.....1592, 1713
IBANEZ, SIR CEDRIC. .....70
IBARRA, ALLISON. ..... 950, 1302
IBARRA, MARTHA.75, 76, 659, 660, 766, 1219
IBRAHIM, ISLAM.....958, 1315
IBRAHIM, MAGED. .....231
IGNACIO, ROMEO.....1549
IKE, ERICA.....731, 732, 1593
ILCHENA, ALESANDRA. .....404, 405
ILICETO, ALESSANDRO..... 971, 1348
IMAM, SYED.....1586, 1710
IMPERIAL BEACH HEALTH CENTER. .....35, 1857, 1864
IMPERIAL BEACH HEALTH CENTER, . .....246
INDA, PRISCILLA. .....132, 785, 786, 809
INDRA, SEAN. ..... 1104, 1422

# M. Primary Care Index


INGULLI, ELIZABETH. ..... 1446
INOCELDA, ANDREW. ..... 761
INSTONE, SUSAN. ..... 364
INTEGRATED HEALTH PARTNERS. 1852, 1855, 1856, 1857, 1865, 1873, 1874, 1878
INTERFAITH COMMUNITY SERVICES. ..... 1856
IRAGUIMADOZ, VICENTE. ..... 971, 1349
ISAIAS, AGNELA. ..... 125, 126
ISHIMINE, PAUL. ..... 1422
ISLAM, JULIE. ..... 153, 154, 412, 413
IVANOV, MARGARET. ..... 950
IYENGAR, RADHA. ..... 73, 74
IYER, VICTORIA. ..... 905

**J**

JABBOUR, MOUSSA. ..... 950, 1303
JABRI, ZAIN. ..... 170
JACKSON, DANA. ..... 193, 194, 263
JACKSON, GAVIN. ..... 499, 500
JACKSON, MADELEINE. ..... 1560
JACKSON, MEGAN. ..... 1261
JACOBS-KLEISLI, MILAGROS. ..... 126
JACOBSEN, GARTH. 841, 1061, 1549, 1550
JACQUES, KAYLA. ..... 971, 1349, 1350
JAFFRAY, JULIE. ..... 1441
JAFFRAY, PAUL. ..... 1042, 1512, 1513
JAIN, ALEXANDRA. ..... 793
JAINCHILL, AMANDA. ..... 434
JAMES, CHRISTINE. ..... 1173
JAMISON, KAREN. ..... 500
JANNESARI, ROYA. ..... 844
JARDON, JAVIER. ..... 187, 188
JAZAYERI, AMIR. ..... 1109, 1439
JEFFERIES, KATHLEEN. ..... 1373
JENKINS, ENCHANTA. ..... 709, 710
JENNINGS, AMY. ..... 1714
JENSEN, BRIAN. ..... 1160, 1666
JEWISH FAMILY SERVICE OF SAN DIEGO. ..... 1872, 1873
JI, AMANDA. ..... 741
JIANG, WEN. ..... 858, 1099, 1394
JIMENEZ BACARDI, ADRIA. ..... 1457
JIMENEZ, ANDREA. ..... 793, 880, 1128
JIMENEZ, KRYSTAL. ..... 89
JIMENEZ, NANCY. ..... 1714
JINDAL, ANUJA. 827, 852, 1095, 1147, 1457
JOHN, MIRA. ..... 958, 1315
JOHN, TANNER. ..... 1278
JOHNSON, CHRISTOPHER. 1801, 1846
JOHNSON, DANIEL. ..... 90, 245
JOHNSON, KENNADY. ..... 1536
JOHNSON, SHAWNA. ..... 364, 365
JOLICOEUR, MEGAN. ..... 936, 1278, 1279
JOMOC, CAITLIN. ..... 989, 1384, 1771, 1827
JONES, CHRISTA. ..... 905, 1219
JONES, SETAREH. ..... 194, 195
JORDAN, JAMIE. ..... 566
JOSHI, YASH. ..... 1685
JOSHUA, JISHA. ..... 1032, 1494, 1495
JOYCE, ROBERT. ..... 1848
JU, NATHANIEL. ..... 748, 1142, 1607
JUANG, PATRICIA. ..... 934, 1273
JUAREZ, AMERICA. ..... 1635
JUAREZ, LETICIA. ..... 203, 601
JUAREZ, PATRICIA. ..... 566
JULIAN, FIDES. ..... 819, 898, 1200, 1201
JUSTINO, HENRI. ..... 1411

**K**

KADER, ANDREW. ..... 1572
KAFRI, HASSAN. ..... 178
KAHL, NICHOLAS. ..... 56, 209
KAHLY, BROOKE. ..... 1639, 1643
KAKAIYA, ROSHNI. ..... 109, 110
KAKISH, DAVID. ..... 1042, 1043, 1513, 1514
KALBAKJI, NATALY. 1726, 1749, 1757, 1771, 1787, 1788, 1805, 1806, 1827
KALRA, ANKUR. ..... 1732, 1806, 1847
KAMDAR, BIREN. ..... 959, 1315
KAMOTO, LYNN. ..... 723
KANDAHARI, MASOOM. ..... 770
KANE, CHRISTOPHER. ..... 1074
KANNAN, SWATI. ..... 1251
KANSAL, LEENA. ..... 972, 1350
KANTAS, PARIS. ..... 660, 661
KARANDE, PRACHI. 793, 794, 881, 1128
KARAPETIAN, ELENA. ..... 1757
KARCHES, KELLI. ..... 500, 501
KARI, ELINA. 998, 999, 1000, 1099, 1100, 1395
KARMAKAR, KANKA. ..... 566, 1457
KASAI, SARAH. ..... 1815
KASAWA, JOHN. ..... 159, 160
KASEY'S HOME. ..... 1624
KATIBIAN, DAVID. ..... 1439
KATZ, YISRAEL. ..... 951, 1303
KATZMAN, BARRY. 1726, 1741, 1788, 1806, 1827
KATZMAN, LEE. ..... 1737, 1788
KAUFER, DAVID. ..... 694, 695
KAUFHOLD, ANNE. 59, 67, 434, 435, 673, 674
KAUFMAN, JENNIFER. ..... 435
KAUNITZ, GENEVIEVE. ..... 1252
KAUR, JATINDER. ..... 215, 343
KAWASAKI, MEGAN. ..... 888, 1180
KAZEM, AHMAD. ..... 405
KAZEM, HARON. ..... 82
KEARNS, MARK. ..... 1072
KEDDINGTON, JOAN. 1733, 1806, 1847
KEEN, WILLIAM. ..... 895
KEFLEZIGHI, BAHGHI. ..... 436
KELCHNER, MATTHEW. ..... 58, 729
KELLEHER, BRIDGET. 237, 238, 313, 746, 747, 874, 1137, 1602, 1603
KELLER, BENJAMIN. ..... 1562
KELLOGG, KRISTEN. ..... 141, 142
KELLY, KATHERINE. ..... 1141
KELNER, MICHAEL. ..... 1013, 1406, 1407
KEMP, KATHRINE. ..... 365, 1220
KESANAPALLI, DEEPTHI. ..... 567
KETCHEL, CLINT. 319, 320, 321, 322, 749
KEUM, SARAH. ..... 766
KHAFAJA, MOHAMAD. 1653, 1685, 1686
KHALIGHI, PAYMAN. ..... 1828
KHALIL, VADY. 1726, 1742, 1749, 1757, 1772, 1789, 1807, 1828
KHAMISA, SORAIYA. ..... 1686
KHAMISHON, BORIS. ..... 1350
KHAN, ALIYA. ..... 183
KHAN, FAHAD. ..... 1828

# M. Primary Care Index


KHAN, MATTHEW. ..... 365, 366
KHAN, SHAHFAR. ..... 1422
KHANNA, ARJUN. ..... 1064
KHANNA, POORNIMA. ..... 501
KHARE, MANASWITHA. ..... 1457
KHATIB, NORA. ..... 1379
KHIEU, TINA. 1727, 1742, 1749, 1758, 1772, 1789, 1807, 1808, 1829
KHINDA, SUNEHA. ..... 1766, 1829
KHURANA, AMAN. ..... 1043, 1514
KI, TRISH. ..... 366
KIDANE, ZINNIA. ..... 1220
KIDDER, BRENDAN. ..... 436
KIM MCMANUS, OLIVIA. 828, 852, 1095, 1351
KIM, DANIEL. ..... 1159
KIM, ELIZABETH. ..... 888, 1181
KIM, GRACE. ..... 1252
KIM, JENNY. ..... 1733
KIM, JIUN. ..... 110
KIM, JOHN. ..... 1372
KIM, MICHAEL. ..... 1150, 1611, 1612
KIM, MICHELLE. ..... 1167
KIM, PHILIP. 989, 1384, 1758, 1772, 1773, 1829
KIM, SHANNON. ..... 1189
KIM, YUHEE. ..... 256
KIM, YUNMI. ..... 1118, 1220
KINDRED HOSPITAL SAN DIEGO. 1619
KING CHAVEZ HEALTH CENTER. ..... 45
KING CHAVEZ HEALTH CENTER, . 471
KING, MARY. ..... 1733, 1808, 1847
KINGDON, JOANNA. ..... 1104, 1155, 1422
KIRKLAND, STEPHANIE. 238, 239, 240, 875
KLAREN, AMANDA. ..... 1758, 1829
KLEIN, DAVID. ..... 978, 1366, 1367
KLIGIS, GABRIELLE. ..... 1686
KLINE, LANNING. ..... 1379
KLING, KAREN. 842, 873, 1115, 1162, 1563
KLUEMPER, NICOLE. . 1486, 1487, 1687
KNOX, LATANIA. ..... 756
KNUTSON, THOMAS. ..... 873
KOBAYASHI, KAREN. ..... 1591
KODSI, ALICIA. ..... 195
KOHATSU, KAREN. ..... 1367
KOHLI, KANCHAN. ..... 1653, 1687
KOHOUT, KATHRYN. ..... 1577
KOLAR, MATTHEW. ..... 1252
KOLB, FREDERIC. ..... 1565, 1566
KONDILI, DHIMITER. ..... 1043, 1515
KOO, ANITA. 780, 781, 808, 857, 1124, 1125
KORMANIK, PATRICIA. 820, 905, 1603
KORSAND, SID. ..... 126, 127
KOSEL, MATTHEW. ..... 647, 648
KOTHA, PURUSHOTHAM. ..... 1075
KOTHA, ROSHAN. ..... 1085
KOUSARI, JHALEH. ..... 621, 622, 623
KRAK, MICHAEL. ..... 751, 1423
KRAMER, MELISSA. ..... 337
KRAPES, MICHAEL. ..... 1160, 1667
KRAUSE, AMANDA. ..... 938, 939, 1286
KRAUSE, MARTIN. 812, 893, 1088, 1188, 1617
KRESHAK, ALLYSON. ..... 923
KRIJGER, LISA. ..... 501, 502
KROL, CAITLIN. ..... 888, 1181
KRUCKENBERG, KATHERINE. 1687, 1688
KRUMMEN, DAVID. ..... 1321
KRYSHTAFOVYCH, SOLOMIYA. 923, 1261
KUIOKA, TROY. ..... 206
KULASA, KRISTEN. ..... 934, 1273
KULISCHAK, JOHN. ..... 1773, 1830
KUMAR, AVNEE. ..... 1114, 1618
KUMAR, SOMA. ..... 1286
KUO, DENNIS. ..... 1442
KUO, SELENA. ..... 939, 1286, 1287
KUPELIAN, CHLOE. ..... 1076, 1296
KUROSAKA, MOMO. ..... 1279
KURZ, TROY. ..... 1636
KUTZ, CRAIG. ..... 924, 1262
KVIATKOVSKY, MILLA. ..... 951, 1303


