

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALLERGY & IMMUNOLOGY

HIYAMA LAUREN, S

Group Affiliation: BAZ ALLERGY, ASTHMA & SINUS CENTER, INC

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5410 W CYPRESS AVE STE 102, VISALIA CA 93291	559-274-1487	559-261-1526
OFFICE 1	563 I ST , REEDLEY CA 93654	559-637-2135	
OFFICE 3	7471 N FRESNO ST , FRESNO CA 93727	559-436-4500	559-261-1526
OFFICE 4	6643 N MILBURN AVE STE 101, FRESNO CA 93722	559-275-1400	559-274-1487

BAZ MALIK, N

Group Affiliation: BAZ ALLERGY, ASTHMA & SINUS CENTER, INC

Language(s) **SPANISH**
PUNJABI
URDU
TELUGU

Office #	Street:	Phone:	Fax:
OFFICE 1	5410 W CYPRESS AVE STE 102, VISALIA CA 93291	559-981-5040	559-637-2173
OFFICE 1	7471 N FRESNO ST , FRESNO CA 93720	559-436-4500	
OFFICE 3	563 I ST , REEDLEY CA 93654	559-637-2135	559-637-2173
OFFICE 4	505 N CLOVIS AVE , FRESNO CA 93727	559-981-5040	559-981-5647

SIDHU RABINDER, S

Group Affiliation: RABINDER S. SIDHU, MD INC

Language(s) **SPANISH**
HINDU
PUNJABI
URDU

Office #	Street:	Phone:	Fax:
OFFICE 1	7151 N CEDAR AVE STE 103, FRESNO CA 93720	559-325-7775	559-325-7505
OFFICE 1	807 W OAK ST STE C, VISALIA CA 93291	559-325-7775	
OFFICE 3	900 N DOUTY ST STE B, HANFORD CA 93230	559-325-7775	559-325-7505

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BOREN ERIC, J

Group Affiliation: KERN ALLERGY MEDICAL CLINIC INC

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	1921 18TH ST , BAKERSFIELD CA 93301	661-327-9693	661-327-0749
	OFFICE 1	443 W MORTON AVE STE B, PORTERVILLE CA 93257	559-782-8578	
	OFFICE 3	1429 MAIN ST , DELANO CA 93215	661-721-8832	661-327-0749

SINGH SUDEEP,

Group Affiliation: SUDEEP SINGH MD, INC

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH PUNJABI PUNJABI	OFFICE 1	3622 W PACKWOOD AVE , VISALIA CA 93277	559-578-2130	559-431-4721
	OFFICE 1	7011 N HOWARD ST STE 201, FRESNO CA 93720	559-431-9571	
	OFFICE 3	860 W 7TH ST , HANFORD CA 93230	559-578-2130	559-431-4721

TANUS TONNY,

Group Affiliation: KERN ALLERGY MEDICAL CLINIC INC

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1921 18TH ST , BAKERSFIELD CA 93301	661-327-9693	661-327-0749
	OFFICE 1	443 W MORTON AVE STE B, PORTERVILLE CA 93257	559-782-8578	
	OFFICE 3	1429 MAIN ST , DELANO CA 93215	661-721-8832	661-327-0749

ANESTHESIOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PALENCIA ARTURO, E

Group Affiliation: PAIN INSTITUTE OF CENTRAL CALIFORNIA INC

Language(s) SPANISH
SPANISH

Office # Street:

OFFICE 1

9802 STOCKDALE HWY STE 105, BAKERSFIELD CA
93311

Phone:

661-665-7880

Fax:

661-665-7811

ANESTHESIOLOGY - PAIN MANAGEMENT

KHOURY PHILIP, G

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

Language(s) SPANISH
ARABIC

Office # Street:

OFFICE 1

3850 RIVERLAKES DRIVE STE B, BAKERSFIELD CA
93312

Phone:

661-241-9338

Fax:

661-402-3540

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WASHINGTON DEIRDRE,

Group Affiliation: WASHINGTON & ASSOCIATES

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5329 OFFICE CENTER CT STE 110, BAKERSFIELD CA 93309	661-862-8582	661-852-8582

WILSON CHRISTOPHER, E

Group Affiliation: PAIN INSTITUTE OF CENTRAL CALIFORNIA, INC.

Language(s) **SPANISH**
SPANISH

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

PARMAR ASHOK, M

Group Affiliation: PAIN CLINICS OF CENTRAL CALIFORNIA, INC.

Language(s) **SPANISH**
GUJARATI

Office #	Street:	Phone:	Fax:
OFFICE 1	2350 W WHITENDALE AVE , VISALIA CA 93277	833-478-1818	833-478-1817

AUDIOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ANDERSEN DOUGLAS, E

Group Affiliation: **DOUGLAS E. ANDERSEN**

Language(s) **SPANISH**

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

WARNER WENDY, P

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

Language(s)

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

CARD - CARDIOVASCULAR DISEASE

LEE TOMMY, C

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE B201, BAKERSFIELD CA 93301	661-321-3161	661-321-3166

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

THAYAPRAN NALLATHAMBY,

Group Affiliation: NALLATHAMBY THAYAPRAN, MD, INC

Language(s)

TAMIL

Office #

OFFICE 1

Street:

350 N PORTER RD , PORTERVILLE CA 93257

Phone:

559-793-2677

Fax:

559-793-2650

DOCTOR NIRAJ, S

Group Affiliation: OMNI FAMILY HEALTH

Language(s) SPANISH

Office #

OFFICE 1

Street:

4131 MING AVE , BAKERSFIELD CA 93309

Phone:

866-707-6664

Fax:

661-746-9197

SONI BIKRAM, J

Group Affiliation: CENTRAL CALIFORNIA CARDIOVASCULAR

Language(s)

HINDU

Office #

OFFICE 1

Street:

2001 HIGH ST , SELMA CA 93662

Phone:

559-896-0400

Fax:

559-896-0404

OFFICE 1

1125 E SPRUCE AVE STE 201, FRESNO CA 93720

559-573-3433

OFFICE 3

951 E MERRITT AVE , TULARE CA 93720

559-896-0400

559-896-0404

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

THAYAPRAN NALLATHAMBY,

Group Affiliation: COMPREHENSIVE CARDIOVASCULAR MEDICAL GROUP, INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

5945 TRUXTUN AVE , BAKERSFIELD CA 93309

661-232-4278

661-631-5546

GONZALEZ ARMANDO,

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B201, BAKERSFIELD CA
93301

661-321-3161

661-321-3166

SINGH SARABJEET,

Group Affiliation: CENTRIC HEALTH

Language(s) SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD CA
93308

661-323-8384

661-323-9326

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SALVO JARED, M

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

Language(s) **SPANISH**
SPANISH

Office #
OFFICE 1

Street:
500 OLD RIVER RD STE 260, BAKERSFIELD CA 93311

Phone:
661-843-6464

Fax:
661-282-8417

GOWD PAMPANA,

Group Affiliation: CENTRIC HEALTH

Language(s) **SPANISH**

Office #
OFFICE 1

Street:
2901 SILLECT AVE STE 100, BAKERSFIELD CA 93308

Phone:
661-323-8384

Fax:
661-323-9326

GUPTA ANKUR, V

Group Affiliation: ANKUR GUPTA MEDICAL CORPORATION

Language(s) **SPANISH**
HINDI
PUNJABI

Office #
OFFICE 1

Street:
820 S AKERS ST STE 130, VISALIA CA 93277

Phone:
559-624-6520

Fax:
559-635-6192

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHETTY SHAILESH,

Group Affiliation: CENTRAL CALIFORNIA CARDIOVASCULAR

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	2001 HIGH ST , SELMA CA 93662	559-896-0400	559-896-0404
OFFICE 1	1125 E SPRUCE AVE STE 201, FRESNO CA 93720	559-573-3433	
OFFICE 3	951 E MERRITT AVE , TULARE CA 93274	559-896-0400	559-896-0404

SHARMA SHASHI, K

Group Affiliation: SHASHI K. SHARMA, M.D., INC.

Language(s) **SPANISH**
SPANISH
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	100 WILLOW PLAZA PL STE 208, VISALIA CA 93291	559-625-4278	559-625-4276

KRUEGER MICHAEL, L

Group Affiliation: MICHAEL L. KRUEGER, D.O., INC

Language(s) **SPANISH, PUNJAB**

Office #	Street:	Phone:	Fax:
OFFICE 1	7033 N FRESNO ST STE 301, FRESNO CA 93720	559-438-8181	559-438-8179

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

AZIZ KUSAI,

Group Affiliation: VISALIA CARDIOVASCULAR AND MEDICAL CENTER, INC.

Language(s)

ARABIC

Office #

OFFICE 1

OFFICE 1

Street:

101 E NOBLE AVE , VISALIA CA 93277

105 E NOBLE AVE , VISALIA CA 93277

Phone:

559-735-0500

559-735-0500

Fax:

559-735-0504

BEHL ASHOK,

Group Affiliation: ASHOK BEHL, M.D., INC.

Language(s)

HINDI

PUNJABI

Office #

OFFICE 1

Street:

567 W PUTNAM AVE STE 1, PORTERVILLE CA
93257

Phone:

559-781-0386

Fax:

559-781-8147

BHAJAL SUKHVINDER, S

Group Affiliation: HEART AND RHYTHM SPECIALISTS OF CALIFORNIA, INCORPORATED

Language(s)

PUNJABI

SPANISH

Office #

OFFICE 1

Street:

5120 W CYPRESS AVE , VISALIA CA 93277

Phone:

559-635-4800

Fax:

559-635-4844

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BANERJEE SUPRATIM,

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

Language(s) **SPANISH, CHINESE**
BENGALI
HINDI
GUJARATI

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

MEHTA VIRAL, Y

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

Language(s) **HINDU**
GUJARATI

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

NAIR SHYAM, K

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

Language(s) **SPANISH**
CHINESE
HEBREW
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2007 17TH ST , BAKERSFIELD CA 93301	661-633-1983	661-633-1101

CARD - INTERVENTIONAL CARDIOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DESAI CHIRAG, K

Group Affiliation: OMNI FAMILY HEALTH

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4131 MING AVE , BAKERSFIELD CA 93309	866-707-6664	661-746-9197
OFFICE 1	4900 CALIFORNIA AVE , BAKERSFIELD CA 93309	866-707-6664	

THOMPSON CALEB, D

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE B201, BAKERSFIELD CA 93301	661-321-3161	661-321-3166

REDDY H KIRAN, K

Group Affiliation: H KIRAN KUMAR REDDY MD PROFESSIONAL CORPORATION

Language(s) **SPANISH**
HINDI
TELUGU

Office #	Street:	Phone:	Fax:
OFFICE 1	1114 W 6TH ST STE 102, HANFORD CA 93230	559-587-9901	559-582-9755

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHARMA SANJIV,

Group Affiliation: **CENTRIC HEALTH**

Language(s) **SPANISH**

Office # Street:

OFFICE 1 2901 SILLECT AVE STE 100, BAKERSFIELD CA 93308

Phone:

661-323-8384

Fax:

661-323-9326

CHIROPRACTIC MEDICINE

LOPEZ CIARA, K

Group Affiliation: **ERICK MADRIGAL M.D., M.B.A, INC.**

Language(s) **SPANISH**

Office # Street:

OFFICE 1 833 SEQUOIA AVE , LINDSAY CA 93247

Phone:

559-562-1361

Fax:

559-789-9828

HONKA THOMAS, M

Group Affiliation: **VALLEY HEALTHCARE CENTERS**

Language(s) **SPANISH**

Office # Street:

OFFICE 1 590 W PUTNAM AVE , PORTERVILLE CA 93257

Phone:

559-781-4100

Fax:

559-781-1230

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUTIERREZ JUAN, C

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1530 E MANNING AVE , REEDLEY CA 93654	866-707-6664	661-746-9197
OFFICE 1	2505 MERCED ST , FRESNO CA 93721	866-707-6664	

DERM - DERMATOLOGY

LIN JULIE, H

Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

CABRAL ERIK, S

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

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	276 S MILL ST STE B & C, TEHACHAPI CA 93561	661-947-9000	661-266-8751
OFFICE 1	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	
OFFICE 3	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WONG REYNOLD, C

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

REYES MELISSA, A

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 93302	855-944-7546	800-572-0683

RIOS EON, J

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BERK DAVID, R

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

HAMIDI REYHANEH,

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

AWADALLA FARAH, C

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

Language(s)

GREEK

Office #	Street:	Phone:	Fax:
OFFICE 1	6181 N THESTA ST , FRESNO CA 93710	559-418-5000	559-931-0801
OFFICE 1	400 N IRWIN ST , HANFORD CA 93230	559-584-2700	
OFFICE 3	1025 N DEMAREE ST , VISALIA CA 93291	559-931-0800	559-931-0801
OFFICE 4	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9075

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KAFI REZA, Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

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

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

ZHU GEFEI, A Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DRAYER JEFFREY, A

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

Language(s)

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

SHAPIRO STEVEN,

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

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	876 W GRAND AVE , PORTERVILLE CA 93257	951-412-1540	951-412-1541
OFFICE 1	144 S L ST , TULARE CA 93274	661-322-2700	
OFFICE 3	2323 W CALDWELL AVE , VISALIA CA 93277	661-322-2700	661-427-4587

FERNANDEZ GEOVER,

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

Language(s)

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DAVID CONSUELO, V

Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s)

SPANISH

Office #

OFFICE 1

Street:

530 LYTTON AVE 2ND FL , PALO ALTO CA 94301

Phone:

855-944-7546

Fax:

800-572-0683

WANG CHEN,

Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s) **SPANISH**

Office #

OFFICE 1

Street:

530 LYTTON AVE 2ND FL , PALO ALTO CA 94301

Phone:

855-944-7546

Fax:

800-572-0683

WEISS STEFAN, C

Group Affiliation: **DIRECT DERMATOLOGY PROFESSIONALS, P.C.**

Language(s)

Office #

OFFICE 1

Street:

530 LYTTON AVE 2ND FL , PALO ALTO CA 94301

Phone:

855-944-7546

Fax:

800-572-0683

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

AMMAR NEAL, M

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

Language(s)	Office #	Street:	Phone:	Fax:
ARABIC	OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-633-3669
SPANISH				

ABAZA SAM,

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

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	5600 CALIFORNIA AVE STE 101, BAKERSFIELD CA 93309	661-322-2700	661-427-4585
ARABIC	OFFICE 1	300 OLD RIVER RD STE 120, BAKERSFIELD CA 93311	661-322-2700	
	OFFICE 3	1200 N CHINA LAKE BLVD , RIDGECREST CA 93555	760-446-9007	760-446-6900
	OFFICE 4	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9075

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WINKELMANN RICHARD, R

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

Language(s)

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

RASKIN BERNARD,

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

Language(s)

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

TANG NIKKI, DY

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

Language(s) **SPANISH**

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

TAHERI DANIEL, P

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

Language(s)
FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	1025 N DEMAREE ST , VISALIA CA 93291	559-931-0800	559-931-0801
OFFICE 1	6181 N THESTA AVE STE 104, FRESNO CA 93710	559-418-5000	
OFFICE 3	400 N IRWIN ST , HANFORD CA 93230	559-584-2700	559-415-7199
OFFICE 4	1317 MAIN ST STE B, DELANO CA 93215	661-430-9070	661-430-9075

WONG DAVID, J

Group Affiliation: DIRECT DERMATOLOGY PROFESSIONALS, P.C.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	530 LYTTON AVE 2ND FL , PALO ALTO CA 94301	855-944-7546	800-572-0683

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FM - FAMILY MEDICINE

PHUI KHUONG, C

Group Affiliation: AVENAL COMMUNITY HEALTH CENTER

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	755 N SEQUOIA AVE STE B, LINDSAY CA 93247	559-562-9399	559-562-9379
OFFICE 1	781 N SEQUOIA AVE STE 3, LINDSAY CA 93247	559-562-2655	

GEN - MEDICAL BIOCHEMICAL GENETICS

CURRY CYNTHIA,

Group Affiliation: CYNTHIA CURRY

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	215 N FRESNO ST , FRESNO CA 93701	559-459-2269	559-459-7179

MED - ENDOCRINOLOGY DIABETES & METABOLISM

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WIN HTET HTET,

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**
BURMESE

Office # Street:
OFFICE 1 4131 MING AVE , BAKERSFIELD CA 93309

Phone:
866-707-6664

Fax:
661-746-9197

SHAH HARSHIT, R

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) **SPANISH**

Office # Street:
OFFICE 1 9500 STOCKDALE HWY STE 201, BAKERSFIELD CA 93311

Phone:
661-327-1431

Fax:
661-321-3286

PATEL RONAKKUMAR, D

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**

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OFFICE 1 4131 MING AVE , BAKERSFIELD CA 93309

Phone:
866-707-6664

Fax:
661-746-9197

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SINGH ATAM, B

Group Affiliation: **CENTRIC HEALTH**

Language(s) **SPANISH**

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

DUGGAL JASLEEN, K

Group Affiliation: **CENTRIC HEALTH**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3008 SILLECT AVE STE 220, BAKERSFIELD CA 93308	661-748-1999	661-748-1815

KUMAR PAWAN,

Group Affiliation: **ALTURA CENTERS FOR HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SAHASRANAM PREM,

Group Affiliation: CENTRAL VALLEY ENDOCRINOLOGY, A PROFESSIONAL CORPORATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	515 W GRANGEVILLE BLVD , HANFORD CA 93230	559-587-1100	559-587-9044
OFFICE 1	1124 N CHINOWTH ST STE 102, VISALIA CA 93291	559-713-6869	

SIDHU SUKHAMPAL, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) SPANISH
SPANISH
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	1313 E HERNDON AVE STE 106, FRESNO CA 93720	559-228-6600	559-226-3709

KUMAR PAWAN,

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) SPANISH
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	590 W PUTNAM AVE STE 2A, PORTERVILLE CA 93257	559-781-3700	559-339-1041
OFFICE 1	252 N HWY 65 , LINDSAY CA 93247	559-781-3700	

MED - GASTROENTEROLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MATUK ROBIN, A

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

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5959 TRUXTUN AVE STE 200, BAKERSFIELD CA 93309	661-324-1203	661-324-3195

BHAIKA HARPAL, S

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

Language(s) SPANISH
PUNJABI
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	5959 TRUXTUN AVE STE 200, BAKERSFIELD CA 93309	661-324-1203	661-324-3195
OFFICE 1	6425 LYNCH CANYON DR , LAKE ISABELLA CA 93240	661-324-1203	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KALHA ISHAAN, S

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

Language(s) **SPANISH**
HINDU
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	1519 GARCES HWY STE 3, DELANO CA 93215	661-324-1203	661-716-1226

MITTAL VIVEK,

Group Affiliation: VIVEK MITTAL, M.D. AND MANISHA MITTAL, M.D., INC.

Language(s) **SPANISH HINDU P**
HINDU
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	7045 N MAPLE AVE STE 101, FRESNO CA 93720	559-900-4013	559-900-4172

KALHA ISHAAN, S

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

Language(s) **SPANISH**
HINDU
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	5959 TRUXTUN AVE STE 200, BAKERSFIELD CA 93309	661-324-1203	661-324-3195
OFFICE 1	1519 GARCES HWY STE 3, DELANO CA 93215	661-324-1203	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BHO GAL RABINDER, S

Group Affiliation: RABINDER S. BHO GAL, MD, HARPAL S. BHA IKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD

Language(s)

HINDI
SPANISH

Office #
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CHOWDHURY TABASSUM, A

Group Affiliation: RABINDER S. BHO GAL, MD, HARPAL S. BHA IKA, MD, TABASSUM A. CHOWDHURY, MD, ROBIN A. MATUK, MD, ISHAAN S. KALHA, MD

Language(s) SPANISH
INDIAN

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93309

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661-324-1203

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661-321-3271

RAHIMI-NAINI SOHRAB,

Group Affiliation: SOHRAB RAHIMI NAINI M.D., INC.

Language(s)

FARSI

Office #
OFFICE 1

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Phone:
559-854-7700

Fax:
559-854-7780

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MED - HEMATOLOGY

NGUYEN VINH-LINH, B

Group Affiliation: BLOOD AND CANCER THERAPEUTICS, A MEDICAL CORPORATION

Language(s) **SPANISH, VIETNA**

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PATEL RAVI,

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

Language(s)

Office #	Street:	Phone:	Fax:
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KANAMORI DAVID, E

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

Language(s)

SPANISH

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JAWIEN WILLIAM, J

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

SHAMBAUGH SHAWN, C

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

Language(s) SPANISH, HINDU,

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

RAO RAVI, D

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) SPANISH
TELUGU
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1230

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PATIL SADANAND,

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

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-322-7027

HACKETT LEONARD, T

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

ESTRADA DEXTER, T

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BALOGH ANWER,

Group Affiliation: **ANWER BALOGH MD.**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

200 N G ST , PORTERVILLE CA 93257

559-783-8063

559-783-8073

CARTMELL ALAN, D

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

Language(s)

Office #

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Phone:

Fax:

SPANISH

OFFICE 1

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661-322-2206

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AULAKH AMARDEEP, S

Group Affiliation: **CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

HINDU

OFFICE 1

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559-326-1222

559-326-1225

PUNJABI

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HAGER STEVEN, J

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 7130 N MILLBROOK AVE , FRESNO CA 93720

559-326-1222

559-326-1225

MED - HIV/AIDS MEDICINE

FELIZARTA FRANCO, A

Group Affiliation: FRANCO ANTONIO BALAMBAN FELIZARTA

Language(s)

Office # Street:

Phone:

Fax:

TAGALOG

OFFICE 1 3535 SAN DIMAS ST STE 24, BAKERSFIELD CA 93301

661-324-3128

661-324-1129

MED - HOSPICE/PALLIATIVE CARE

PATEL RISHI, R

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

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 6501 TRUXTUN AVE , BAKERSFIELD CA 93309

661-322-2206

661-327-7027

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MED - INFECTIOUS DISEASE

HEIDARI-FOROUSHANI ARASH,

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE A100, BAKERSFIELD CA
93301

661-327-8538

661-327-5432

SENINING RANDOLPH, C

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

Language(s)

Office #

Street:

Phone:

Fax:

FILIPINO

OFFICE 1

6501 TRUXTUN AVE , BAKERSFIELD CA 93309

661-322-2206

661-633-3669

KITT SEE-RUERN, S

Group Affiliation: KERN COUNTY MEDICAL CLINIC, INC.