## L


LA COSTA HOUSE. ..... 1624
LA MAESTRA CHC EL CAJON BROADWAY. ..... 29
LA MAESTRA CHC EL CAJON BROADWAY, . ..... 165
LA MAESTRA CHC-REA AVE. ..... 29
LA MAESTRA CHC-REA AVE, . 165, 166
LA MAESTRA COMMUNITY HEALTH CENTERS. ..... 1853, 1858, 1860, 1867, 1868, 1869, 1870, 1871, 1872
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT. ..... 47
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT, . ..... 472
LA MAESTRA FAMILY CLINIC INC. 30, 37, 47
LA MAESTRA FAMILY CLINIC INC, . ..... 166, 284, 472
LACH, REBECCA. ..... 90, 437, 438
LACHARITE-ROBERGE, ANNE-SOPHIE. ..... 961, 1321, 1322
LAD, NIKISHA. ..... 1661
LAFORTEZA, JOZELLE. ..... 1221
LAFREE, ANDREW. ..... 924, 1262
LAGO HERNANDEZ, CARLOS. 951, 952, 1304
LAI, AMARA. ..... 215, 216
LAIDLAW, JOHN. ..... 1688
LALITHAKUMARI, ARYA. ..... 502, 503
LAM, ANNE. ..... 1773, 1774, 1830
LAM, DAVINA. ..... 1469
LAM, KHANH. ..... 764, 1201
LAM, MICHAEL. ..... 952, 1304
LAMALE-SMITH, LEAH. 829, 853, 978, 1367
LAMANTIA, MICHELE. ..... 287, 503, 695
LAMBERT, GAGE. ..... 1470
LANDEO GUTIERREZ, JEREMY. ..... 1449
LANDIS, SARAH. ..... 839
LANE, BRIAN. ..... 1337
LANE, KIMBERLY. 767, 800, 820, 906, 1076, 1221, 1222
LANG, LESLIE. ..... 1137
LANTRIP, KEATON. ..... 914, 1243
LANUZA, MARK J. ..... 276
LAPINA, LORI. ..... 589, 590
LARA, LESLEY. ..... 91, 674
LARSEN, JULIE. ..... 1373

# M. Primary Care Index


LASALLE, ELIZABETH.835, 860, 1101, 1153, 1412
LASSWELL, EVE. ..... 1029, 1654
LAU, JANICE. ..... 1830
LAU, KUEN CHINE. ..... 1830, 1831
LAURENT, LOUISE. ..... 824, 964, 1328
LAVEMAN, EVAN. ..... 924, 925
LAVERTY, CHAMINDRA. ..... 1351
LAW, KAREN. ..... 91, 276
LAWRIE, ALISA. ..... 567
LAZAR, DAVID. ..... 1563, 1564
LE ROUX, MICHELLE. ..... 947
LE, CRYSTAL. ..... 850, 1338
LE, DIANA. ..... 204, 601, 602
LE, HUAN. ..... 1495
LE, NGUYEN. ..... 567
LE, TAM. ..... 1758
LE, TAYLOR. ..... 810
LEBENSOHN CHIALVO, FLORENCIA. ..... 1487, 1688, 1689
LEDBETTER, ALEX. ..... 1654, 1689
LEE, AUSTIN. ..... 1808
LEE, BEGEM. ..... 1458
LEE, DAVID. 972, 1351, 1352, 1654, 1689
LEE, JASON. ..... 1750, 1759, 1831
LEE, JENNIFER. ..... 1018, 1470
LEE, JIHYUNG. ..... 898, 1201, 1202
LEE, JOSEPH. ..... 674, 675
LEE, KAREN. ..... 1292
LEE, RYANT. ..... 612
LEE, SALLY. ..... 1790
LEE, SANDRINE. ..... 438, 439
LEGACY CARE ADHC CBAS. ..... 1631
LEHNERT SCHUCHARDT, ELEANOR. ..... 1412
LEIBEL, SYDNEY. ..... 1408, 1409
LEMON GROVE FAMILY HEALTH CENTER. ..... 36
LEMON GROVE FAMILY HEALTH CENTER, ..... 256, 257
LENHART-PENDERGRASS, PATRICIA. ..... 838, 1110, 1158, 1450
LENNON, RYAN. ..... 366, 367
LEONARD, BEVERLY. ..... 76, 142, 732
LEONARD, LISA. ..... 1610
LEPEZ, DAVID. ..... 675
LEUIN, SHELBY. ..... 833, 859, 1153, 1396
LEUTE, ERIC. ..... 277, 676
LEVERONE, NICHOLAS.817, 1033, 1114, 1304, 1618
LEVINE, MATTHEW. ..... 413
LEVY, AVIYA. ..... 865, 1451
LEVY, MICHAEL. ..... 1554
LEVY, PHILLIP. ..... 1790
LEWIS, KATHY. ..... 790, 791, 1127
LEWIS, MICHAEL. ..... 1569
LEWIS, PRIYA. ..... 1566
LI, ALEXANDRIA. ..... 1379
LI, HOJUN. ..... 1442
LI, JINGHONG. ..... 925, 1090, 1495, 1617
LI, KINCHEON. ..... 1442
LI, XIA. ..... 1654, 1689, 1690
LIBERTANA HOME HEALTH OF SHERMAN OAKS. ..... 1878
LIEBER, CAROL. ..... 65, 367
LIGHTBRIDGE HOSPICE LLC. ..... 1875
LIM, GARRETT. ..... 1044, 1515
LIM, IMELDA. ..... 266, 367, 368, 1118
LIM, STEVE. ..... 1643
LIN, CHRISTINE. ..... 959, 1316
LIN, HENRY. ..... 1831
LIN, JOYCE. ..... 1019
LIN, SHINKO.803, 804, 1120, 1164, 1252, 1253
LIN, TOM. ..... 1439
LINARES, YENDI. ..... 244
LINDA VISTA HEALTH CARE CTR. .. 50
LINDA VISTA HEALTH CARE CTR, . ..... 472, 473
LINDBACK, SARAH. ..... 344
LINDEMAN, KURTIS. ..... 439
LINDEMANN, CHRISTINA. ..... 1470
LINDSEY, SABRINA. ..... 844
LIOTTA, BENJAMIN. ..... 926, 1262, 1263
LIOU, ANGELA. ..... 1443
LIOU, YUJIE. ..... 1253
LIPARI, RACHEL. ..... 983
LIPPI, MATTHEW. ..... 926, 1263
LIPSCHITZ, LISA.114, 115, 184, 261, 536, 537, 538, 539, 739
LIU, ANDREW. ..... 1146
LIU, SHANGLEI. ..... 1057, 1542
LIU, TIMOTHY. ..... 1690
LIU, YUNXIANG. ..... 1380
LIU-BARBARO, DOROTHY. ..... 251
LLANES, BENJAMIN. ..... 1832
LLOYD, MATTHEW. ..... 590
LOEFFLER, ALLISON. ..... 1147, 1583
LOGAN HEIGHTS FAMILY HEALTH CENTER. ..... 45, 51
LOGAN HEIGHTS FAMILY HEALTH CENTER, ..... 473, 474
LONGARDNER, KATHERINE.1352, 1690
LOPER, KAREN. ..... 568
LOPEZ, JOANNA. ..... 1641
LOPEZ, MARIBEL. ..... 1714
LOPEZ, MARIO. ..... 591, 742
LOPEZ, NICOLE. ..... 1058, 1542
LOPEZ, XIMENA. ..... 1110, 1458
LORENZO, PATRICIA. ..... 414
LOSTETTER, ADRIENNE. ..... 345
LOUGH, MICHELLE. ..... 440
LOVERN, JENNIFER. ..... 405, 406
LOVING CARE ADHC. ..... 1631
LOZIER, JEFFREY. ..... 1167
LU, JULIE. ..... 440
LU, TAMMY. ..... 142, 143, 368
LUCEY, MEGHAN. ..... 1639
LUHAR, RIYA. ..... 516
LUI, ASONA. ..... 1034
LUJAN, ARLEEN. ..... 568
LUKACZ, EMILY. ..... 936, 1283
LUM HO, RACHEL. ..... 1583
LUM, YUIN-WAH. ..... 267
LUNA, ABIGAIL. ..... 878, 1222
LUONG, TRAN. ..... 1019
LUSBY, FRANKLIN. ..... 1774
LUSCHWITZ, BRIAN. ..... 751, 752
LUU, DANIEL. ..... 1250
LWIN, THUTHIRI. ..... 1593