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

THAI

OFFICE 1

2323 16TH ST STE 108, BAKERSFIELD CA 93301

661-325-2448

661-325-7425

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FELIZARTA FRANCO, A

Group Affiliation: FRANCO ANTONIO BALAMBAN FELIZARTA

Language(s)

TAGALOG

Office #

OFFICE 1

Street:

3535 SAN DIMAS ST STE 24, BAKERSFIELD CA
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Fax:

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RAJU MINA,

Group Affiliation: MINA RAJU DO INC

Language(s)

Office #

OFFICE 1

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5400 W HILLSDALE AVE , VISALIA CA 93291

Phone:

559-302-7927

Fax:

559-741-9938

MED - INTERNAL MEDICINE

BANSAL RUCHI,

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

Language(s) SPANISH

SPANISH

HINDI

Office #

OFFICE 1

Street:

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93312

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Fax:

845-853-6738

OFFICE 1

1205 GARCES HWY STE 203, DELANO CA 93215

661-725-6910

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MED - MEDICAL ONCOLOGY

KUO SAMUEL, S

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

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OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

PASCUZZO JOSEPH, M

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

PARVEEZ RABIA,

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**
URDU

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KUO SAMUEL, S

Group Affiliation: **SAMUEL SHIH-HSIUNG KUO**

Language(s)

CHINESE

Office #

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1088 N CHERRY ST , TULARE CA 93274

Phone:

559-688-8899

Fax:

559-688-8889

IBRAHIM DINA,

Group Affiliation: **CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.**

Language(s) **SPANISH**

ARABIC

Office #

OFFICE 1

Street:

7130 N MILLBROOK AVE , FRESNO CA 93720

Phone:

559-326-1222

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559-326-1225

GUPTA SACHIN,

Group Affiliation: **CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.**

Language(s) **SPANISH**

Office #

OFFICE 1

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7130 N MILLBROOK AVE , FRESNO CA 93720

Phone:

559-326-1222

Fax:

559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HASEEB ABDUL, M

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

MED - NEPHROLOGY

THOMAS MOHSEN,

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) **SPANISH**
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	590 W PUTNAM AVE STE 2A, PORTERVILLE CA 93257	559-781-3700	559-339-1041
OFFICE 1	252 N HWY 65 , LINDSAY CA 93247	559-781-3700	

DHINGRA HEMANT,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)
PUNJABI
SPANISH
URDU

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DHAYALAN DHAYANITHI,

Group Affiliation: THE NEPHROLOGY GROUP, INC

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

RAM PANKAJ, P

Group Affiliation: THE NEPHROLOGY GROUP, INC.

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

DHINDSA HARPREET, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
	OFFICE 4	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	559-226-3709

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CHEN WEI-TZUOH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)

CHINESE

Office #

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Fax:

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559-226-3709

OFFICE 1 900 N DOUTY B , HANFORD CA 93230

559-228-6600

ADAPA SREEDHAR, R

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)

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OFFICE 3 900 N DOUTY ST STE B, HANFORD CA 93230

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559-226-3709

ADAPA SREEDHAR, R

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Language(s) SPANISH

Office #

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OFFICE 1 1101 N CHERRY ST , TULARE CA 93274

559-686-9097

559-366-7060

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

AGRAWAL SIDDHARTHA,

Group Affiliation: BASS MEDICAL GROUP

Language(s) **SPANISH**
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	7045 N MAPLE AVE STE 107 & 108, FRESNO CA 93270	559-746-9605	559-558-8183
OFFICE 1	820 S AKERS ST STE 120, VISALIA CA 93277	559-625-4118	
OFFICE 3	125 MALL DR STE 211B, HANFORD CA 93230	559-825-6204	559-625-6004
OFFICE 4	384 PEARSON DR , PORTERVILLE CA 93257	559-788-1022	559-793-4288

CHAPAGAIN BIKASH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) **SPANISH**
HINDI
NEPALI

Office #	Street:	Phone:	Fax:
OFFICE 1	568 E HERNDON AVE , FRESNO CA 93720	559-228-6600	559-226-3709

ALI SLAMAT,

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s) **SPANISH**
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	559-228-6600	559-226-3709
OFFICE 1	432 LEXINGTON ST STE A, DELANO CA 93215	559-228-6600	
OFFICE 3	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	559-228-6600	559-226-3709

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SURI ANURADHA,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
GERMAN	OFFICE 1	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	
HINDU	OFFICE 3	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
	OFFICE 4	800 N ST , SANGER CA 93657	559-228-6600	559-226-3709

CAO YANGMING,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
CHINESE	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	433 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	
	OFFICE 3	800 N ST , SANGER CA 93657	559-228-6600	559-226-3709

BARSOUM Y WILLIAM,

Group Affiliation: Y. WILLIAM BARSOUM, MD, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	617 N AKERS ST , VISALIA CA 93291	559-697-6290	559-697-6291
ARABIC				

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LEVY STEVEN, B

Group Affiliation: THE NEPHROLOGY GROUP, INC.

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

YANG TOM,

Group Affiliation: TOM YANG, M.D., INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	503 S WATSON ST , VISALIA CA 93277	559-623-9636	559-623-9951
MANDARIN	OFFICE 1	1105 N DOUTY ST STE A, HANFORD CA 93239	559-584-1664	
	OFFICE 3	1646 E HERNDON AVE STE 106, FRESNO CA 93720	559-554-2914	800-503-2042

MARTINEZ GREGORY, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH, HMONG	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
SPANISH	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	1205 EVERGREEN ST , SELMA CA 93662		559-226-3709
	OFFICE 4	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ATWAL SUKHVIR, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
PUNJABI	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
HINDU	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	559-226-3709
	OFFICE 4	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

MUBIN TARIQ,

Group Affiliation: KERN NEPHROLOGY MEDICAL GROUP

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	1980 CECIL AVE , DELANO CA 93215	661-323-2847	661-324-2328
PUNJABI				
HINDU				

VEMURI NIRUPAMA,

Group Affiliation: SIERRA VIEW NEPHROLOGY, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	557 W MORTON AVE STE A, PORTERVILLE CA 93257	559-784-4925	559-784-4966
TELUGU				

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JAVED TARIQ,

Group Affiliation: TARIQ JAVED M.D. INC

Language(s)	Office #	Street:	Phone:	Fax:
HINDU	OFFICE 1	515 S LOCUST ST , VISALIA CA 93277	559-625-8674	559-622-8727
URDU	OFFICE 1	390 PEARSON DR , PORTERVILLE CA 93257	559-793-4400	
PUNJABI				

GURM HARMEET, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
	OFFICE 1	900 N DOUTY B , HANFORD CA 93230	559-228-6600	
	OFFICE 3	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 4	568 E HERNDON AVE STE 104, FRESNO CA 93720	559-228-6600	559-226-3709

SAXENA NISHKARSH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	661-588-9999	661-588-9041
HINDU				

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SAXENA NISHKARSH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) **SPANISH**
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	20041 VALLEY BLVD STE 3, TEHACHAPI CA 93561	661-558-9999	661-588-9041

SAXENA NISHKARSH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) **SPANISH**
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	432 LEXINGTON AVE STE A, DELANO CA 93215	661-588-9999	661-588-9041

SAXENA NISHKARSH,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) **SPANISH**
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	661-588-9999	661-588-9041

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HWANG MEI-TSUEY,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
MANDARIN	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	559-226-3709
	OFFICE 4	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

SINGH JASJIT,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
URDU HINDU PUNJABI	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	559-226-3709
	OFFICE 4	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

GERARDINE SUPRIYA, S

Group Affiliation: THE NEPHROLOGY GROUP, INC

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JOSHI SUDHIR, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

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

GARCHA AMARINDER, S

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH, HMONG	OFFICE 1	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
HINDU	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	
PUNJABI	OFFICE 3	900 N DOUTY ST STE B, HANFORD CA 93230	559-228-6600	559-226-3709

SOURIAL MARYANNE,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	233 E CALDWELL ST , VISALIA CA 93277	559-228-6600	559-226-3709
ARABIC	OFFICE 1	900 DOUTY ST STE B, HANFORD CA 93230	559-228-6600	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DORSAINVIL DOMINIQUE,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH HMONG	OFFICE 1	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709
FRENCH	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	
HAITIAN	OFFICE 3	900 N DOUTY ST STE B, HANFORD CA 93230	559-228-6600	559-226-3709
CREOLE				

SU STEVE, W

Group Affiliation: THE NEPHROLOGY GROUP, INC.

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

DUFLOT JOSEPH, C

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	800 N ST , SANGER CA 93657	559-228-6600	
	OFFICE 3	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	559-226-3709
	OFFICE 4	515 W ACEQUIA STE A, FRESNO CA 93291	559-228-6600	559-226-3709

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DUMLAO MELODY, G

Group Affiliation: KERN NEPHROLOGY MEDICAL GROUP

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

KAZMI HASHIM, R

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH, PUNJAB	OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	661-588-9999	661-588-9041
	OFFICE 1	3933 COFFEE RD STE B, BAKERSFIELD CA 93308	559-228-6600	
	OFFICE 3	1205 GARCES HWY STE 101, DELANO CA 93215	559-228-6600	559-226-3709
	OFFICE 4	6621 LAKE ISABELLA BLVD , LAKE ISABELLA CA 93240	661-588-9999	661-588-9041

SANCHEZ RIVERA NEYSHA, J

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
	OFFICE 1	1205 EVERGREEN ST , SELMA CA 93662	559-228-6600	
	OFFICE 3	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	559-226-3709

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KATIBAH IBRAHIM,

Group Affiliation: THE NEPHROLOGY GROUP, INC.

Language(s) SPANISH
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	568 E HERNDON AVE STE 201, FRESNO CA 93720	559-228-6600	559-226-3709
OFFICE 1	233 E CALDWELL AVE , VISALIA CA 93277	559-228-6600	
OFFICE 3	900 DOUTY ST STE B, HANFORD CA 90278	559-228-6600	559-226-3709

MED - PULMONARY DISEASE

LAUGHLIN ROBERT, L

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

Language(s)

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

GOYAL RAJAN,

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

Language(s) SPANISH
HINDI
PUNJABI

BENGALI

Office #	Street:	Phone:	Fax:
OFFICE 1	5531 BUSINESS PARK S STE 201, BAKERSFIELD CA 93309	661-324-7300	661-324-7306

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SANDHU HARPREET, S

Group Affiliation: **HARPREET S. SANDHU**

Language(s)

HINDU
PUNJABI

Office #
OFFICE 1

Street:
200 N G ST , PORTERVILLE CA 93257

Phone:
559-788-0818

Fax:
559-788-0150

SANDHU HARPREET, S

Group Affiliation: **VALLEY HEALTHCARE CENTERS**

Language(s) SPANISH
HINDU
PUNJABI

Office #
OFFICE 1

OFFICE 1

Street:
590 W PUTNAM AVE STE 2A, PORTERVILLE CA 93257

252 N HWY 65 , LINDSAY CA 93247

Phone:
559-781-3700

559-781-3700

Fax:
559-339-1041

VAGHASIA PRAMIL, B

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

Language(s) SPANISH
SPANISH
GUJARATI

Office #
OFFICE 1

OFFICE 1

Street:
8305 BRIMHALL RD STE 1601, BAKERSFIELD CA 93312

1205 GARCES HWY STE 203, DELANO Ca 93215

Phone:
661-695-6777

661-725-6910

Fax:
845-853-6738

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HANSA SAHAPHUN, N

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

Language(s)

TAHI

Office #

OFFICE 1

Street:

3838 SAN DIMAS ST STE A250, BAKERSFIELD CA 93301

Phone:

661-323-5300

Fax:

661-323-5455

MED - RHEUMATOLOGY

WATROUS DANIEL, A

Group Affiliation: **DANIEL A WATROUS**

Language(s)

Office #

OFFICE 1

Street:

5315 W HILLSDALE AVE , VISALIA CA 93291

Phone:

559-732-9900

Fax:

559-732-9908

OFFICE 1

6327 N FRESNO ST STE 101, FRESNO CA 93710

559-732-9900

NARAMALA SRIKANTH,

Group Affiliation: **CALIFORNIA ARTHRITIS, AUTOIMMUNE & PAIN INSTITUTE INC**

Language(s)

HINDI

TELUGU

Office #

OFFICE 1

Street:

5319 W HILLSDALE AVE , VISALIA CA 93291

Phone:

559-732-1648

Fax:

559-732-0664

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KIM JIM, C

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

Language(s) **SPANISH, CHINESE**
KOREAN
CHINESE
TAGALOG

Office #	Street:	Phone:	Fax:
OFFICE 1	2203 17TH ST , BAKERSFIELD CA 93301	661-716-0333	661-716-1288

MED - SLEEP MEDICINE

RASHID KHADIJA, S

Group Affiliation: **KHADIJA RASHID, M.D.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4042 S DEMAREE ST , VISALIA CA 93277	559-754-2967	559-754-2970
OFFICE 1	255 W HERNDON AVE STE 102, CLOVIS CA 93612	559-325-8437	

RASHID SAQIB,

Group Affiliation: **SAQIB RASHID, M.D.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4042 S DEMAREE ST , VISALIA CA 93277	559-754-2967	559-754-2970
OFFICE 1	255 W HERNDON AVE STE 102, CLOVIS CA 93612	559-325-8437	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NAVAB PEDRAM,

Group Affiliation: BETTER NIGHTS SLEEP CENTER, INC.

Language(s)

FARSI
SPANISH
GERMAN

Office #

OFFICE 1

Street:

6067 N FRESNO ST , FRESNO CA 93710

Phone:

661-588-5010

Fax:

661-588-5012

SMITH LONNIE, R

Group Affiliation: LONNIE R. SMITH, MD, INC.

Language(s) SPANISH

SPANISH

Office #

OFFICE 1

Street:

1066 N CHERRY ST , TULARE CA 93274

Phone:

559-686-2599

Fax:

559-686-5206

SANDHU AHANA,

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

Language(s) SPANISH

PUNJABI

HINDI

Office #

OFFICE 1

Street:

8305 BRIMHALL RD STE 1601, BAKERSFIELD CA
93312

Phone:

661-516-2471

Fax:

661-695-6767

OFFICE 1

1205 GARCES HWY STE 203, DELANO CA 93215

661-395-6777

NATUROPATHY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GADDAM KALYAN, R

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

Language(s)

TELUGU
HINDI

Office #

OFFICE 1

Street:

6501 TRUXTUN AVE , BAKERSFIELD CA 93309

Phone:

661-322-2206

Fax:

661-633-3669

NEURO - NEUROLOGICAL SURGERY

RAHIMIFAR MAJID,

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

Language(s) **SPANISH**

Office #

OFFICE 1

Street:

2601 OSWELL ST STE 101, BAKERSFIELD CA 93306

Phone:

661-872-9999

Fax:

661-872-9988

ROSENTHAL PHILIP ,

Group Affiliation: **PHILIP ROSENTHAL MD PC**

Language(s) **SPANISH**

SPANISH

Office #

OFFICE 1

Street:

2323 16TH ST STE 407, BAKERSFIELD CA 93301

Phone:

661-741-0924

Fax:

661-741-0930

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SERXNER BENJAMIN, J

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

Language(s) **SPANISH**

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

LERAMO OLUSEGUN, B

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

Language(s) **SPANISH**

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

NEURO - NEUROLOGY

LIN JIAN, C

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

Language(s)
CANTONESE

Office #	Street:	Phone:	Fax:
OFFICE 1	2701 F ST , BAKERSFIELD CA 93301	661-322-3008	661-479-8250

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CHAHIL BOOTA, S

Group Affiliation: **BOOTA S CHAHIL**

Language(s)

PUNJABI

Office #

Street:

Phone:

Fax:

OFFICE 1

117 N AKERS ST , VISALIA CA 93291

559-625-0202

661-206-4081

OFFICE 1

110 N D ST , PORTERVILLE CA 93257

559-625-0202

OFFICE 3

432 LEXINGTON ST STE C, DELANO CA 93215

559-625-0202

661-206-4081

CHAHIL BOOTA, S

Group Affiliation: **ALTURA CENTERS FOR HEALTH**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

1101 N CHERRY ST , TULARE CA 93274

559-686-9097

559-366-7060

LABIB SAMEH, S

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

Language(s) **SPANISH, ARABIC**

ARABIC

Office #

Street:

Phone:

Fax:

OFFICE 1

2701 F ST , BAKERSFIELD CA 93301

661-322-3008

661-479-8250

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DANDAMUDI VENKATA,

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

HINDU

Office #

OFFICE 1

Street:

3838 SAN DIMAS ST STE A140, BAKERSFIELD CA
93301

Phone:

661-632-7126

Fax:

661-324-3606

OFFICE 1

3838 SAN DIMAS ST STE A250, BAKERSFIELD CA
93301

661-324-0500

JANAKIRAMAN VENKATESH,

Group Affiliation: **JEY NEURO CENTER, INC**

Language(s) SPANISH

TAMIL

HINDU

Office #

OFFICE 1

Street:

3400 CALLOWAY DR STE 100, BAKERSFIELD CA
93312

Phone:

661-776-3876

Fax:

661-766-3876

THIAGARAJAN RAMU,

Group Affiliation: **VALLEY HEALTHCARE CENTERS**

Language(s) SPANISH

TAMIL

Office #

OFFICE 1

Street:

590 W PUTNAM AVE STE 2A, PORTERVILLE CA
93257

Phone:

559-781-3700

Fax:

559-339-1041

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

RAVI VINUTHA,

Group Affiliation: JEY NEURO CENTER, INC

Language(s) SPANISH
TAGALOG
HINDU

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

ZHANG LING,

Group Affiliation: KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH, TAGALO
CANTONESE

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

SAREMI KAVEH,

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

Language(s) SPANISH

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SABETIAN KATAYOUN,

Group Affiliation: KATAYOUN SABETIAN MD INC

Language(s)

SPANISH

Office #

OFFICE 1

Street:

2323 16TH ST STE 206, BAKERSFIELD CA 93301

Phone:

661-322-4601

Fax:

661-322-6049

WANG YAWEN,

Group Affiliation: KERN COUNTY NEUROLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH, TAGALO

MANDARIN

Office #

OFFICE 1

Street:

1705 28TH ST , BAKERSFIELD CA 93301

Phone:

661-322-3008

Fax:

661-869-1834

OFFICE 1

1711 28TH ST STE A, BAKERSFIELD CA 93301

661-322-3008

SALEHI HAMID, R

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

Language(s) SPANISH

FARSI

Office #

OFFICE 1

Street:

2601 OSWELL ST STE 101, BAKERSFIELD CA 93306

Phone:

661-872-9999

Fax:

661-872-1915

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

THOMAS KIRON,

Group Affiliation: **UNITED NEUROSCIENCE, INC**

Language(s)

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

THIAGARAJAN RAMU,

Group Affiliation: **RAMU THIAGARAJAN, MD, A PROFESSIONAL CORPORATION**

Language(s)

TAMIL

Office #	Street:	Phone:	Fax:
OFFICE 1	382 N PEARSON DR , PORTERVILLE CA 93257	559-783-0100	559-783-0200

NEURO - NEUROLOGY/PEDIATRIC

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DAVID RAYMUND, R

Group Affiliation: CHILD NEUROLOGY CENTER OF BAKERSFIELD INC.

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

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

NEURO - VASCULAR NEUROLOGY

BUI HAO, D

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

Language(s)
VIETNAMESE

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

OB - GYNECOLOGIC ONCOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MANRRIQUEZ ERICA, N

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

SPANISH

Office #

OFFICE 1

Street:

500 OLD RIVER RD STE 200, BAKERSFIELD CA
93311

Phone:

661-663-6429

Fax:

661-663-6041

TAMMELA JONATHAN, E

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

Office #

OFFICE 1

Street:

500 OLD RIVER RD STE 200, BAKERSFIELD CA
93311

Phone:

661-663-6429

Fax:

661-663-6041

OB - GYNECOLOGY

NGUYEN JOHN, T

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) SPANISH

SPANISH

Office #

OFFICE 1

Street:

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Phone:

559-781-3700

Fax:

559-339-1041

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUPTA PARUL,

Group Affiliation: **GUPTA-KUMAR MEDICAL PRACTICE ASSOCIATES, INC.**

Language(s) **SPANISH**
HINDI
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	858 N CHERRY ST STE F, TULARE CA 93274	559-688-2229	559-686-0471

OB - MATERNAL AND FETAL MEDICINE

HELM DOUGLAS, A

Group Affiliation: **PERINATAL ASSOCIATES OF CENTRAL CALIFORNIA MEDICAL GROUP, INC.**

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2273 E BEECHWOOD AVE , FRESNO CA 93720	559-268-8307	559-268-0650
OFFICE 1	2210 E ILLINOIS AVE STE 308, FRESNO CA 93701	559-268-8307	

OB - OBSTETRICS & GYNECOLOGY

HALL LYNOUS, W

Group Affiliation: **CLINICA SIERRA VISTA**

Language(s)
SPANISH

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PEREZ LEONARD,

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s) **SPANISH**
SPANISH

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

VICENTE RODOLFO, E

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

LICHTENSTEIN RON,

Group Affiliation: OMNI WOMEN'S HEALTH MEDICAL GROUP, INC.

Language(s) **SPANISH**
SPANISH
GERMAN
HEBREW

Office #	Street:	Phone:	Fax:
OFFICE 1	2210 E ILLINOIS AVE STE 406, FRESNO CA 93701	559-486-8888	559-486-8886
OFFICE 1	3812 N 1ST ST , FRESNO CA 93726	559-495-3120	
OFFICE 3	1530 SHAW AVE , CLOVIS CA 93611	559-323-9133	559-323-8070
OFFICE 4	2405 TULARE ST , FRESNO CA 93721	559-558-4949	559-241-6510

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHAKESPEARE CARY, S

Group Affiliation: **GOOD SAMARITAN HOSPITAL, LP**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

1217 7TH ST , WASCO CA 93280

661-758-5500

661-758-5511

BANKS SHIMEKA, L

Group Affiliation: **ALTURA CENTERS FOR HEALTH**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

1101 N CHERRY ST , TULARE CA 93274

559-686-9097

559-366-7060

BETRE ABRAHAM,

Group Affiliation: **TIPTON MEDICAL CLINIC**

Language(s) **SPANISH**

Office #

Street:

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Fax:

OFFICE 1

565 N THOMPSON RD , TIPTON CA 93272

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Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SINGLETON CHRYSAL, JL

Group Affiliation: SINGLETON OBSTETRICS & GYNECOLOGY MEDICAL CORPORATION.

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3410 MCCALL AVE STE 115, SELMA CA 93662	559-891-7390	559-891-7393

SHARMA RAHUL,

Group Affiliation: RAHUL SHARMA MD., INC.

Language(s) **SPANISH**
HINDU
PUNJABI

SPANISH

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

BORBERG FRANCESCHI CHRISTIAN, J

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUPTA PARUL,

Group Affiliation: AVENAL COMMUNITY HEALTH CENTER

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	858 N CHERRY ST STE F, TULARE CA 93274	559-686-0412	559-686-2229

GEILING MICHAEL, D

Group Affiliation: MICHAEL D. GEILING, INC.

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	254 N KESSING ST , PORTERVILLE CA 93257	559-781-8500	559-781-8300

SRINIVAS VASANTHI,

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s)
SPANISH
HINDI
TAMIL
SPANISH

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALLEN EDWARD, C

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) **SPANISH**

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

LOPEZ LUIS, F

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1701 STINE RD , BAKERSFIELD CA 93309	866-707-6664	661-746-9197
OFFICE 1	1022 CALLOWAY DR , BAKERSFIELD CA 93312	866-707-6664	
OFFICE 3	4900 CALIFORNIA AVE STE 100B, BAKERSFIELD CA 93312	866-707-6664	661-746-9197

PANG KIN,

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**
CANTONESE
MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LEE FENGLALY, C

Group Affiliation: OMNI WOMEN'S HEALTH MEDICAL GROUP, INC.