**M**


MA, GARY. ..... 961, 1322
MA, JANET. ..... 961, 1322
MAC, VICTOR. ..... 337, 338

# M. Primary Care Index


MACIAS, ALISSA. ..... 623, 624
MACINTYRE, ELIZABETH.....338
MACKAY, GILLIAN.830, 978, 979, 1368
MADANY, GEORGE.....569
MAGEE, ANNA. ..... 1647
MAGIT, ANTHONY.1000, 1001, 1396, 1397
MAGNOLIA ADULT DAY HEALTH CARE.....1629
MAHENDRAN, SRIVIDYA.....569
MAHMUD, EHTISHAM. ..... 1323
MAHTA, ALI. ..... 972, 1353
MAJITHIA, AMIT.....952, 1305
MALAK, LAWRENCE. .....1636, 1691
MALEK, MIKHAIL. ..... 848
MALEKSHAMRAN, KEYVAN. ..... 231
MALHOTRA, ARATI.....638, 639, 640
MALINAK, JAMES..... 171
MALONEY, IAN..... 889, 1181, 1182
MALONEY, NOLAN..... 1253
MAMAS KITCHEN.....1875
MANCHEL, BRUCE. 134, 602, 603, 726
MANDEVILLE, ROSS. ..... 776, 807, 1582
MANDOYAN, AUSTIN. .....160, 441
MANGENE, CYNTHIA. .....143
MANGINE, REGINA..... 732
MANI, NASRIN. ..... 188
MANNEN, JOSEPH. .....1737, 1790
MANNINO AVILA, ELIZABETH. ....1458
MANNINO, ELIZABETH. ..... 252
MANRIQUEZ-CASTILLO, ERENDIRA. ..... 569, 570
MANSY, TAMARA. ..... 171
MANZO, CORINA. ..... 368, 369, 1222
MARANO, RACHEL. .....1459
MAREK, MAKSYM..... 777, 808, 1582
MARINO, NIKOLAS.....952, 1305
MARISCAL, MIGUEL. .....786
MARKS, ROBERT. .....1044, 1516
MARLAY, GREG. .....1808
MAROLLA, ALICE. .....1054
MARR, RYAN.....1790, 1832
MARSHALL HOUSE.....1627
MARSHALL, LAWRENCE. ....1064, 1554
MARSTON, JACQUELINE. .....441, 442
MARTIN, FREDERIC. ..... 516, 517
MARTIN, HALEY. .....1020, 1470
MARTIN, RIA..... 369
MARTIN, THOMAS. ..... 1297, 1298
MARTINEZ, BRIANNA.....1280
MARTINEZ, CAROLYN. .369, 370, 1222
MARTINEZ, NORAYMA. .....1643
MARTINEZ, STEPHANIE.1636, 1655, 1691, 1692
MARTINEZ-ANDREE, INGRID. ..... 570
MARTINEZ-MURGUIA, IRENE.295, 591, 592
MARYOUNG, ALLISON.1727, 1742, 1759, 1774, 1791, 1809, 1833
MASCARENO, EFRAIN. .....1734
MASCH, JESSICA. ..... 1544
MASON, MATTHEW. ..... 1263
MASSENBURG, BENJAMIN.1567, 1568
MATICH, BRANKO. ..... 443, 444
MATOBA, NANA....775, 966, 1338, 1339
MATSUOKA, AKIHIRO.1001, 1002, 1397
MAURIZ, GRAZIANO. ..... 1647
MAXWELL, BENJAMIN. .....1655
MAXWELL-JUNGE, MELISSA. .....1640
MAY, LOUIS. .....172, 696, 805
MC ELROY, CARTER. .....1536
MCADAMS, JOSEPH. .....1020, 1471
MCALISTER INSTITUTE. .....1875
MCAULEY, ROBERT..... 1647
MCCALLUM, JAMES. .....414, 415
MCCAMMACK, BRADLEY.338, 339, 340
MCCANDLESS, RACHEL. ..... 1102, 1412
MCCLEAN, ESMERALDA.990, 1774, 1833
MCCULLEY, DAVID. .....1339
MCCULLOUGH, DEIRDRE.773, 1078, 1328
MCCULLOUGH, LYAN LOVE..... 1118
MCCULLUM, TIFFANY..... 1487, 1692
MCDANIEL, MICHELE.926, 927, 1264, 1423
MCEVOY, ANNE..... 1423
MCFARLAND, NATHAN..... 252, 253
MCGEE, JACQUELINE..... 762, 871
MCGHEE, JULEA. .....1644
MCGRAW, JOSEPH.1727, 1750, 1759, 1791, 1809, 1833
MCGUIRE, WILLIAM. ..... 1033, 1496
MCHENRY, KATHRYN. .....216
MCINTYRE, RYAN. .....67, 68
MCKENNETT, MARIANNE. ..... 92
MCKINNEY, SARA.830, 979, 1368, 1369
MCKNIGHT, TRISTAN.....1404
MCLAUGHLIN, ERIK. ..... 444, 1280
MCMAHON, SHARON. .....127
MCMURREN, BRITTANY. .....1742
MCNEALY HOUSE. .....1625
MEADOWS, AUDRA.979, 980, 1369, 1370
MEAGHER, RAISHELLE. .....1715
MEASER, JACQUELINE. ..... 889, 1182
MEDINA, ALEXANDER. .....277
MEDINA, RUBELETA. ..... 1223
MEDZED PHYSICIAN SERVICES INC. .....1852
MEIER, EMILY.....1488, 1692
MEKEEL, KRISTIN. ..... 1570
MELBER, DORA.773, 850, 964, 1078, 1092, 1093, 1144, 1329, 1330
MELENDEZ, ARIANA..... 980, 1370
MELGAR, MONICA. .....445
MENDENHALL, ANNA. .....207
MENDES, CHANTAL. .....784, 862, 1424
MENDEZ, ANDRES..... 1030, 1655
MENDEZ, DIEGO. ..... 115, 184, 185, 710
MENDEZ, JESUS.....132, 133
MENDOZA, GRETEL MARIE. 370, 1223
MENDOZA, RAYMUNDO.....1810
MENON, POOJA..... 92
MERALI, MURTAZA. .....1792
MERCADO FORSECK, ALEJANDRA. ..... 756
MERCER, KELLY. ..... 199, 200, 295, 592
MERGENTHALER, SIGRID.....1711
MERRILL, COREY. .....1021, 1471
MERRILL, SARAH. ..... 93
MERTE, BRYAN. .....1264
MESIWALA, ADNAN. .....1104, 1424

# M. Primary Care Index


METCALF, ASHLEY. ..... 1424
MEYER, MEGAN. ..... 889, 1182
MICHAEL, RAMI. ..... 172, 805
MICHALOWSKI HOME. ..... 1625
MICHEL, MATTHEW. ..... 1560
MICK, SHARON. ..... 906, 907, 1223, 1224
MID-CITY COMMUNITY CLINIC. 49, 50
MID-CITY COMMUNITY CLINIC, . 474, 475
MIDORO, ABEGAILLE. ..... 1119, 1224
MIGNEA, DAVID. ..... 137, 206, 612, 613
MILDER, EDMUND. ..... 1445
MILES, RENEE. ..... 1647
MILLAR, MELISSA. ..... 1183
MILLER, DIANA. ..... 322, 323, 1143
MILLER, DONALD. ..... 340
MILLER, EVA. ..... 1224
MILLER, JULIE. ..... 1615
MILLER, LAUREL. ..... 592, 593
MILLER, WILLIAM. ..... 616
MILLS, BRAD. ..... 1693
MILLS, DAVID. ..... 1105, 1425
MILLS, MORGAN. ..... 551
MILLS, TATYANA. ..... 1459
MINOKADEH, ANUSHIRVAN. ..... 813
MIRACLE, ANGELYN. ..... 1089, 1593
MIRON, JEAN-PHILIPPE. ..... 1693
MISTRY, CHETAN. ..... 127
MITCHELL, NORA. ..... 1655
MIZOGUCHI, LIANNE. ..... 1775, 1834
MIZZELL, ANNA. ..... 895, 1193
MODHWADIA, MAMTA. ..... 1672
MOELLENHOFF, MICHAEL. . 889, 1183
MOHAMEDALI, BURHAN. 770, 771, 805, 848, 1323, 1580
MOHAMEDI, NADIA. ..... 278
MOHAMMAD, AHMAD SHAH. 777, 1080
MOHEBBI, ATHENA. ..... 907, 1225
MOLINOS, NICOLE. ..... 250
MOLL, ANGELA. 831, 854, 855, 1097, 1149, 1380, 1750, 1759, 1834
MONAHAN, CAROLYN. ..... 640
MONARCH HOME. ..... 1625
MONGA, MANOJ. ..... 1572, 1573
MONTANE, RUBEN. ..... 1250
MONTEZ, REBECCA. ..... 1667
MONTGOMERY HOUSE. ..... 1627
MONTGOMERY JR, KEITH. 1085, 1138, 1603
MONTOYA, JESSICA. ..... 1488, 1694
MOODLEY, AMARAN. ..... 1298
MOONEY, PATRICIA. ..... 1577
MOOR, TRACY. ..... 1775, 1834
MOORE, SARAH. ..... 842, 1074, 1573
MOORE, SHAVON. ..... 1655, 1656, 1694
MORA, WENDY. ..... 1086, 1151, 1612, 1613
MORALES, ALEJANDRA. ..... 445
MORAN, CHRISTINA. ..... 869, 1644
MORAN, TIFFANY. ..... 370, 371
MOREIRA, LUCILA. ..... 345
MOREO, HUNTER. ..... 1471, 1472
MORGAN, HUNTER. ..... 1792
MORRIS, CHAD. ..... 811
MORRIS, SHEILA. ..... 778
MORRISON REYES, JOSHUA. 1727, 1750, 1760, 1776, 1792, 1793, 1810, 1835
MORTIMER, DORI. ..... 345
MOSHTAGHI, OMID. ..... 1082
MOSTOFIAN, EIMANEH. ..... 635, 636
MOUSSAVIAN, MEHRAN. 179, 514, 702
MOVAGHAR, MANSOOR. 832, 855, 986, 1097, 1149, 1380, 1760
MOYA, MARY. ..... 93, 676
MUELLER, GEORGE. ..... 1550
MUHAMMAD, LAMA. ..... 1694
MULVEY, CAOILFHIONN. ..... 907, 1225
MUNCADA, CAESAR. ..... 983
MUNCE, DANIELLE. ..... 1305
MUNOZ, EMMANUEL. ..... 1577
MURADIAN-MOORE, SARAH. ..... 809
MURRAY, MATTHEW. ..... 1425
MURTHY, NIKHIL. ..... 763, 1065, 1161
MUTH, NATALIE. ..... 74
MUUS, SUSAN. ..... 907, 908


## N


NACOSTE, LAKEISHA. ..... 908
NADI, FAHIMA. ..... 173
NAGELBERG, JODI. 154, 415, 934, 1273, 1274
NAGHI, JESSE. ..... 771
NAGNUR, PRITI. ..... 195, 196
NAIK, SHILPA. ..... 196
NAJAFI, DAVID. ..... 549
NAJAND, SADAF. ..... 1165
NAKAMITSU, ABIGAIL. ..... 1472
NAKAMURA, MELANIE. ..... 216, 217
NAKAMURA, TIFFANY. ..... 1326, 1695
NARANJO, RODRIGO. ..... 503, 504, 505
NARAYAN, ARCHANA. ..... 173
NARAYAN, HARI. ..... 835, 861, 1102, 1412
NARAYANAN, MEENA. ..... 505
NAREZKINA, ANNA. ..... 895, 1193, 1194
NASSAR, JEANNE. ..... 1472
NASSIR, BASSAM. ..... 160, 161
NATH, DEVARSHI. ..... 626, 627
NATHAN, CARLY. ..... 917, 1249
NAUDIN, VERONICA. ..... 752
NAVARRETE CELESTINO, MISHEL. ..... 649, 650, 1584
NAVARRO, STEVEN. ..... 845
NAVARRO, VANESSA MARIA. 278, 446, 677, 1120, 1588
NAYER, ZACHARIA. ..... 987, 1381
NCHOTU, SUCCESS. ..... 867
NEGRON, RICARDO. ..... 234, 235
NEIGHBORHOOD HEALTHCARE. ..... 54
NEIGHBORHOOD HEALTHCARE ESCONDIDO. ..... 31
NEIGHBORHOOD HEALTHCARE ESCONDIDO, . ..... 223
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER. ..... 42
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER, . ..... 343, 344
NEIGHBORHOOD HEALTHCARE LAKESIDE. ..... 36
NEIGHBORHOOD HEALTHCARE LAKESIDE, . ..... 252
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL. ..... 31