Language(s) **SPANISH**
HONANG

Office #	Street:	Phone:	Fax:
OFFICE 1	2210 E ILLINOIS AVE STE 201, FRESNO CA 93701	559-266-2496	559-266-8560
OFFICE 1	2550 MERCED ST , FRESNO CA 93721	559-443-0170	
OFFICE 3	1530 SHAW AVE , CLOVIS CA 93611	559-323-9133	559-323-8070

WU EIJEAN,

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**
ELAMITE

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

UNG FEEI FEEI, W

Group Affiliation: OMNI WOMEN'S HEALTH MEDICAL GROUP, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1530 SHAW AVE , CLOVIS CA 93611	559-323-9133	559-495-3134
OFFICE 1	2210 E ILLINOIS AVE STE 406, FRESNO CA 93701	559-486-8888	
OFFICE 3	3812 N 1ST ST , FRESNO CA 93726	559-495-3120	559-495-3134

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

RESENDIZ RIOS FAUSTINO, R

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**
SPANISH

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RATL MRAD YASSER, S

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**
ARABIC

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RIVERA MARTHA, M

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

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559-366-7060

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MENDEZ DIEGO,

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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OFFICE 1	1022 CALLOWAY DR , BAKERSFIELD CA 93312	886-707-6664	
OFFICE 3	4900 CALIFORNIA AVE STE 100B, BAKERSFIELD CA 93309	866-707-6664	661-746-9197

DENNIS-JOHNSON DEBBIE, A

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s) **SPANISH**
SPANISH
FRENCH

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OFFICE 1	2300 7TH ST , WASCO CA 93280	661-758-4184	

DENNIS-JOHNSON DEBBIE, A

Group Affiliation: NORTH KERN-SOUTH TULARE HOSPITAL DISTRICT

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

Office #	Street:	Phone:	Fax:
OFFICE 1	1500 6TH AVE , DELANO CA 93215	661-725-1010	661-725-6940

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SARRIA IVAN,

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

BALDONADO JESUS, P

Group Affiliation: NORTH KERN-SOUTH TULARE HOSPITAL DISTRICT

Language(s) **SPANISH**

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LIU CORINNA, YH

Group Affiliation: OMNI WOMEN'S HEALTH MEDICAL GROUP, INC.

Language(s) **SPANISH**

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OFFICE 3	2550 MERCED ST , FRESNO CA 93721	559-443-0170	559-443-0171
OFFICE 4	3812 N 1ST ST , FRESNO CA 93726	559-495-3120	559-495-3134

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SALAS JOSE, R

Group Affiliation: **ERICK MADRIGAL M.D., M.B.A, INC.**

Language(s) **SPANISH**
SPANISH

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LASCANO MIGUEL, L

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**
TAGALOG

Office # Street:
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Fax:
661-721-0738

MANGAT CHARNPAL, S

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

Language(s) **SPANISH**
PUNJABI
HINDI

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Fax:
661-322-4904

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SALJOUGHY TOGROL,

Group Affiliation: TOGROL SALJOUGHY

Language(s)

**SPANISH
FARSI**

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BETRE ABRAHAM,

Group Affiliation: PIXLEY MEDICAL CLINIC

Language(s) **SPANISH**

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OFFICE 1

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205 E DAVIS ST , PIXLEY CA 93256

Phone:

559-757-2000

Fax:

559-757-2006

BETRE ABRAHAM,

Group Affiliation: ABRAHAM BETRE DO

Language(s) **SPANISH**

RUSSIAN

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Fax:

559-688-6500

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LOPEZ JUAN, M

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4900 CALIFORNIA AVE , BAKERSFIELD CA 93309	866-707-6664	661-746-9197
OFFICE 1	912 FREMONT ST , DELANO CA 93215	866-707-6664	

BETRE ABRAHAM, M

Group Affiliation: **ALTURA CENTERS FOR HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

SAUTTER CASEY, L

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	6107 N 1ST ST , FRESNO CA 93710	866-707-6664	661-459-1974

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MAYER JONATHAN, J

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	925 G STREET , REEDLEY CA 93654	866-707-6664	661-746-9197

OB - UROGYNECOLOGY

LEE JUSTIN, T

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

Language(s)

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OPTOMETRY

SUORSA TIMOTHY, P

Group Affiliation: **TIMOTHY SUORSA, O.D.**

Language(s)

SPANISH

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OFFICE 1	524 W PUTNAM AVE , PORTERVILLE CA 93257	559-784-5127	559-784-4288

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

REBER DOUGLAS, C

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	525 ROBERTS LN , BAKERSFIELD CA 93308	866-707-6664	661-746-9197
OFFICE 1	2101 7TH ST STE B, WASCO CA 93280	866-707-6664	
OFFICE 3	4600 PANAMA LN STE 102B, BAKERSFIELD CA 93313	866-707-6664	661-746-9197

ORTHO - ORTHOPAEDIC SURGERY

LE BRUCE, N

Group Affiliation: ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	820 S AKERS ST STE 220, VISALIA CA 93277	559-733-3346	559-733-5059

KIM JUN,

Group Affiliation: ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	820 S AKERS ST STE 220, VISALIA CA 93277	559-733-3346	559-733-5059

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LESTER DON, K

Group Affiliation: D. KEVIN LESTER, M.D. INC.

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	6085 N 1ST ST STE 101, FRESNO CA 93710	559-431-2332	559-431-3784

SRIVASTAVA PRAMOD, K

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) **SPANISH**

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OFFICE 1	590 W PUTNAM AVE , PORTERVILLE CA 93257	559-781-3700	559-781-4131

SHANTHARAM SANAGARAM, S

Group Affiliation: SANAGARAM S. SHANTHARAM, M.D., A PROFESSIONAL CORPORATION

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7065 N MAPLE AVE STE 102, FRESNO CA 93720	559-322-0887	559-322-0888

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

COPPOLA ALFRED, J

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

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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COPPOLA ALFRED, J

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
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WAHBA GEORGE, M

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s) **SPANISH**
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	300 OLD RIVER RD STE 200, BAKERSFIELD CA 93311	661-664-2300	661-663-6711

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CRINER SETH, H

Group Affiliation: ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.

Language(s)

Office #

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Phone:

Fax:

OFFICE 1

820 S AKERS ST STE 220, VISALIA CA 93277

559-733-3346

559-733-5059

WAHBA GEORGE, M

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

Language(s) SPANISH
ARABIC

Office #

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Fax:

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93311

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SRIVASTAVA KARAN,

Group Affiliation: KARAN SRIVASTAVA

Language(s) SPANISH, TAGALO
SPANISH
HINDI

Office #

Street:

Phone:

Fax:

OFFICE 1

9610 STOCKDALE HWY STE C, BAKERSFIELD CA
93311

661-544-3352

661-544-3432

OFFICE 1

5300 LENNOX AVE STE 104, BAKERSFIELD CA
93309

661-544-3352

OFFICE 3

432 LEXINGTON ST STE C, DELANO CA 93215

661-544-3352

661-544-3432

OFFICE 4

110 N D ST , PORTERVILLE CA 93257

661-544-3352

661-725-5030

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SRIVASTAVA PRAMOD, K

Group Affiliation: **PRAMOD K. SRIVASTAVA**

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

Office # Street:

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661-725-0713

Fax:

559-782-5176

UNAL BERKAY,

Group Affiliation: **BERKAY UNAL MD PC**

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

Office # Street:

OFFICE 1 300 OLD RIVER RD STE 200, BAKERSFIELD CA
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Phone:

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661-663-6259

DUNCAN IAN, C

Group Affiliation: **SEQUOIA MULTISPECIALTY MEDICAL GROUP**

Language(s)

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Phone:

559-302-8169

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559-345-9667

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DUNCAN IAN, C

Group Affiliation: **ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.**

Language(s)

Office #

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Phone:

Fax:

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DANIELS MATHIAS, W

Group Affiliation: **ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.**

Language(s)

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TAN TIMOTHY, L

Group Affiliation: **SEQUOIA INSTITUTE FOR SURGICAL SERVICES INC.**

Language(s) **SPANISH**

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CHINESE

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559-731-2009

866-833-7251

OTO - OTOLARYNGOLOGY HEAD AND NECK SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SMITH LONNIE, R

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

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DUARTE VICTOR, M

Group Affiliation: OMFS CARE CENTER PARTNERS

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	215 N FRESNO ST STE 490, FRESNO CA 93701	559-459-6114	559-459-5744

SINGH JAGDEV,

Group Affiliation: JAGDEV SINGH

Language(s)
PUNJABI
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	6101 N FRESNO ST STE 102, FRESNO CA 93710	559-435-5576	559-435-4618

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHETE MONA,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B231, BAKERSFIELD CA
93301

661-665-0505

661-864-2190

VADAPALLI SATISH, R

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

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

8307 BRIMHALL RD STE 1706, BAKERSFIELD CA
93312

661-855-7447

661-215-1891

PED - CARDIOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BANKS AARON, E

Group Affiliation: PEDIATRIC HEART CENTER, INC.

Language(s)

SPANISH

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93311

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COLL ANA, C

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) SPANISH

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1186 LELAND AVE , TULARE CA 93274

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Fax:

559-366-7060

PED - ENDOCRINOLOGY

CHING JOHN,

Group Affiliation: PEDIATRIC ENDOCRINOLOGY & DIABETES CONSULTANTS, INC.

Language(s) SPANISH

SPANISH

CHINESE

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Fax:

661-840-5934

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PED - GASTROENTEROLOGY

WANG HONGTAO, A

Group Affiliation: VALLEY GASTROENTEROLOGY INSTITUTE INC

Language(s)	Office #	Street:	Phone:	Fax:
CHINESE	OFFICE 1	1191 E HERNDON AVE STE 103, FRESNO CA 93720	559-794-2168	559-272-1387
	OFFICE 1	2823 FRESNO ST , FRESNO CA 93720	559-459-6410	

PED - PEDIATRICS

RUERAS MARIA CECILIA, M

Group Affiliation: COASTAL KIDS, A PROFESSIONAL MEDICAL CORPORATION

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	9508 STOCKDALE HWY STE 150, BAKERSFIELD CA 93311	661-663-7500	661-663-3063
TAGALOG				
SPANISH				

YOUNG MATT, N

Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	420 34TH ST , BAKERSFIELD CA 93301	661-633-2876	661-327-0576

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BUSTAMANTE JAVIER,

Group Affiliation: COASTAL KIDS, A PROFESSIONAL MEDICAL CORPORATION

Language(s)

SPANISH

Office #

OFFICE 1

Street:

300 OLD RIVER RD STE 105, BAKERSFIELD CA 93311

Phone:

661-663-4700

Fax:

661-663-4740

OFFICE 1

1215 34TH ST , BAKERSFIELD CA 93301

661-663-4700

AMIN HASMUKH, C

Group Affiliation: COASTAL KIDS, A PROFESSIONAL MEDICAL CORPORATION

Language(s) SPANISH

HINDU

Office #

OFFICE 1

Street:

9508 STOCKDALE HWY STE 150, BAKERSFIELD CA 93311

Phone:

661-663-7500

Fax:

661-663-3063

LAVADIA ELSA, T

Group Affiliation: COASTAL KIDS, A PROFESSIONAL MEDICAL CORPORATION

Language(s)

TAGALOG

Office #

OFFICE 1

Street:

300 OLD RIVER RD STE 105, BAKERSFIELD CA 93311

Phone:

661-663-4700

Fax:

661-663-4740

OFFICE 1

1215 34TH ST , BAKERSFIELD CA 93301

661-663-4700

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PHYS MED - PAIN MEDICINE

MOZINGO RALPH, D

Group Affiliation: HULLANDER AND MOZINGO LP

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 200, BAKERSFIELD CA
93308

661-401-6150

805-563-0364

ROSHAN DANIEL,

Group Affiliation: HULLANDER AND MOZINGO LP

Language(s) SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 200, BAKERSFIELD CA
93308

661-401-6150

805-563-0364

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HULLANDER ROBERT, M

Group Affiliation: **HULLANDER AND MOZINGO LP**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 200, BAKERSFIELD CA
93308

661-401-6150

805-563-0364

MONTERO WINSTON,

Group Affiliation: **PAIN CLINICS OF CENTRAL CALIFORNIA, INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

5771 N FRESNO ST STE 101, FRESNO CA 93710

833-478-1818

833-478-1817

PIRES DAVID, C

Group Affiliation: **HULLANDER AND MOZINGO LP**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

2901 SILLECT AVE STE 200, BAKERSFIELD CA
93308

661-401-6150

805-563-0364

PORTUGUESE

PHYS MED - PHYSICAL MEDICINE AND REHABILITATION

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DIRKX BENJAMIN,

Group Affiliation: PAIN CLINICS OF CENTRAL CALIFORNIA, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	2350 W WHITENDALE AVE , VISALIA CA 93277	833-478-1818	833-478-1817
OFFICE 1	3751 E SHIELDS AVE , FRESNO CA 93726	833-478-1818	

ANDERSON BRADFORD, A

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

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2203 19TH ST , BAKERSFIELD CA 93301	661-616-5726	661-873-4664

NASR HANY, M

Group Affiliation: HANY NASR, MD, INC., A PROFESSIONAL CORPORATION

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	201 E NOBLE AVE , VISALIA CA 93277	559-627-6500	559-627-6501
OFFICE 1	76 N D ST STE A, PORTERVILLE CA 93257	559-627-6500	
OFFICE 3	729 MEDICAL CENTER DR W STE 201, CLOVIS CA 93611	559-207-3473	559-207-3476

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MATSUO SAMUEL, I

Group Affiliation: **VISALIA REHAB GROUP INC**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	840 S AKERS ST , VISALIA CA 93277	559-777-6776	559-940-6818

MATSUO SAMUEL, I

Group Affiliation: **KAWEAH REHAB GROUP, INC**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	840 S AKERS ST , VISALIA CA 93277	559-300-9777	559-750-4777

PODIATRIC MEDICINE

SHAH KATHAN,

Group Affiliation: **ERICK MADRIGAL M.D., M.B.A, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	833 SEQUOIA AVE , LINDSAY CA 93247	559-562-1361	559-789-9828

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PASABOC LIVIU,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	448 W PUTNAM AVE , PORTERVILLE CA 93257	559-784-3118	559-784-7486
ROMANIAN	OFFICE 1	1519 GARCES HWY STE 107, DELANO CA 93215	661-725-1664	
GERMAN	OFFICE 3	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	661-832-7145

NELSON TERRY, B

Group Affiliation: BASS MEDICAL GROUP

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2914 W MAIN ST , VISALIA CA 93291	559-627-2849	559-627-9772
SPANISH	OFFICE 1	774 N PROSPECT ST STE B, PORTERVILLE CA 93257	559-627-2849	
JAPANESE				
FRENCH	OFFICE 3	6061 N 1ST ST STE 103, FRESNO CA 93710	559-436-8262	559-436-0444

HUBER KYLE,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
	OFFICE 1	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MARMOLEJO RONALD, P

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	590 W PUTNAM AVE STE 2A, PORTERVILLE CA 93257	559-781-3700	559-339-1041
OFFICE 1	825 N SEQUOIA AVE , LINDSAY CA 92347	559-562-1960	
OFFICE 3	252 N HWY 65 , LINDSAY CA 93247		559-781-1230

SHAH KATHAN, D

Group Affiliation: CLINICA EL LAGO, INC.

Language(s) SPANISH
INDU

Office #	Street:	Phone:	Fax:
OFFICE 1	101 N PALM ST , WOODLAKE CA 93286	559-564-1100	559-564-1101

NELSON THOMAS, D

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) SPANISH
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1519 GARCES HWY , DELANO CA 93215	661-725-1664	661-832-7145
OFFICE 1	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LIN TZU LU,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) **SPANISH**
MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	

FLORA KIM, D

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

FLOREK DEREK, J

Group Affiliation: OMNI FAMILY HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	912 FREMONT ST , DELANO CA 93215	866-707-6664	661-237-6650
OFFICE 1	2101 7TH ST BLG A-F, WASCO CA 93280	866-707-6664	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FLORES MICHAEL, A

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

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	1519 GARCES HWY STE 107, DELANO CA 93215	661-725-1664	
OFFICE 3	8307 BRIMHALL RD STE 1704, BAKERSFIELD CA 93312	661-832-1667	661-832-7145
OFFICE 4	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	661-832-7145

KIM SOLOMON,

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

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	440 W PUTNAM AVE , PORTERVILLE CA 93257	559-784-3110	
OFFICE 3	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	661-832-7145

SHAH KATHAN, D

Group Affiliation: **CENTRAL VALLEY FOOT AND ANKLE, INC.**

Language(s) **SPANISH**
SPANISH
FRENCH
PORTUGUESE

Office #	Street:	Phone:	Fax:
OFFICE 1	116 N AKERS ST , VISALIA CA 93291	559-636-3668	559-636-3665

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KOELEWYN KRISTOPHER, S

Group Affiliation: ERICK MADRIGAL M.D., M.B.A, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	833 SEQUOIA AVE , LINDSAY CA 93247	559-562-1361	559-784-5433

KRALL VICTOR, G

Group Affiliation: TULE RIVER INDIAN HEALTH CENTER, INC.

Language(s) SPANISH, MANDA
MANDARIN

Office #	Street:	Phone:	Fax:
OFFICE 1	380 N RESERVATION RD , PORTERVILLE CA 93257	559-784-2316	559-791-2533

MAY TYLER, P

Group Affiliation: BASS MEDICAL GROUP

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	2914 W MAIN ST , VISALIA CA 93291	559-627-2849	559-627-9772
OFFICE 1	774 N PROSPECT ST STE B, PORTERVILLE CA 93257	559-627-2849	
OFFICE 3	6061 N 1ST ST STE 103, FRESNO CA 93710	559-436-8262	559-436-0444

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KOUHKAN MEHRNAZ,

Group Affiliation: **BARTZ-ALTADONNA COMMUNITY HEALTH CENTER**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	9300 N LOOP BLVD STE C, CALIFORNIA CITY CA 93505	661-874-4050	888-977-1571

RAHMAN KAZI, S

Group Affiliation: **ORTHOPAEDIC ASSOCIATES MEDICAL CLINIC, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	820 S AKERS ST STE 220, VISALIA CA 93277	559-733-3346	559-733-5059

CHUANG SOHRABI CATHY, T

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

Language(s) **SPANISH**
CHINESE

Office #	Street:	Phone:	Fax:
OFFICE 1	4946 W MINERAL KING AVE , VISALIA CA 93291	559-624-1405	559-624-1746
OFFICE 1	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KIM PAUL,

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s) **SPANISH**
KOREAN

Office #	Street:	Phone:	Fax:
OFFICE 1	110 NEW STINE RD , BAKERSFIELD CA 93309	661-832-1667	661-832-7145
OFFICE 1	440 W PUTNAM AVE , PORTERVILLE CA 93257	559-784-3110	
OFFICE 3	1086 N CHERRY ST , TULARE CA 93274	661-832-1667	661-832-7145

MOTOS RICHARD, R

Group Affiliation: SEQUOIA PODIATRY GROUP, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	308 S JOHNSON ST , VISALIA CA 93291	559-734-1171	559-734-6849

MAY TYLER, P

Group Affiliation: OMNI FAMILY HEALTH

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	1215 JEFFERSON ST , DELANO CA 93215	866-707-6664	661-772-5336

PSY - PSYCHIATRY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MEJIA BLANCA,

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

1530 E MANNING AVE , REEDLEY CA 93654

866-707-6664

661-746-9197

BODAPATI NAGA, V

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

HINDI

OFFICE 1

210 N CHESTER AVE , BAKERSFIELD CA 93307

866-707-6664

661-746-9197

PUNJABI

OFFICE 1

1451 WHITE LN , BAKERSFIELD CA 93307

866-707-6664

TELGU & URDU

OFFICE 3

4900 CALIFORNIA AVE STE 100B, BAKERSFIELD CA 93309

866-707-6664

661-746-9197

OFFICE 4

1022 CALLOWAY DR , BAKERSFIELD CA 93312

866-707-6664

661-746-9197

CRUZ HERBERT, A

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

SPANISH

OFFICE 1

2505 MERCED ST , FRESNO CA 93721

866-707-6664

661-746-9197

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUMUSANELI ERGI,

Group Affiliation: **ERICK MADRIGAL M.D., M.B.A, INC.**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

833 SEQUOIA AVE , LINDSAY CA 93247

559-562-1361

559-789-9828

MOHANKUMAR HONNUDIKE, T

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**
HINDI
KANNADA

Office #

Street:

Phone:

Fax:

OFFICE 1

1022 CALLOWAY DR , BAKERSFIELD CA 93312

866-707-6664

661-746-9197

PSYCH - PSYCHOLOGY

MACHADO FREDERICK,

Group Affiliation: **OMNI FAMILY HEALTH**

Language(s) **SPANISH**
SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

912 FREMONT ST , DELANO CA 93215

866-707-6664

661-746-9197

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FROST-MORGAN SARAH, E

Group Affiliation: OMNI FAMILY HEALTH

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	4600 PANAMA LN STE 102B, BAKERSFIELD CA 93313	866-707-6664	661-746-9197

TONG KATHERINE,

Group Affiliation: OMNI FAMILY HEALTH

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	659 S CENTRAL VALLEY HWY , SHAFTER CA	866-707-6664	661-746-9197
OFFICE 1	4900 CALIFORNIA AVE STE 400B, BAKERSFIELD CA 93309	866-707-6664	

RAGER VINCENT,

Group Affiliation: OMNI FAMILY HEALTH

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	1022 CALLOWAY DR , BAKERSFIELD CA 93312	866-707-6664	661-746-9197

RAD - DIAGNOSTIC RADIOLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

TALLY JULIA,

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1700 S COURT ST STE A, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 1	400 W MINERAL KING AVE , VISALIA CA 93291	559-734-9244	
OFFICE 3	1700 S COURT ST STE C, VISALIA CA 93277	559-734-5674	559-734-1787
OFFICE 4	119 S LOCUST ST STE B, VISALIA CA 93291	559-734-5674	559-734-1787

MERCER NANCI,

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

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

MANSFIELD WILLIAM, P

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

Language(s) **SPANISH, ARABIC**

Office #	Street:	Phone:	Fax:
OFFICE 1	1311 JEFFERSON ST , DELANO CA 93215	661-721-3510	661-721-0562

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BENDAVID ELI, J

Group Affiliation: CALIFORNIA MEDICAL IMAGING ASSOCIATES, INC.