# M. Primary Care Index


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL, ..... 223
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL..... 31
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL, ..... 223, 224
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY..... 31
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY, . ..... 224
NEIGHBORHOOD HEALTHCARE, . ..... 743, 745
NEJATI, FRESHTA. ..... 1225
NESTOR COMMUNITY HEALTH CENTER. ..... 51
NESTOR COMMUNITY HEALTH CENTER, ..... 475
NEVAREZ, IRENE. ..... 267, 371
NEVES, VANESSA..... 640
NEVILLE, MARGARET.. 1667, 1719, 1720
NGO, MAI. ..... 1111, 1459, 1460
NGUYEN, ANTHONY. ..... 1293
NGUYEN, BERLINDA. ..... 1816
NGUYEN, BRUCE..... 1835, 1836
NGUYEN, CARIE. ..... 94, 677
NGUYEN, DANIELA. ..... 323, 324
NGUYEN, HARRY. ..... 1537
NGUYEN, HOANG. ..... 1656, 1695
NGUYEN, JANICE. ..... 570
NGUYEN, JASMINE. ..... 1836
NGUYEN, JULIA..... 1656, 1695, 1696
NGUYEN, KELVIN. ..... 1836
NGUYEN, KHANH..... 1472, 1473
NGUYEN, LINH..... 94
NGUYEN, MARGARET. ..... 1425
NGUYEN, MICHELLE.. 953, 1305, 1306
NGUYEN, MYLINH. ..... 1425
NGUYEN, NGOC..... 446
NGUYEN, NINA. ..... 372
NGUYEN, QUOC SY. ..... 890, 1183
NGUYEN, THANH. ..... 1835, 1836
NGUYEN, THERESA..... 1734, 1811, 1847
NGUYEN, THY. ..... 1793
NGUYEN, TIA. ..794, 795, 881, 1128, 1129
NGUYEN, TRACY. ..... 1734
NGUYEN, TRUC. ..... 128
NGUYEN, VANESSA. ..... 803, 1578
NGUYEN, VI. ..... 196
NGUYEN, VIET. ..... 1837
NGUYEN-CLEARY, THAI..... 447
NHAN-CHANG, CHIA-LING.824, 964, 1330
NIAKAMAL, EVAN. ..... 867
NIAZI, HARRIS. ..... 161, 447, 448
NIBBELINK AHEARN, SANDRA.1138, 1139
NICHOLAS, ESTELA. ..... 1604
NIEMI, ANNA-KAISA.775, 1290, 1339, 1340
NIGRO, JOHN. ..... 1569
NIKZAD, JASON. ..... 279, 678
NING, GRACE. ..... 1488, 1696
NISHIKAWA, MOENA. ..... 752
NISKANEN, RACHEL. ..... 1816
NISSAN, BETI. ..... 717
NJIE, EMADE. ..... 1171
NOCEDA, ANA. ..... 372, 373
NOKES, BRANDON..... 953, 1306
NOLASCO, JOANNA. ..... 279
NOORI, SARA..... 1766
NORMAN, MARC..... 1489, 1696
NORRIS, JEFFREY. ..... 448
NORTH PARK FAMILY HEALTH CENTERS. ..... 46, 48
NORTH PARK FAMILY HEALTH CENTERS, . ..... 475, 476
NORTON, CALEB. ..... 1225, 1226
NOSTE, ERIN. ..... 927, 1264
NOUREDDIN, NABIL..... 939, 940, 1287
NOVENCIDO, ANDREW.795, 881, 882, 1129
NOVIKOV, YEVGENY. ..... 953, 1306
NOVO, MEGAN. ..... 804, 1144, 1287
NOVOTA, GABRIELA. ..... 340
NUNO, JOSE..... 593
NUQUI, JOSIE. ..... 448, 449
NURTURING CARE LLC. ..... 1861
NUTAITIS, ALEXANDRA.980, 1370, 1371
NYMAN, KATHERINE.775, 826, 967, 1094, 1340


## O


O HALLORAN, HENRY.1751, 1760, 1837
O'DONNELL, NICOLE. ..... 845
OCAMPO, ELAINE. ..... 373, 374, 375
OCEGUEDA, JOSHUA..... 280
OCHOA, ERLINDA. ..... 143, 144, 268
OCHOA, RAUL..... 663
OCONNELL, STEFANY..... 878, 1226
OCONNOR, ERICA. ..... 74
ODA, THAGHAR. ..... 145, 375, 376, 377
ODISH, MAZEN..... 959, 1316, 1317
ODONNELL, F..... 1341
OHALLORAN, HENRY.832, 855, 1097, 1149, 1381
OIRA, VICTORIA..... 128
OKADA, MICHELLE. ..... 1021
OKAMOTO, VINCENT. ..... 890
OKWUOSA, CHRIS. ..... 728
OLIVER, DEANNA. ..... 482
OLSEN, MARTIN. ..... 406
OLVERA, LUISA. ..... 146
OMAE, ILANA. ..... 757
OPEN ARMS ADHC. ..... 1629
OPERATION SAMAHAN - MIRA MESA. ..... 44
OPERATION SAMAHAN - MIRA MESA, ..... 477
OPERATION SAMAHAN - NATIONAL C. ..... 38
OPERATION SAMAHAN - NATIONAL C, ..... 284
OPERATION SAMAHAN GRANGER SCHOOL BASED. ..... 37
OPERATION SAMAHAN GRANGER SCHOOL BASED, . ..... 285
OPERATION SAMAHAN RANCHO PENASQUITOS. ..... 43, 44
OPERATION SAMAHAN RANCHO PENASQUITOS, . ..... 409, 410, 478
ORDINANZA, MYLENE. ..... 661
OREJEL, EDITH. ..... 1227
ORFF, HENRY..... 1489, 1697
ORIENTE HOUSE. ..... 1627

# M. Primary Care Index


ORPILLA, IMELDA. ....377, 378
ORR, JEREMY....1317
ORTEGA, LUIS. .... 678, 679, 1588
ORTIZ, BEVERLY....1668
ORTIZ, KENNETH. .... 68, 449, 679
ORTIZ, MARIA. ....1489, 1697
OSORIO, JOSEPH. ....1065, 1554
OSSAREH, DIBA. ....1734
OSWALD, JESSICA....890, 1184
OU, JOCELYN. ....1738, 1793
OWEN, MICHAEL. .... 76, 77, 378, 379
OZCAN, ALI. ....1105, 1426

**P**

PACIS, NOAH. ....1227, 1228
PADE, KATHRYN. ....1426
PADILLA, MICHELE.... 379, 380
PAGE, BIANCA. ....250
PAGE, BRADY. ....816, 959, 1318
PAI, SARAH....1228
PAKENHAM, KATE. ....821
PALOMAR HEALTH....1619
PALOMAR MEDICAL CENTER. ....1619
PALOMAR REHABILITATION INSTITUTE. ....1620
PALOMINO, MARY. .... 95
PANDHI, JAY. ....1122
PANDIT, IVY. ....701
PANDYA, BHUMIKA. ....1743, 1793
PANEK, JOHN. .... 603
PANICKER, CIBU....324, 325, 326
PANNARAJ, PIA. ....1298
PANSARA, MEGHA. ....1761
PANZARINI, BRUNO. ....1044, 1516, 1517
PAPA, RHETT. ....185
PAPASTERGIOU, GEORGIOS.119, 188, 189
PAPPALARDO, ASHLEY. .... 1228
PARADISE VALLEY HOSPITAL....1620
PARAST, MANA. ....1007, 1402
PARIKH, MILIND. ....174, 632, 633
PARK, BRIAN. ....1105, 1426
PARK, DANIEL.... 696
PARK, JAY. ....927, 928, 1265
PARK, RONALD. ....341, 1155, 1427
PARK, SOO. ....944
PARK, TARI. .... 571
PARKER, LESLIE. .... 983
PARKER, SHERINE. ..... 862, 1156, 1427
PARKS, MONICA. .... 1609
PARRY, LISA. ....840, 1058, 1543
PARSONS, GENEVIEVE. ....249
PARSONS, MEKRAE. ....1578
PARTNERS IN CARE FOUNDATION. ....1877, 1878
PASCUA, RYAN. .... 879, 1306
PASCUAL, CHRISTOPHER.796, 882, 1129
PASSIAK, BRITTANY.....1147, 1353, 1359
PASSIAS, BRADEN. .... 1070, 1560
PASTORES, GLEN. .... 1697
PATEL, AARTI. ....1460
PATEL, CHARMI. ....1007
PATEL, DEVIN. ....1573
PATEL, GITANE.1728, 1743, 1761, 1794, 1811, 1837
PATEL, JANKI. ....822
PATEL, JITENBHAI....217
PATEL, KELLY....380
PATEL, MITESH....1668, 1720
PATEL, SAGAR. ....1091, 1617
PATEL, SARJAN.1728, 1743, 1761, 1794, 1811, 1837
PATEL, SHREYA....200
PATEL, VIJAY.834, 859, 1100, 1153, 1398
PATHWAY HOME SOLUTIONS INC. ....1861
PATIAG, DANIEL. ....381, 382, 1229
PATTERSON, MARY. .... 1111, 1436
PATTON, MICHAEL. .... 1697
PAUL, MEGAN. ....1293
PAULSON, KERRY. ....908
PAVLOVICH, WENDY. .... 571
PEARCE, ALEX. .... 1033, 1496
PEARSON, LAWRENCE. ....243
PEDROTTY, JOHN. .... 95
PELHAM, WILLIAM....1030, 1657
PELIO, DARREN...839, 1021, 1022, 1473
PENALOSA, PATRICK.... 980, 981
PENT, MICHELLE. ....1644
PEOPLE ASSISTING THE HOMELESS. .... 1874
PERENS, ELLIOT....1447
PERESS, LILIA. ....1280
PEREZ, ANGEL. .... 1002
PEREZ, PERLITA. ....96, 449, 450
PERKINS, RACHEL....341
PERLMAN, TAMARA.... 1141
PERREAULT, MARK. ....1022, 1473
PERRY, ARTHUR. ....1776
PERRY, KATHERINE. ....382
PERTL, URSULA. .... 753
PETERSEN, KATE. ....1715
PETERSON, JONATHAN.987, 1381, 1382
PETITT, JOHN. ....174, 175
PETTUS, JEREMY. ....935
PHADKE, OMKAR. .... 1110, 1452
PHAM, BETTY. .... 967, 1341
PHAM, LILY. .... 767, 846, 1142, 1265
PHAM, MARTIN. ....764, 1066, 1161, 1555
PHAM, NINA....1735
PHAM, QUYNH. .... 106
PHAM, TONY. ....1838
PHAN, TIFFANI. .... 539, 540
PHILIS-TSIMIKAS, ATHENA. .....415, 416
PHILLIPS, KATHERINE. ....757
PHREANER, NICHOLAS. ..... 895, 1194
PHUNG, AIVI. ....593, 594, 1474
PHUNG, RICHARD N V....1838
PIANSAY, MARIA CORAZON. ...128, 717
PIERCE, HEATHER....1460
PIEROS, JANELLE.... 96
PINA, RAQUEL. ....97
PINTO, ANITA. ....196
PIRTLE, KEYSHONE.... 803
PISINGER, PATRICIA....97
PITTMAN, LILIANA. .....661, 662, 813
PLANTE, CHARLES.... 82
PLASCENCIA, CINDY. ....1716
PLUCINIK, STANLEY. ....1735
POAST, JENNIFER. .... 697
POGGI, SARA. ....1474
POHLEN, MICHAEL. ....1045, 1517
POLESKY, ANDREA. ....108, 1589