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3610 W PACKWOOD AVE , VISALIA CA 93277	559-713-6050	559-713-6321
OFFICE 1	360 E ALMOND AVE SUITE A-B, MADERA CA 93637	559-384-3239	

VALLES FRANCISCO, E

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)

SPANISH

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

SINGH TIGER TEJPAL,

Group Affiliation: INVIEW IMAGING DIAGNOSTIC, INC. A PROFESSIONAL MEDICAL CORPORATION

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	3450 HILLCREST AVE , ANTIOCH CA 94531	925-757-2100	925-757-2101
OFFICE 1	970 DEWING AVE STE 100, LAFAYETTE CA 94549	925-586-3096	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DENARO STEPHEN, A

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

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

MCCULLY JR FRANCIS, R

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) SPANISH

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

ECKEL GREGORY, M

Group Affiliation: INVIEW IMAGING DIAGNOSTIC, INC. A PROFESSIONAL MEDICAL CORPORATION

Language(s) SPANISH, CANTO

Office #	Street:	Phone:	Fax:
OFFICE 1	3450 HILLCREST AVE , ANTIOCH CA 94531	925-757-2100	925-757-2101
OFFICE 1	1000 W CARSON ST , TORRANCE CA 90509	310-222-2171	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALAGAPPAN RAVI,

Group Affiliation: INVIEW IMAGING DIAGNOSTIC, INC. A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH, CHINESE**

Office #	Street:	Phone:	Fax:
OFFICE 1	3450 HILLCREST AVE , ANTIOCH CA 94531	925-757-2100	925-757-2101
OFFICE 1	2125 OAK GROVE RD , WALNUT CA 94598	925-296-7144	

LE THU, T

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH
VIETNAMESE**

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

SHAHKARAMI ASHKAN,

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH**

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JAIN KIREN, S

Group Affiliation: INVIEW IMAGING DIAGNOSTIC, INC. A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH, CHINESE**

Office #	Street:	Phone:	Fax:
OFFICE 1	3450 HILLCREST AVE , ANTIOCH CA 94531	925-757-2100	925-757-2101
OFFICE 1	970 DEWING AVE STE 100, LAFAYETTE CA 94549	925-586-3096	

HA TUAN, X

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)
VIETNAMESE

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

ABE BENNETT, K

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH**

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HWA LINDA,

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

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

HIGHTOWER DANIEL, J

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

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

AGUET JAIME, C

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ROPER GLADE, E

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s) **SPANISH**
SPANISH

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

KAVALI ASHA, K

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)

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

BLUME DOUGLAS, N

Group Affiliation: MINERAL KING RADIOLOGICAL MEDICAL GROUP, INC.

Language(s)

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MORAN ANGEL,

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

Language(s) **SPANISH**

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

SHIN MICHAEL, J

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

Language(s) **SPANISH**

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

BOUIT TROY, K

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

Language(s) **SPANISH**

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PIATT BRADFORD, M

Group Affiliation: INVIEW IMAGING DIAGNOSTIC, INC. A PROFESSIONAL MEDICAL CORPORATION

Language(s) **SPANISH, CANTO**

Office #	Street:	Phone:	Fax:
OFFICE 1	3450 HILLCREST AVE , ANTIOCH CA 94531	925-757-2100	925-757-2101
OFFICE 1	970 DEWING AVE STE 100, LAFAYETTE CA 94549	925-586-3096	

RAD - INTERVENTIONAL/DIAGNOSTIC RADIOLOGY

MOSHFEGH AMIEL, P

Group Affiliation: SOUTHERN CALIFORNIA VASCULAR INSTITUTE, INC.

Language(s)

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

RAD - RADIATION ONCOLOGY

CHANG-HALPENNY CHRISTINE, N

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH
CHINESE**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GORLA GIRIDHAR, G

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

Language(s) **SPANISH**
HINDI

Office #	Street:	Phone:	Fax:
OFFICE 1	6501 TRUXTUN AVE , BAKERSFIELD CA 93309	661-322-2206	661-322-7027

LY DAVID,

Group Affiliation: **SEQUOIA RADIATION ONCOLOGY SERVICES, INC.**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	4945 W CYPRESS AVE STE A, VISALIA CA 93277	559-624-3100	559-635-4043
OFFICE 1	1443 W 7TH ST , HANFORD CA 93230	559-585-7115	

BATTH SUKHJEET, S

Group Affiliation: **CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MONSON JEDIDIAH, M

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) SPANISH

Office # Street:

Phone:

Fax:

OFFICE 1 7130 N MILLBROOK AVE , FRESNO CA 93720

559-326-1222

559-326-1225

DESAI AJAY, S

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

Language(s)

HINDI

Office # Street:

Phone:

Fax:

OFFICE 1 4500 MORNING DR STE 105, BAKERSFIELD CA 93306

661-491-5060

661-871-3479

CHANG TANGEL,

Group Affiliation: SEQUOIA RADIATION ONCOLOGY SERVICES, INC.

Language(s) SPANISH

TAIWANESE

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Phone:

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559-635-4043

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559-585-7115

SURG - BARIATRIC SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JUAREZ CARLOS, M

Group Affiliation: CALIFORNIA BARIATRICS, INC.

Language(s)

SPANISH

Office #

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Street:

1381 E HERNDON AVE STE 104, FRESNO CA 93720

Phone:

559-432-3434

Fax:

559-432-3585

IRANI HORMUZ,

Group Affiliation: ADVANCED BARIATRICS A MEDICAL CORPORATION

Language(s) SPANISH

HINDU

SPANISH

GUJARATI

Office #

OFFICE 1

Street:

8311 BRIMHALL RD STE 1901, BAKERSFIELD CA
93312

Phone:

661-638-0601

Fax:

661-638-0605

SURG - CARDIOVASCULAR/THORACIC SURGERY

PECK ERIC, A

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) SPANISH

Office #

OFFICE 1

Street:

3838 SAN DIMAS ST STE A100, BAKERSFIELD CA
93301

Phone:

661-327-8538

Fax:

661-327-5432

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

REICH HEIDI, J

Group Affiliation: CENTRAL CALIFORNIA HEART AND LUNG SURGERY

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	729 N MEDICAL CENTER DR W STE 223, CLOVIS CA 93611	559-449-9990	559-449-9991

PUREWAL SARABJIT, S

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) **SPANISH**
INDIAN

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

PAW PATRICK, T

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) **SPANISH**
THAI
CHINESE

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ARAIM LEHEB, H

Group Affiliation: **CENTRAL CALIFORNIA HEART AND LUNG SURGERY**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	729 N MEDICAL CENTER DR W STE 223, CLOVIS CA 93611	559-449-9990	559-449-9991

LIN JOHN, C

Group Affiliation: **CENTRAL CALIFORNIA CHEST SURGERY**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	729 N MEDICAL CENTER DR W STE 223, CLOVIS CA 93611	559-935-5491	559-935-5719

SURG - COLON/RECTAL SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MALELLARI LORENC,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B231, BAKERSFIELD CA
93301

661-665-0505

661-864-2190

SURG - COMPLEX GENERAL SURGICAL ONCOLOGY

FOULAD DAVID,

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

Language(s) **SPANISH**

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Phone:

Fax:

OFFICE 1

6501 TRUXTUN AVE , BAKERSFIELD CA 93309

661-322-2206

661-327-7027

SURG - GENERAL SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SINGH GURMANT, P

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

Language(s)

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

MOON CYRUS, R

Group Affiliation: **MOON MD INCORPORATED**

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	432 LEXINGTON AVE STE A, DELANO CA 93215	661-375-5879	661-375-5877

ENTABI FATEH,

Group Affiliation: **ENTABI, M.D., INC.**

Language(s) **SPANISH**
ARABIC

Office #	Street:	Phone:	Fax:
OFFICE 1	1070 N CHERRY ST , TULARE CA 93274	559-412-5533	559-412-5534

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PATEL ARPIT, B

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s) **SPANISH**
GUJARATI

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE B231, BAKERSFIELD CA 93301	661-665-0505	661-864-2190
OFFICE 1	9500 STOCKDALE HWY STE 201, BAKERSFIELD CA 93311	661-327-1431	

ANDERSON CASANDRA, A

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

PANDYA GAURANG, S

Group Affiliation: FREEDOM MEDICAL GROUP, INC.

Language(s)
HINDU

Office #	Street:	Phone:	Fax:
OFFICE 1	555 W PUTNAM AVE , PORTERVILLE CA 93257	559-782-8533	559-782-8544

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ZHOU JING,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B231, BAKERSFIELD CA 93301

661-665-0505

661-864-2190

PANDYA GAURANG, S

Group Affiliation: **GAURANG S, PANDYA, MD**

Language(s) **SPANISH**
HINDU

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Fax:

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559-782-8533

559-782-8544

OFFICE 1

303 W NOBLE AVE , VISALIA CA 93277

559-782-8533

MESHESHA ABIY, A

Group Affiliation: **ABIY MESHESHA, M.D., INC.**

Language(s) **SPANISH**

Office #

Street:

Phone:

Fax:

OFFICE 1

5421 W HILLSDALE AVE , VISALIA CA 93291

559-636-8600

559-636-9700

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PUGALENTHI AMUDHAN,

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B231, BAKERSFIELD CA
93301

661-665-0505

661-864-2190

KWOCK CHRISTINA, L

Group Affiliation: PORTERVILLE COMMUNITY PHYSICIANS, INC.

Language(s) SPANISH

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93257

559-544-6865

559-791-3909

SERALATHAN RAMASAMY,

Group Affiliation: RAMASAMY SERALATHAN

Language(s) SPANISH

Office #

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Phone:

Fax:

TAMIL

OFFICE 1

560 W PUTNAM AVE STE 8, PORTERVILLE CA
93257

559-781-2000

559-781-8679

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUERRERO WHITNEY,

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s) **SPANISH**
FRENCH
SPANISH

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

HAKIMI AHMAD, N

Group Affiliation: AHMAD N. HAKIMI, M.D. PROFESSIONAL CORPORATION

Language(s) **SPANISH**
FARSI

Office #	Street:	Phone:	Fax:
OFFICE 1	557 W MORTON AVE STE B, PORTERVILLE CA 93257	559-781-9922	559-781-9925
OFFICE 1	1107 W POPLAR AVE , PORTERVILLE 93257	877-960-3426	

IBERDEMAJ RAME, D

Group Affiliation: UNITED CALIFORNIA SURGICAL FORUM, INC.

Language(s)
ALBANIAN
CROATIAN
SERBIAN

Office #	Street:	Phone:	Fax:
OFFICE 1	1000 E ALMOND AVE , MADERA CA 93637	559-673-5657	559-599-9726

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WILLIAMS RACHAEL, Y

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

Language(s)

FRENCH

Office #

OFFICE 1

Street:

420 34TH ST , BAKERSFIELD CA 93301

Phone:

661-633-2876

Fax:

661-327-0576

FAWIBE OLUWATOSIN,

Group Affiliation: **DIGNITY HEALTH MEDICAL FOUNDATION**

Language(s)

Office #

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661-864-2190

LEE CHIH CHENG,

Group Affiliation: **ADVENTIST HEALTH DELANO**

Language(s) **SPANISH**

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661-721-0737

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OFFICE 1

2300 7TH ST , WASCO CA 93280

661-758-4184

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ENTABI FATEH,

Group Affiliation: ALTURA CENTERS FOR HEALTH

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

SURG - OPHTHALMOLOGY

CHAWLA ANUJ,

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

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	9500 STOCKDALE HWY STE 108, BAKERSFIELD CA 93311	661-663-8500	661-663-8688
OFFICE 1	137 S ASPEN CT STE C, VISALIA CA 93291	559-733-7024	
OFFICE 3	2323 16TH ST STE 400, BAKERSFIELD CA 93301	661-479-0757	661-634-8044

BIANCO LUKE, S

Group Affiliation: LUKE S. BIANCO, M.D., INC.