# M. Primary Care Index


POLICH, MICHELLE. ..... 1461
POLK, DAVID. ..... 1288
POLLACK, LARRY ..... 1550
POLLEMA, TRAVIS. ..... 1072, 1117
POLLEY, SHANNON ..... 594, 595, 1585
PONCE, SONIA. ..... 656, 657
PONIACHIK, SAMUEL. ..... 633, 634
PONS, MAURICIO. ..... 119, 120, 189
POOLE, DAVID ..... 1461
PORTO MADURSKI, KRISTINE. ..... 723
POSADA, SEAN. ..... 450
POSADAS, EMERITO. 640, 641, 642, 1584
POTENZA, BRUCE. ..... 1059, 1544
POTOK, OLIVIA. ..... 953
POUNTNEY, MARLENE. 636, 637, 638
POUSTI, BOBAK. ..... 1164
POUSTI, SHEIVA. ..... 1838
POWAY ADULT DAY HEALTH CARE CENTER. ..... 1630
POWELL, STEPHANIE. ..... 571
PRABHU, SUJATA. 1728, 1761, 1794, 1795, 1811, 1839
PRASAD, AMITHA. ..... 1645
PRATT, STEVEN. ..... 1776
PRESKILL, CATALINA ..... 572
PRESTERA, TORY. ..... 1844
PRIEST, VIVIAN. ..... 1475
PRINCE, RENEE. ..... 1489, 1698
PRITZKER, JOELY. ..... 1139, 1604
PROHASKA, THOMAS. ..... 1194
PROMER, KATHERINE. ..... 691
PROPST, TOBE ..... 450
PUIG LLANO, MANUEL. ..... 988, 1382
PUTRUS, RAMIZ. ..... 161, 162
PYLE, ALEXANDRA. ..... 1475

**Q**

QAYOUMI, WALI. 972, 973, 1353, 1354, 1657, 1698
QIAN, ZHEN. ..... 834, 859, 1100, 1398
QUACH, PHUC. ..... 1795
QUAN, MICHELE GRACE. ..... 870
QUICK, ELISABETH. ..... 133, 595
QUIJANO, GLENN. ..... 1475
QUILALANG, SUSAN. ..... 77
QUINTANA, PAULINA. ..... 1405
QUINTERO, CAROLYN ..... 642, 1584
QUINTO, CINDY. ..... 383, 384
QUIROZ, ELISA. ..... 107
QURESHI, SOFIA. ..... 1588

**R**

RACKHAM, KELLY ..... 240, 241
RADOJEVIC, NATASHA ..... 1490, 1698
RADY CHILDRENS HOSPITAL SAN DIEGO. ..... 1620
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN. 1882, 1883, 1884, 1885, 1886, 1887, 1888, 1889, 1890, 1891, 1892, 1893, 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, 1910, 1911, 1912, 1913, 1914
RAGUVEER, VISHAKA. ..... 451
RAHIMI, NASSRIN. ..... 1614
RAHMAN, AKBAR ..... 98
RAISSI SHABARI, FARSHAD ..... 1190
RAJADHYKSHA, SALOMI. ..... 1795
RAJAEI, NILOUFAR. ..... 1229
RAJAIPOUR, NEGIN. ..... 679, 680
RAJIV, RENUKA ..... 878, 1229
RALEIGH, DEBORAH ..... 909, 1230
RALL, EMILY ..... 595, 596
RAMAMOORTHY, SONIA. ..... 1058, 1543
RAMERS, CHRISTIAN. ..... 505, 506
RAMGREN, AILEEN. ..... 346
RAMIREZ SANCHEZ, CLAUDIA. 697, 948, 1299, 1590
RAMIREZ, ALFREDO. ..... 1072
RAMIREZ, NICOLE ..... 914, 1244
RAMNATH, VENKTESH. ..... 816
RAMOLIA, ANIKA ..... 1730
RAMOS, ELENA. ..... 1159
RAMOS, JACQUELYN. ..... 810
RAMSIS, MATTHEUS. ..... 818, 1194
RANA, DEBORAH ..... 292, 293
RANADIVE, SAYALI. 836, 864, 1108, 1157, 1436
RANASURIYA, DUNISHA ..... 1105, 1428
RANDLE, CARRIE. ..... 1230
RAO, APARNA. ..... 1110, 1450
RAO, SOUMYA. ..... 1169
RAO, USHA ..... 218
RASCHKE, ROBIN. 837, 1109, 1158, 1447
RASHCOVSKY SCHIFF, KARIN. ..... 218
RASMUSSEN, DALE. ..... 596
RAYMOND, ALAIN ..... 1083
RAYTA, NICOLE ..... 1139
READ, TRENTON ..... 789, 869, 1169
REAL, MARIA ..... 146, 268, 269
REDDY, ARJUN. ..... 175
REDDY, DANA ..... 138, 615, 616
REDDY, NAVYA. ..... 846
REDDY, REDDIWANDLA. ..... 1075
REDDY, SAMATHHA. ..... 698
REDDY, SMITHA. ..... 1169
REED, KRISTIE ..... 1030, 1657, 1658
REEVES, JAMES. ..... 1551
REEVES, RYAN ..... 1323
REGEV, SHANEE ..... 147
REID, EMILY. ..... 147, 269, 384
REIFENBERGER, JODY. ..... 349
REIMERS, REBECCA. 773, 850, 1078, 1079, 1093, 1145, 1290, 1331
REINEKE, ANKE. ..... 1490, 1491, 1699
RESNIKOFF, PAMELA. ..... 506
REVELES, DIANA. ..... 133, 134
REYNAGA, JOSUE. ..... 689
REYNOSO, ALFONSO ..... 83
RHEE, KYUNG. ..... 1461
RHYNER, GINA. ..... 1244
RIBEIRO CALDAS DOMINGUES, ISABEL. ..... 1699
RICE, ELIZABETH. ..... 759
RICHARD, MARLA ..... 1658, 1699, 1700
RICHARDS, KRISINDA ..... 1139
RICHARDSON, ALVIE. 774, 825, 1079, 1145, 1331, 1332
RICHARDSON, ANGELIQUE. ..... 944
RICHARDSON, DANIELLE ..... 280
RICHARDSON, HENRY. 785, 865, 1158, 1463
RICHARDSON, JULIA ..... 781
RICKERTS, MATTHEW. ..... 1537
RICKMAN, CHRISTOPHER. ..... 1045, 1518
RIDGE, NEAL. ..... 451, 452

# M. Primary Care Index


RIEDL, MARC. ..... 1173
RIEGO, SUZANNE. ..... 1230
RIES, DAVID. ..... 1461
RIFKIN, DENA. ..... 968, 969, 1343
RIGGINS, NINA. ..... 1354
RILEY, JEREN. ..... 384, 385, 1230
RING, ROBERT. ..... 1151
RIOS, SIERRA. ..... 1645
RISSER, JOSEPH. . 606, 607, 608, 1289
RITTER, STEVEN. ..... 452, 680
RIVADENEYRA, KELLY. ..... 1711
RIVAS, RENEE. ..... 981, 1371
RIVERA, KEVIN JOHN. 1636, 1700, 1701
RIVERA, MELISSA. ..... 1645
RIVERA, TANIA. ..... 506, 507
ROBERTS, AUDREY. ... 1022, 1023, 1476
ROBERTS, CALE. ..... 1428
ROBERTS, KENDALL. ..... 249
ROBERTS, POMAI. ..... 281, 1120
ROBINSON, ADAM. ..... 1046, 1518, 1519
ROBINSON, COLE. ..... 843
ROBINSON, DAISY. ..... 244, 876
ROBINSON, DEAN. ..... 210
ROCHE, CHELSEA. ..... 909
RODARTE, GABRIEL. ..... 219
RODENMEYER, EVE. ..... 1231
RODRIGUES, ANNETTE. 839, 868, 1113, 1159, 1476
RODRIGUEZ JEREZ, ROBERTO. ... 1591
RODRIGUEZ, ALDO. ..... 197, 718, 1592
RODRIGUEZ, CASSANDRA. ..... 137, 138
RODRIGUEZ, DANA. ..... 845
RODRIGUEZ, JAVIER. ..... 572, 573
RODRIGUEZ, SEAN. ..... 452, 453
RODRIGUEZ-MINETTE, JESSICA. 813, 1617
ROGERS, MATTHEW. ..... 68, 69, 759
ROGERS, TANYA. ..... 385
ROJAS, LEONOR. ..... 1641
ROJAS, RICHARD. ..... 406, 407
ROJAS, SARAH. ..... 681
ROMA, ANDRES. ..... 1010, 1405
ROMERO, CAMILA. 608, 609, 1481, 1482
ROMO, JORGE. ..... 1023
RONAN, KEVIN. ..... 341, 342, 343, 753
ROSA, ADAM. ..... 1816
ROSADO, IVAN. ..... 453, 1281
ROSE, PATRICIA. ..... 735
ROSENBAUM, HERBERT. 453, 454, 681
ROSENBLATT, EUGENE. ..... 98
ROSENBLATT, SHERILYN. ..... 201
ROSS, COLLIN. ..... 723, 724
ROSS, CRYSTAL. ..... 78, 1231, 1232
ROSSI, CATHERINE. ..... 909, 1232
ROTMAN, YONATAN. ..... 1046, 1519
ROUEL, WADI. ..... 175, 176, 288, 507
ROURKE, KYLE. ..... 1265
ROWHANI, NAGHMEH. ..... 129, 784
ROZELL, JOSEPH. ..... 1046, 1520
ROZO, JOSE. ..... 1232
RUBENSTEIN, STUART. ..... 573
RUBENZIK, TAMARA. 823, 946, 1295, 1608
RUBIO, HALEY. ..... 1585
RUDD, CHRISTOPHER. 1054, 1055, 1537
RUDOLF, FRANCES. ..... 814, 928, 1266
RUELAS, ROBERTO. ..... 718
RUNGVIVATJARUS, TIRANUN. .... 1462
RUSSELL, SAMUEL. ..... 1156, 1428, 1429
RUSSO, KRISTA. ..... 650, 651
RYAN, DANA. ..... 246
RYAN, KYLE. ..... 866, 1112, 1158, 1464
RYAN, RHIANNON. ..... 1281
RYU, JULIE. ..... 1451


## S


SAADA, HASSAN. ..... 842
SABHA, MAHMOUD. ..... 928, 1266
SABIN, NANCY. 385, 386, 387, 1232, 1233
SACHS, MELISSA. ..... 1661, 1701
SACKS, BRENT. ..... 915, 1244
SADAT, SAYED. ..... 1047, 1520, 1521
SADDA, REEM. ..... 1640
SAHMS, TIMOTHY. ..... 719
SAID, MENA. ..... 1082
SAIDRO, LUZVIMINDA. ..... 69
SAJTI, ENIKO. ..... 967, 1341
SALAMANCA, OMAR. ..... 1143
SALAS GAERLAN, JESSICA. ..... 1171
SALAZAR, CLAUDIA. ..... 1160
SALAZAR, JUANITA. ..... 129
SALEH, FAREED. ..... 1429
SALEM, RAMSEY. ..... 162, 163, 682
SALERNO, MARIANA. ..... 698
SALES, JAN ERIC. ..... 613
SALINAS, NIECEL. ..... 909, 1233
SALO, STEPHANIE. ..... 1491, 1701
SAMHA, LEEN. ..... 928, 1266
SAMI, REMAN. ..... 107
SAMPATH, SRIVIDYA. ..... 574
SAMPSON, ANDRIECE. ..... 387
SAMUEL, MICHAEL. ..... 1751, 1762, 1795
SAN DIEGO AMERICAN INDIAN HEALTH CENTER. ..... 46
SAN DIEGO AMERICAN INDIAN HEALTH CENTER, . ..... 478
SAN DIEGO FAMILY CARE. ..... 50, 1875
SAN DIEGO FAMILY CARE, .... 478, 479
SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE. ..... 1631
SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE. ..... 1851, 1854
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE. ..... 44
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE, ..... 479
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE. ..... 27
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE, ..... 61
SAN YSIDRO HEALTH CHC - OCEAN VIEW. ..... 45
SAN YSIDRO HEALTH CHC - OCEAN VIEW, ..... 479, 480
SAN YSIDRO HEALTH CHULA VISTA. ..... 29
SAN YSIDRO HEALTH CHULA VISTA, . ..... 105
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED. ..... 49
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, . ..... 480

# M. Primary Care Index


SAN YSIDRO HEALTH EL CAJON. . . 30
SAN YSIDRO HEALTH EL CAJON, . .....166, 167
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE. .....32
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE, ..... 224, 225
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE. .....35, 36
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE, ..... 247, 248
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR.....53
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, . ..... 688
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE. ..... 27
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE, .....70
SAN YSIDRO HEALTH NATIONAL CITY. ..... 38
SAN YSIDRO HEALTH NATIONAL CITY, .....285
SAN YSIDRO HEALTH PARADISE HILLS. ..... 37
SAN YSIDRO HEALTH PARADISE HILLS, ..... 285, 286
SAN YSIDRO HEALTH PRECISION PARK.....51
SAN YSIDRO HEALTH PRECISION PARK, . ..... 480
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER. .....53
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, ..... 688
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE. .....53
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE, ..... 729, 730
SAN YSIDRO HEALTH SOUTH BAY. 37
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS. ..... 28
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS, ..... 106
SAN YSIDRO HEALTH SOUTH BAY, . .....286
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS. .....53
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, ..... 689
SANACORA, RACHEL. ..... 1140, 1233
SANCHEZ, AMBER. ..... 969
SANCHEZ, MICHAEL. ..... 1023
SANCHEZ, MYRNA. .....662
SANDERS, JESSICA. ..... 56
SANDHU, BASANT. .....219
SANDIFORD, PATRICK. .....929, 1266
SANDLER, BRYAN. ..... 1551
SANDOC, EMILY. .....1839
SANTANGELO, JOANNE.387, 388, 389, 1234
SANTIAGO, AMANDA. .....1140
SANTIAGO, ROXANE. ..... 130
SANTIAGO-LASTRA, YAHIR. 1573, 1574
SANTORELLI, JARRETT. ..... 1061, 1551
SANTOS CAVAIOLA, TRICIA. 935, 1274
SAPRA, SONIA.115, 116, 186, 261, 262, 540, 541, 542, 740
SASSIC, JESSICA. ..... 508
SATTERWHITE, MAURINE.389, 390, 391, 1234
SAUER, CHARLES.827, 851, 968, 1166, 1342
SAUNDERS, DENISE.....78
SAVA HOME. .....1627
SAVILLE, EDITH. .....391
SAWHNEY, NAVINDER. ..... 849
SAWYER, CAROLYN. ..... 1462, 1702
SCHELLIE, SCOTT. .....596, 597
SCHELLINGER, KRISTON.1491, 1492, 1702, 1703
SCHIEDERMAYER, BENJAMIN.1057, 1541
SCHLOSSER, TARA. ..... 1703
SCHMIDT, BRYAN. ..... 613, 614
SCHMITT, EVA. ..... 1476
SCHNEEBERGER, ANDRES.1658, 1703
SCHNEIDER, SARAH.134, 135, 603, 604
SCHNEIDER-MUNOZ, MARGARITA. ..... 699
SCHNICKEL, GABRIEL. ..... 1570
SCHORR, EMILY. ..... 828, 1354, 1355
SCHROEDER, JENNIFER. .....1476, 1477
SCHROTER, STEPHANIE. .....1106, 1429
SCHULTE, JESSICA. ..... 973
SCHULTZ, HEATHER. .....1047, 1521
SCHULTZ, JAMES. ..... 220, 221, 745
SCHULZ, STEFAN. .....1477
SCHUMAKER, EDWARD.163, 164, 281, 454
SCHWAB, GARY. .....1385
SCHWARTZEL, KEVIN. .....1023
SCHWARZ, KATHLEEN. .....1439
SCHWENDEMANN, WADE.1079, 1145, 1332, 1333
SCOTT, JEFFREY. ..... 1743, 1796, 1812
SCOTT, KELLY. ..... 391, 392
SCOTT, LAGINA. .....1281
SCOTT, RYLEE. .....454, 455
SCOTT, TIFFANY. ..... 915, 1244, 1245
SCOTT-WYARD, PHOEBE. .... 1113, 1464
SCOVILL, ALEXANDRA. .....781, 1735
SCRIPPS GREEN HOSPITAL. .....1620
SCRIPPS MEMORIAL HOSPITAL. 1620
SCRIPPS MEMORIAL HOSPITAL ENCINITAS. .....1621
SCRIPPS MERCY HOSPITAL. .....1621
SCRIPPS MERCY HOSPITAL CHULA VISTA. .....1621
SEARLEMAN, ADAM. ... 1047, 1521, 1522
SEARS-WILEY, ELIZABETH. ..... 1235
SEAWELL, CHRISTINE. ..... 1143
SEBASKY, MEGHAN. .....954, 1307
SEBIANE, MARIA. ..... 643, 644
SEBRING, JAN. .....392
SEBSO, JODI. .....574, 575
SEDGHI, SOUDABEH. ..... 1070, 1560
SEFA-BOAKYE, KOFI. ..... 116, 711
SEGAL, LAUREN. ..... 929, 1267
SEITZ, GRETCHEN. .....1202
SELBY, BLAKE. ..... 1235
SELECT SPECIALTY HOSPITAL SAN DIEGO. ..... 1621

# M. Primary Care Index


SELF, MICHAEL. ....1267
SELTZER, JUSTIN. .... 929, 930, 1267
SERENE HEALTH. ....1858, 1859, 1876
SERHAN, STEPHANIE. ....1024, 1477
SERIO, TAYLOR. .... 1703, 1704
SERPAS, SHAILA. .... 99
SHABAIK, AHMED. ....1011, 1405
SHAH, NIYATI. ....822
SHAH, SHAILJA. ....940, 1288
SHAH, SONA. ....779
SHAHIDYAZDANI, TINA. ....720
SHAHTAJI, ALAN. ....99, 100, 682
SHAMSINEJAD BABAKI, ARASH... 508
SHANNON, KELLI. ....1333
SHAPIRO, HILARY. .... 896, 1195
SHAPIRO, RACHEL. .... 1478
SHARMA, ANITA. .... 1109, 1440
SHARP CHULA VISTA MED CTR. . 1622
SHARP CORONADO HOSP AND HEALTHCARE CTR. .... 1622
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS. .... 1622
SHARP MEMORIAL HOSPITAL. .... 1622
SHARPE, NORMA..62, 71, 234, 597, 724
SHASTA HOME. .... 1624
SHAUF, JOANN. .... 727, 1592
SHAW, BLAKE. .... 549, 550
SHAW, SUSANNA. .... 890, 1184
SHEIKH MOHAMED, AMIRA..699, 700
SHEIKH, ZARA. ....455, 456
SHEIKH-MOHAMED, HALA. ....176, 177
SHELTON, ALYSSA. ....1374
SHEN, JIA. ....1195
SHENOY, ASHVIN. .... 575
SHERER, KIMBERLY.784, 863, 1156, 1429
SHEREV, DIMITRI.771, 806, 1075, 1196, 1324
SHERMAN HEIGHTS FAMILY HLTH CTRS INC. .... 48
SHERMAN HEIGHTS FAMILY HLTH CTRS INC, ....481
SHETH, HASMUKH. ....130, 575, 576
SHETH, SARIKA. .... 1106, 1430
SHI, RUJING. .... 509
SHI, VERONICA. ....1253, 1254
SHIAU, NANCY. .... 576
SHIELDS, SEBASTIAN. .... 1637
SHIH, JERRY. .... 973, 1355, 1356
SHIMIZU, KELSIE. .... 762
SHIRAKI, JEAN. ....456
SHISHLOV, KIRILL. ....930, 1267, 1268
SHMARIAHU, SHELLY. .... 1532
SHMERLING, ALISON. .... 1281, 1282
SHORT, ABIADE. .... 117, 711, 712
SHU, I WEI. ....1704
SHULKIN, MITCHELL. ....1839
SHUMILAK, KAILI. ....456, 457
SHUMWAY, CALEB. ....779
SHWAIKI, OMAR. .... 1047, 1048, 1522
SICKLES, MAGGIE. ....79
SIETSMA, ALEXANDRA. .... 1235, 1482
SIEVERING, DENISE. .... 1052, 1532
SILVA ENCISO, JORGE. ....1173, 1196
SILVA SEPULVEDA, JOSE.758, 835, 836, 861, 1102, 1413
SILVEY, CHRISTOPHER. .... 1661, 1704
SIMEONE, DIANE. ....1061
SIMMONS IV, ROBERT. ....1661, 1662
SINGH, PRABHLEEN. ....970, 1344
SINGH, PUJA. ....1108, 1436
SIRIPHAND, CHRISTOPHER.954, 1307
SKAF, AYHAM. .... 120, 190, 712
SKALSKY, ANDREW. .... 1113, 1464
SKAY, RICHARD. ....1845
SKINNER, NICOLE. ....1055, 1537
SKOPEK, TAM. .... 1604, 1605
SLATER, JERRY. ....1048, 1523
SLOAN, CRISTINA.1669, 1670, 1720, 1721
SLOANE, CHRISTIAN. .... 930, 1268
SMITH, CASEY. ....930, 931, 1268, 1269
SMITH, CHELSEY. .... 954, 1307
SMITH, DOUGLAS. ....724, 725
SMITH, KELLI. .... 877, 1087
SMITH, SHARON. ....148, 253, 254
SMITH, SONYA. .... 1670, 1671, 1721, 1722
SMITH, TREVOR. .... 1024, 1478
SMOOT, CHARLES. ....457, 458
SNOOK, BRIAN. ....282
SNOW, ERICA. .... 891, 1184
SNYDER, CHRISTOPHER. ....458, 683
SNYDER, MICHELLE. .... 1089
SOCHA, TRACI. ....644
SOLIS, KEVIN. .... 1735, 1848
SONG, CAROL. ....1596
SONG, JOYCE. .... 232
SONG, WEI. ....1405
SOPHY, ELIZABETH. .... 458, 459
SORIA JIMENEZ, CESAR. ....962
SORIA LOPEZ, JOSE. .... 777, 808, 1582
SORIA, CLAIRE. ....891, 1185
SOROKIN, LISA. .... 983
SOSA, DAVID. ....152, 153, 407, 408
SOUDER, CHRISTOPHER. ... 1106, 1430
SOUTHBAY URGENT CARE INC. .. 1914
SOZANSKI, JESSE. ....1493
SPAK, DARYL. ....768
SPARKS, CHELSEA. ....1048, 1523
SPARKS, TODD. ....796, 797, 882, 1130
SPENCE, JAMIE. .... 652, 653
SPENGLER, NATHAN. ....1049, 1524
SPEZIALE, MARK. ....776, 1343
SPITZER, MARSHA. ....576, 577, 578
SREJIC, UNA. ....1185
SRIDHAR, SUNITA. ....1443
SRILASAK, MICHELE. ....821, 910, 1605
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER. .... 44
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, ....481
STABEN, REBECCA.117, 186, 262, 542, 543, 544, 740
STAHL, KEVIN. ....797
STALEY, MICHAELA. .... 683
STALLINGS, ANDREA. .... 1478
STEINBERG, JOEL.1638, 1671, 1722, 1723
STEINBERG, LEONARD. .... 1413
STENSMAN, LARS. .... 61, 197, 198
STEPENOSKY, JAMES. ....1049, 1524
STEPHENS, LAURA. ....1406
STEPHENSON, SAMUEL. .... 1062, 1552
STERN, MARLEIGH. .... 1254
STEVENSON, REHEIA. ....910, 1089

# M. Primary Care Index


STEWART, TYLER. ..... 944
STIPHO, SALLY. ..... 483
STOJANOVSKA, JOVANA. ..... 875
STONE, CALVIN. ..... 1645
STONES, RACHEL. ..... 282
STOVER, LAURIE. ..... 1462
STRAKA, CHRISTOPHER. ..... 1525
STRAZICICH, KARLA. ..... 232
SUAREZ, ROBERTO. ..... 1704
SUBRAMANIAN, RAMA. ..... 578
SUDHAKAR, DEEPTHI. 772, 806, 849, 1324, 1325, 1580, 1581
SUGGS, SARAH. ..... 798, 882, 883, 1130
SULEIMAN-QAFITI, KHAWLA. ..... 578
SULLIVAN, ELISSA. ..... 720
SULLIVAN, THOMAS. ... 1070, 1071, 1561
SUMMERS-DAY, COURTNEY. 459, 879, 1282
SUN, ALEX. ..... 1049, 1050, 1525, 1526
SUNA-SITTO, MOHEEN. ..... 725
SURI, RAJAT. ..... 1114, 1618
SUSAN PARHAM HOUSING CORPORATION. ..... 1627
SUTHERLAND, ANNA. ..... 1254
SUTHERLAND, PAIGE. 1637, 1659, 1705
SUTTON, BRIAN. ..... 839
SUYAMA, JULIE. ..... 982, 1371
SUYDAM, STEVEN. ..... 891, 1185
SWAN, MELANIE. ..... 149
SWANSON, BRIANNA. ..... 1236
SWARTZ, ERIN. ..... 1236
SWARTZ, JOHN. ..... 100, 460
SWEAT, MARIE. ..... 1356
SWEENEY, DANIEL. ..... 815
SWEENEY, NATHALY. ..... 851, 1343
SWEET, JASON. ..... 1526
SWEET, PATRICK. ..... 684
SWEIGERT, JAMIE. ..... 1705
SWORDS, KELLY. ..... 1574
SY, RAMON. ..... 700
SYED-UDDIN, SUMIYAH. ..... 1090


## T


TA, MINI. ..... 1845
TA, TRANG. ..... 1840
TABAREZ, NORMA. ..... 813
TADDONIO, MICHAEL. 1050, 1526, 1527
TADROS, ANTHONY... 1050, 1527, 1528
TAFRESHI, GILDA. ..... 517
TAGHIZADEH, BEHZAD. ..... 1077
TAGHIZADEH, MAJID. ..... 408, 409
TAHRIRI, BAHAREH. ..... 653, 654
TAI, KUANGKAI. ..... 346
TAING, JENNIFER. ..... 1236
TALAVERA, GREGORY. 100, 101, 684, 685
TALBOT, ADRIANNE. ..... 1237
TAM, EMILY. . 1086, 1151, 1152, 1613, 1614
TAM, MAY. ..... 1840
TAMAS, VANESSA. ..... 1431
TAMAYO, MAITHE. ..... 579, 580
TAN, CARMELA. ..... 1024, 1478, 1479
TAN, LO FU. ..... 685
TANAKA, HIDEAKI. ..... 814, 931, 1269
TANAKA, MARY. ..... 74
TANG, ANDREW. ..... 1107, 1431
TANG, MICHAEL. ..... 948
TANGELO. ..... 1851
TANTISIRA, KELAN. ..... 1451
TANTISIRA, LALITA. ..... 1275, 1307, 1308
TANTOD, KULIN. ..... 221
TAPIA, ASHLEY. ..... 1715
TARLE, STEPHANIE. 1031, 1492, 1659, 1705
TARVER, LESLIE. ..... 1659
TAUB, PAM. ..... 962
TAVASSOLI, SARA. 1728, 1744, 1751, 1762, 1776, 1796, 1812, 1841
TAYLOR, CHRISTOPHER. 314, 315, 875, 876, 1085, 1140, 1141, 1605, 1606
TAYLOR, DAVID. ..... 955, 1308
TAYLOR, KAYLA. ..... 393, 394
TAYLOR, TASHA. ..... 721
TCHAKMAKJIAN, LEVON. ..... 177
TECOMA, EVELYN. ..... 973, 1356, 1357
TEE, ALEXANDRA. ..... 101
TEETER-WITT, ALYSSA. 869, 870, 1646
TEJEDA, FRANCISCO. ..... 690
TELLECHEA-SANCHEZ, SELMIRA. ..... 232, 233
TERRAMANI, THOMAS. ..... 1085
TERRY, AMANDA. ..... 207
TESSIER, ADLA. ..... 509
TEW, JOHN. ..... 1767
THACH, QUEEN. 781, 782, 808, 809, 1125
THACH, TERILYN. ..... 1762
THACKABERRY, JESSICA. ..... 1706
THAI, AMANDA. ..... 1845
THAI, JUSTIN. ..... 460, 461
THAN, CINDY. ..... 1731
THANGARAJAH, HARIHARAN. 758, 1116, 1564
THAPER, MOHINDERPAL. ..... 1165
THAYER, KARISA. ..... 1121
THIRUNAGARI, HARRSHA. ..... 233
THOMAS, KELSEY. ..... 1031, 1659, 1660
THOMAS, ROBERT. ..... 1308
THOMAS, THEA. ..... 1025, 1479
THOMAS, ZACHARY. ..... 461
THOMPSON, CHERYL. ..... 221, 222
THOMPSON, COURTNEY. ..... 1237
THOMPSON, KYLE. 842, 873, 1116, 1162, 1565
THOMSON, SAMANTHA. ..... 982, 1372
TILLMAN, SYLVIA. ..... 1796, 1841
TILTON, PETER. ..... 1706
TITANIUM HEALTHCARE. ..... 1855
TO, BRITTANY. 1729, 1744, 1762, 1777, 1797, 1812, 1813, 1841
TO, TUAN. ..... 1492, 1493, 1706, 1707
TOCCO, JESSICA. ..... 915, 1245
TODD, MIKAYLA. 57, 209, 210, 394, 728
TODD, SARAH. ..... 863, 1156, 1431
TOLBA, KAMEI. ..... 208
TOLEDO-NADER, CAROLL. ..... 101, 102
TOLENTINO, ARTURO. ..... 1579
TOLMIE, SIMONE. ..... 400
TOMASZEWSKI, CHRISTIAN. 931, 932, 1269, 1270
TOMASZEWSKI, DEBRA. ..... 597, 598
TOMLIN, JEFFREY. ..... 1555
TON-NU, MY LINH. 1729, 1744, 1751, 1763, 1777, 1797, 1798, 1813, 1841
TONG, GARRICK. ..... 1711

# M. Primary Care Index


TONG, KIM. ..... 910, 1237
TONNU, ANH..... 1744, 1777, 1798, 1842
TORRES BARBA, DAVID. ..... 1325
TORRES, ERICK. ..... 932, 1271
TORRES, HECTOR..... 1586, 1711
TORRES, RANDALL..... 757, 1634
TOTH, JESSICA..... 254, 255
TOUBIA, ELIAS. ..... 1736, 1813, 1848
TOVAR, NICOLE..... 614
TRAN, ALEXANDER. ..... 1763, 1842
TRAN, HAO. ..... 1308
TRAN, HEATHER..... 1084
TRAN, KELLY. ..... 395
TRAN, KIM. ..... 1121
TRAN, LINH. .. 817, 960, 1091, 1318, 1618
TRAN, MICHAEL..... 1846
TRAN, THAO..... 1849
TRAN, THERESA..... 1107, 1431
TRAN, TONNIA. ..... 462
TRAN, TU-UYEN. ..... 742
TRAN, UYEN-THAO. ..... 462
TRANG, CHAU..... 1842
TRAUT, JOEL..... 1432
TREJO, ANA..... 910, 911, 1238
TREJO, RAUL..... 102, 685, 686
TRESSLAR, PERI..... 767
TREUNER, JULIE. ..... 598
TRI CITY MEDICAL CTR. ..... 1622
TRIMM, CASSIDY. ..... 1055
TRINGALE, KATHRYN..... 1497
TRINH, RACHELLE. ..... 1736
TRIVEDI, SURAJ. ..... 891, 1186
TROYER, EMILY..... 1637, 1707
TRUECARE. ..... 27, 28, 38, 42, 51, 52
TRUECARE, .72, 327, 328, 347, 628, 629, 630
TRUJILLO, DALE..... 911
TRUJILLO, JENNIFER..... 118, 544
TRUJILLO, MIGUEL..... 725
TRUONG, NHA..... 463
TRUONG, VENNES..... 409
TSAI, MATTHEW. ..... 940, 941, 1288
TSUCHIYA, KIMIKO..... 463
TSUDA, PAIGE. ..... 892, 1186
TSUI, NANCY..... 1798
TU, BEVERLY. ..... 1798
TU, MONIQUE..... 1186
TUCKER, LANIKA..... 911, 1238
TUEROS, VICTORIA. ..... 395
TULLY, JEFFREY. ..... 892, 1186
TUNG, VIVIAN. ..... 250
TURNER, ERIC. ..... 201, 202, 743
TURNER, SHEREENA..... 201, 202, 599
TURRILL, MCKENNA..... 1799
TWAMLEY, ELIZABETH..... 1493, 1707
TZENG, ERIC. ..... 892, 1187


## U


U, HOI..... 1066, 1555
UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER. ..... 1623
UCSD LA JOLLA JOHN SALLY THORNTON..... 1623
UCSD MEDICAL CTR. ..... 1623
UCSD MEDICAL GROUP, ..... 515
UDOH, EKAETE. ..... 599
ULRICH, STACEY. ..... 1432
UNG, HOAMENG..... 974, 1357
UNGER, LINDSEY. ..... 1057, 1541
UNTERBERG, STEPHEN. ..... 1574, 1575
UPASANI, VIDYADHAR. 1116, 1162, 1561
UREY, MARCUS..... 1325
URIBE-BRUCE, LILIANA..... 510
UTZ, JACK..... 686
UY, ASHLEY. ..... 153
UY, CARMELITA..... 293


## V


VAHABZADEH-HAGH, ANDREW. ..... 1002, 1003, 1398, 1399
VAHDAT, NOUSHIN..... 1050, 1528
VAIDYA, KAMALA.784, 863, 864, 1157, 1432, 1433
VAIL, DANIEL..... 988, 1382
VAISMAN, SAMANTHA..... 798, 883
VAKILIAN, SIAVOSH.870, 871, 1497, 1528, 1529
VALDEZ, KRYSTAL ANGELI.510, 511, 1275
VALENCIA, MARILES..... 131, 293
VALENZUELA, TRICIA..... 464
VAN DYKE, JASON..... 614, 615
VAN HOLLEBEKE, RACHEL.60, 686, 687
VAN HOOSE, MARC..... 1843
VAN PRATT LEVIN, BENJAMIN. .. 1283
VAN WOY, LAUREN. ..... 1433
VANDEWIELE, EMILY..... 1538
VANE, JACKSON. ..... 1433
VANETSKY, GARY. ..... 840
VARGAS TRUJILLO, MARCELA.1111, 1437
VARGAS, BRIANDA. ..... 757
VARGAS, CHRISTOPHER. ..... 786, 787
VARGAS, ROBERT..... 600
VASQUEZ, BENJAMIN. ..... 1056, 1538
VAUGHN, GABRIELLE. ..... 1413
VAVINSKAYA, VERA..... 1011, 1406
VAYNGORTIN, TATYANA..... 1433
VAZQUEZ-ERLBECK, MARTHA.662, 663
VCC DURIAN..... 55
VCC DURIAN, . ..... 749
VEGA, CAROLINA..... 1107, 1434
VEGA, TERESA. ..... 79, 396
VELASQUEZ, SHARON.102, 103, 283, 687, 768
VELAZQUEZ CAMARENA, MARIA.110, 111, 700, 701
VENNAM, VAMSI KRISHNA. ..... 1646
VENTRO, GEORGE. ..... 1059, 1544
VERCHER, ROSHON. ..... 1646
VERDUZCO GONZALEZ, AURORA. ..... 149, 150, 269, 270
VERISSIMO, TAYLOR..... 798, 883
VERRET, ERIC..... 1763
VETTICADEN, SANTOSH..... 226, 227
VIA RIO HOUSE. ..... 1624
VIBAL-POASTER, MARIA KHRISTINA. ..... 1238
VIDAL, MONICA. ..... 326, 327
VIDAURRAZAGA, MONICA. ..... 511
VILLA, ANGELICA..... 1736
VILLALOBOS, REBECA..... 396
VILLANUEVA DE GUTIE, BERENICE. ..... 150, 270

# M. Primary Care Index


VILLANUEVA, GIOVANNI.799, 883, 1130
VINCENT, BERLIN. ..... 1245
VINH, JOHN. 1745, 1752, 1777, 1799, 1814
VISTA COMMUNITY CLINIC.32, 33, 34, 35, 39, 40, 41, 42, 1879
VISTA COMMUNITY CLINIC GRAPEVINE.....55
VISTA COMMUNITY CLINIC GRAPEVINE, .....750
VISTA COMMUNITY CLINIC HORNE STREET. ..... 38, 39
VISTA COMMUNITY CLINIC HORNE STREET, ..... 329, 330
VISTA COMMUNITY CLINIC PIER VIEW WAY. ..... 39
VISTA COMMUNITY CLINIC PIER VIEW WAY, ..... 330, 331
VISTA COMMUNITY CLINIC, .242, 243, 328, 329
VISTA HOUSE. .....1628
VO, ANDREW. ..... 990, 1385
VO, ANDREW MINH. .....1778, 1843
VO, PHU LUONG. .....1283
VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION.....1877
VOSSLER, JOHN.....1569
VU, PETER. ..... 945, 1293
VU, WENDY. ..... 245

**W**

WAGONER, KENYADA.....1648
WAHLIN, TAMARA.1025, 1026, 1479, 1480
WAKEFIELD, CHANTAL.915, 1245, 1246
WALDRUP, LA RHONDA. .....845, 1239
WALKER, ALEXANDRA. ..... 1141
WALKER, JULIE.....1538
WALLACE, STEPHANIE.....1614
WALSH, EMILY.....1648
WALSH, JOHN. ..... 868
WANG, ANGELA. ..... 955, 1309
WANG, DEHUA.....1406
WANG, HUAN YOU. .....945, 1294
WANG, LAWRENCE.....1051, 1529
WANG, MICHELLE..... 893
WANG, REGINA. .....464
WANG, VINCENT.....1434
WANG, XINYU. .....1174
WANG, YVETTE. .....1434
WANG-GIUFFRE, ELIZABETH. .....1413
WARDI, GABRIEL..... 817
WASHINGTON, KRYSTAL. .....757
WASSON, MINA. ..... 580
WASTILA, LISA. ..... 511, 512
WATERS, ELIZABETH..... 580
WATSON, DEBORAH.1003, 1004, 1399, 1400
WATTANAMANO, PORNTHEP.512, 513
WATTS, ELI. .....513
WAYMENT, ANDREW.....932, 1271
WEATHERLY, JACOB. .....581
WEAVER, AMANDA. .....1640
WEAVER, APRIL. ..... 754
WEBB, SHANNON. ..... 1480
WEBER, SARA. .....1712
WEBSTER, LUKE.....1309
WEICKERT, MARIA. ..... 397
WEIMER, BRYANA.....1239
WEIR, JACQUELINE. ...1026, 1480, 1481
WEISSBROD, PHILIP.1004, 1005, 1400
WEISSMAN, CORY. .....1708
WELLS, TODD. .....1171
WELSH, RAYMOND. .....1051, 1530
WEN, AKI. ..... 103, 687, 688
WERNER, R AARON. .....1745
WERNER, REX.....1745
WEST, JULIE.....1094, 1166, 1343
WESTERMANN, MELISSA.774, 1146, 1333, 1334
WESTERN ADULT DAY HEALTH CARE CENTER. .....1630
WETTERSTEN, NICHOLAS.963, 1092, 1326
WHARRAM, JENNIFER. .....1614
WHEELER, KIM.....810, 1640
WHITE, KATHERINE.....465
WHITE, KYLE. ..... 1083
WHITLEY, NICHOLAS. .....103, 104
WIENER, GREGORY. .....769
WIETZKE, MATTHEW. ..... 1239
WIJAYARATNE, IMANIE. .....790, 1637
WILAND, WINONA. ..... 762
WILCOX, WENONAH. ..... 765
WILKIN, TIMOTHY. .....1299
WILKINS, MARJORIE. .....812
WILKINSON, MICHAEL. 896, 1196, 1197
WILLIAMS, BREAHNA.151, 270, 271, 398
WILLIAMS, JESSICA. ..... 617
WILLIAMS, JINA. .....747
WILLIAMS, MATTHEW..... 1102, 1414
WILLIAMS, STACY. .....1056, 1539
WILLIAMS, TAKISHA.80, 150, 151, 255, 397, 398, 733
WILLMS, HANNAH. .....1539
WILSON, CARLENE. .....1671, 1672, 1723
WINESBURG, JENNIFER. ..... 1123
WINKLER, GARRET. .....932
WISHNEK, HANNAH. ..... 1660
WITCZAK, IZABELA. .....630, 631
WOELKERS, DOUGLAS. ..... 825, 965
WOLF, CELIA. ..... 399
WOLF, RICHARD. ..... 826, 965, 1334
WOLFE, AMANDA.....1163
WON, ERIC.....1443
WONG, GORDON. .....1843
WONG, HENRY. .....918, 1254
WONG, IAN.....581
WONG, JUSTIN. ..... 955, 1309
WONG, RICHARD.....1007, 1402
WONG, VANESSA. ..... 1435
WONG, VICTOR.....1443
WONG, YOLANDA.....581
WOO, ANDY. .....1240
WOO, JASON.....1575
WOODIN, KAREN. .....821, 846, 915
WRIGHT, KIMBERLY. .....1163
WU, EVA. .....1814
WU, JENNIFER. ..... 465, 466
WU, MICHELLE.....1708
WU, VICTORIA. .....974, 1357

# M. Primary Care Index


WYLIE, BLAKE. ..... 60, 248

**Y**

YADLAPATI, RENA. ..... 955, 956
YAGUDAYEVA, RAISA. ..... 1708
YAMADA, KENTARO. ..... 1383
YAMANE, MAYA. 832, 856, 1098, 1149, 1383
YAN, CAROL. ..... 1005, 1006, 1401
YANG, JENNIFER. ..... 1357
YANG, JENNY. ..... 956, 1310
YAO, CATHERINE. ..... 131
YAPHOCKUN, KAREN KIM. ..... 1435
YCASAS, EMILY. ..... 1578, 1606
YEANG, CALVIN. ..... 1197
YELLEN, LAURENCE ..... 1077
YELON, JAY. ..... 1552
YEO, ALEXANDRIA. ..... 821, 912
YIDI, DIANA. ..... 1708
YIN, JANE. ..... 1051, 1530
YOO, RAPHAEL. ..... 1531
YOON, RYAN. ..... 104
YOON, TAE HYUN. ..... 177, 178
YOU, ALAN. ..... 933, 1271
YOUNAN, LAWRENCE. ..... 893, 1187
YOUNG, ALLA. ..... 1738, 1799
YOUNG, JENNIFER. ..... 71, 72
YOUNG, JOCELYN. ..... 837, 1440
YOUNG-PEN, TONI. ..... 600
YOUNOSZAI, ADEL. ..... 1414
YOUSEF, ANDREW. ..... 551
YOUSSEF, FADY. ..... 941, 1289
YU, AUDRINE. ..... 1056
YU, CAROL. 990, 991, 1386, 1778, 1779, 1843
YU, ELAINE. ..... 933, 1271, 1272
YU, HELENA. ..... 1444
YU, JENNIFER. ..... 1444
YUNG, DORIS. ..... 348
YUNG, STEVEN. ..... 513, 514

**Z**

ZABLIT, KARIM. ..... 550
ZAERPOOR, DARA. ..... 893, 1187
ZAGE, PETER. ..... 1444
ZAHEER, AARON. ..... 582
ZAHLER, MARVIN. ..... 466
ZAIDI, NOORINA. 832, 857, 1729, 1745, 1764, 1779, 1800, 1814, 1815, 1844
ZALE, CHELSEA. ..... 1357, 1358
ZAMBRANA, GEORGE. ..... 202
ZANDER, ASHLEY. ..... 1073
ZANGEN, ROCHELLE. ..... 349
ZARE, SOMAYE. ..... 1011, 1012
ZARGAR, SHABNAM. ..... 131
ZATT, DANIELLE. ..... 868
ZAYAS, MARIO. ..... 1715
ZECHA, RONALD. ..... 210, 211
ZELAC, DANIEL. ..... 63
ZHANG, HAIYAN. ..... 1012
ZHANG, SHERRY. ..... 956, 1310
ZHAO, TAILUN. ..... 1746, 1752, 1764, 1779
ZHONG, YAN. ..... 1344
ZHOU, JENNY. ..... 1293
ZIEG, ALAN. 118, 119, 187, 262, 263, 545, 546, 547, 548, 741
ZIMBRIC, MICHAEL. ..... 853, 1358, 1359
ZIMMERMAN, JENNIFER. ..... 1709
ZINK, IRENE. ..... 466, 467
ZLATAR, ZVINKA. ..... 1031, 1660
ZUBAIR, RAHEEL. ..... 759, 1255
ZVANUT, DONALD. 1746, 1752, 1764, 1779, 1800, 1801, 1815

**Mailing address:**
**Blue Shield of California Promise Health Plan**
**3840 Kilroy Airport Way**
Long Beach, CA 90806

**Customer Care**
(855) 699-5557, 8 a.m. to 6 p.m.
Monday through Friday

**Hearing-Impaired Assistance TTY**
(through California Relay Service) 711,
8 a.m. to 6 p.m.
Monday through Friday

**blueshieldpromise.com**

DIR50528-SD 06/2025

Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association

Promise Health Plan
**Blue Shield of CA Promise Health**
PO Box 4317
Woodland Hills, CA 91365-4317

PRESORTED
BOUND PRINTED
MATTER
U.S. POSTAGE **PAID**
BSC

, -