Language(s)
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	505 N CHURCH ST , VISALIA CA 93291	559-429-4378	559-623-9630

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

YANG DONG, D

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	661-322-8489

CASTELLARIN ALESSANDRO, A

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s)

SPANISH

ITALIAN

Office #	Street:	Phone:	Fax:
OFFICE 1	5404 W CYPRESS AVE STE 101, VISALIA CA 93277	559-627-5200	559-627-5222
OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	

WONG KAI, W

Group Affiliation: KAI W. WONG

Language(s) SPANISH

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

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KIM RICHARD, D J

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

Language(s)

KOREAN

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Language(s)

ARABIC

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OFFICE 1

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NGUYEN LOAN, K

Group Affiliation: DAVID B.KAYE, M.D., INC.

Language(s) **SPANISH, ARMENI**

SPANISH

VIETNAMESE

FRENCH

Office #

OFFICE 1

Street:

6767 N FRESNO ST , FRESNO CA 93710

Phone:

559-432-1000

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2514 JENSEN ST STE 103, SANGER CA 93657

559-875-2000

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALEXANDRAKIS GEORGE,

Group Affiliation: GEORGE ALEXANDRAKIS, MD, INC.

Language(s)

GREEK

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Language(s)

SPANISH

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LEARNED DANIEL, L

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) SPANISH

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Fax:

559-627-5222

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SEIN JULIA,

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) **SPANISH**
BURMESE

Office #	Street:	Phone:	Fax:
OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	661-322-8489
OFFICE 1	5404 W CYPRESS AVE STE 101, VISALIA CA 93277	559-627-5200	

KOUCHOUK AMR, M

Group Affiliation: HOLLYWOOD EYE ASSOCIATES

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3801 SAN DIMAS ST BLDG A, BAKERSFIELD CA 93301	661-460-7640	661-457-9677

COUVILLION STEPHEN, S

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	5404 W CYPRESS AVE STE 101, VISALIA CA 93277	559-627-5200	559-627-5222
OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KAYE DAVID, B

Group Affiliation: **DAVID B.KAYE, M.D., INC.**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	6767 N FRESNO ST , FRESNO CA 93710	559-432-1000	559-432-1034
AFRIKAANS	OFFICE 1	2514 JENSEN ST STE 103, SANGER CA 93657	559-875-2000	
HEBREW	OFFICE 3	1011 W YOSEMITE AVE , MADERA CA 93637	559-673-6000	559-673-7119

SEE ROBERT, F

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s)	Office #	Street:	Phone:	Fax:
	OFFICE 1	5404 W CYPRESS AVE STE 101, VISALIA CA 93277	559-627-5200	559-627-5222
	OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	

WU CHRIS, Y

Group Affiliation: **CALIFORNIA RETINA CONSULTANTS**

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	661-322-8489
SPANISH				
MANDARIN				

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

STEINLE NATHAN, C

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	5404 W CYPRESS AVE STE 101, VISALIA CA 93277	559-627-5200	559-627-5222
OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	

DHOOT DILSHER, S

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
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OFFICE 1	5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309	661-325-4393	

HASNAIN SYED, S

Group Affiliation: SYED S. HASNAIN M.D.

Language(s) SPANISH
URDU
PUNJABI

Office #	Street:	Phone:	Fax:
OFFICE 1	332 N VILLA ST , PORTERVILLE CA 93257	559-781-7482	559-781-8446

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

YAPLEE STEVEN, M

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

Language(s)

SPANISH

Office #

OFFICE 1

Street:

9700 BRIMHALL RD , BAKERSFIELD CA 93312

OFFICE 1

1519 GARCES HWY STE 101, DELANO CA 93215

Phone:

661-631-2020

661-721-2020

Fax:

661-829-8657

SUNALP MURAD, A

Group Affiliation: SUNALP LASER VISION INC

Language(s) SPANISH

TURKISH

Office #

OFFICE 1

Street:

880 E MERRITT AVE STE 109, TULARE CA 93274

Phone:

559-688-2020

Fax:

559-688-8526

AVERY ROBERT, L

Group Affiliation: CALIFORNIA RETINA CONSULTANTS

Language(s)

SPANISH

Office #

OFFICE 1

Street:

5404 W CYPRESS AVE STE 101, VISALIA CA 93277

OFFICE 1

5555 BUSINESS PARK S STE 100, BAKERSFIELD CA 93309

Phone:

559-627-5200

661-325-4393

Fax:

559-627-5222

SURG - ORAL/MAXILLOFACIAL SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WOO BRIAN, M

Group Affiliation: BRIAN M. WOO ,D.D.S., M.D., INC.

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

290 N WAYTE LN , FRESNO CA 93701

559-459-4101

559-459-5744

GOLDSTEIN JEFFREY, S

Group Affiliation: OMFS CARE CENTER PARTNERS

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

215 N FRESNO ST STE 490, FRESNO CA 93701

559-459-6114

559-459-5744

ZAIDI AHMED, B

Group Affiliation: OMFS CARE CENTER PARTNERS

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

215 N FRESNO ST STE 490, FRESNO CA 93701

559-459-6114

559-459-5744

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ZAKHARY GEORGE, M

Group Affiliation: **OMFS CARE CENTER PARTNERS**

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

215 N FRESNO ST STE 490, FRESNO CA 93701

559-459-6114

559-459-5744

SURG - PLASTIC SURGERY

EVANS BRIAN, N

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

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

420 34TH ST , BAKERSFIELD CA 93301

661-633-2876

661-327-0576

GROSSMAN PETER, H

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

Language(s)

SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

420 34TH ST , BAKERSFIELD CA 93301

661-633-2876

661-327-0576

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DEV VIPUL, R Group Affiliation: CALIFORNIA INSTITUTE OF COSMETIC & RECONSTRUCTIVE SURGERY, A MEDICAL CORPORATION

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	2901 SILLECT AVE STE 201, BAKERSFIELD CA 93308	661-327-2101	661-327-2554
GUJARATI				
HINDI				
 SPANISH				

BAUGHMAN ETHAN, J Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	420 34TH ST , BAKERSFIELD CA 93301	661-633-2876	661-327-0576
SPANISH				

MAJIDIAN ALEXANDER, M Group Affiliation: GROSSMAN MEDICAL GROUP, INC.

Language(s)	Office #	Street:	Phone:	Fax:
SPANISH	OFFICE 1	420 34TH ST , BAKERSFIELD CA 93301	661-633-2876	661-327-0576

SURG - SURGERY OF THE HAND

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LIVERMORE MERYL, S

Group Affiliation: SEQUOIA INSTITUTE FOR SURGICAL SERVICES INC.

Language(s) **SPANISH**

Office # Street:

Phone:

Fax:

OFFICE 1 2300 W SUNNYSIDE AVE , VISALIA CA 93277

559-731-2009

866-833-7251

LIU JONATHAN, C

Group Affiliation: SEQUOIA INSTITUTE FOR SURGICAL SERVICES INC.

Language(s) **SPANISH CHINESE
CHINESE**

Office # Street:

Phone:

Fax:

OFFICE 1 2300 W SUNNYSIDE AVE , VISALIA CA 93277

559-731-2009

559-623-9756

WONG CHARLES, D

Group Affiliation: PACIFIC CENTRAL COAST HEALTH CENTERS

Language(s)

Office # Street:

Phone:

Fax:

OFFICE 1 300 OLD RIVER RD STE 200, BAKERSFIELD CA
93311

661-664-2300

661-663-6711

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WONG CHARLES, D

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

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

300 OLD RIVER RD STE 200, BAKERSFIELD CA
93311

661-664-2300

661-663-6711

SURG - THORACIC SURGERY

KHWAJA SHAMSUDDIN,

Group Affiliation: CENTRAL CALIFORNIA HEART AND LUNG SURGERY

Language(s)

Office #

Street:

Phone:

Fax:

OFFICE 1

7575 N CEDAR AVE STE 101, FRESNO CA 93720

559-449-9990

559-449-9991

PAMULA RAMESH, B

Group Affiliation: RAMESH B. PAMULA, M.D., INC.

Language(s) SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

1243 E SPRUCE AVE STE 104, FRESNO CA 93720

559-900-4395

559-900-4396

SURG - UROLOGY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

YOUNGSTROM EDWIN, A

Group Affiliation: DIGNITY HEALTH MEDICAL FOUNDATION

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3838 SAN DIMAS ST STE B231, BAKERSFIELD CA 93301	661-665-0505	661-864-2190
OFFICE 1	3838 SAN DIMAS ST STE A200, BAKERSFIELD CA 93301	661-654-0200	

SNYDER ORRENZO, B

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

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	263 N 3RD ST STE 126, PORTERVILLE CA 93257	559-772-4301	559-772-4302

MINOR THOMAS, X

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

RAHMAN NADEEM, U

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1225

RAINWATER HAROLD, G

Group Affiliation: VALLEY UROLOGY, INC

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	6113 N FRESNO ST STE 101, FRESNO CA 93710	559-438-2777	559-438-4117

HOROVITZ DAVID,

Group Affiliation: DAVID HOROVITZ, MD INC

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	3941 SAN DIMAS ST STE 103A, BAKERSFIELD CA 93301	661-520-5010	661-520-5020

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HAMDY ANAS, A

Group Affiliation: CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.

Language(s) **SPANISH**
ARABIC

Office # Street:
OFFICE 1 7130 N MILLBROOK AVE , FRESNO CA 93720

Phone:
559-326-1222

Fax:
559-326-1230

BHARDWAJ VIRINDER, K

Group Affiliation: VIRINDER K. BHARDWAJ, MD

Language(s)
PUNJABI
HINDU

Office # Street:
OFFICE 1 386 N VILLA AVE STE B, PORTERVILLE CA 93257

Phone:
559-789-9973

Fax:
559-789-0359

SNYDER ORRENZO,

Group Affiliation: VALLEY HEALTHCARE CENTERS

Language(s) **SPANISH**
DINÉ

Office # Street:
OFFICE 1 590 W PUTNAM AVE , PORTERVILLE CA 93257

Phone:
559-781-4100

Fax:
559-781-1230

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DWIVEDI RAJENDRA, H

Group Affiliation: **R.H. DWIVEDI, M.D., INC.**

Language(s) **SPANISH**
HINDU
GUJARATI

Office #	Street:	Phone:	Fax:
OFFICE 1	623 W PUTNAM AVE , PORTERVILLE CA 93257	559-781-2403	559-781-4334

STONE BRUCE, C

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

Language(s)

Office #	Street:	Phone:	Fax:
OFFICE 1	9500 STOCKDALE HWY STE 109, BAKERSFIELD CA 93311	661-664-4455	661-664-4458

CHI ANDREW, A

Group Affiliation: **CALIFORNIA CANCER ASSOCIATES FOR RESEARCH AND EXCELLENCE, INC.**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	7130 N MILLBROOK AVE , FRESNO CA 93720	559-326-1222	559-326-1230

SURG - UROLOGY/FEMALE PELVIC MED AND RECONSTRUCTIVE SURGERY

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LEE JUSTIN, T

Group Affiliation: **JUSTIN THIEN LEE, MD INC**

Language(s)

VIETNAMESE

Office #

OFFICE 1

Street:

**500 OLD RIVER RD STE 200, BAKERSFIELD CA
93311**

Phone:

661-663-6429

Fax:

661-663-6041

SURG - VASCULAR SURGERY

HAMDY ABDULRAHMAN, A

Group Affiliation: **BASS MEDICAL GROUP**

Language(s) **SPANISH**

Office #

OFFICE 1

Street:

820 S AKERS ST STE 120, VISALIA CA 93277

Phone:

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Fax:

559-625-6004

OFFICE 1

384 PEARSON DR , PORTERVILLE CA 93257

559-625-4118

OFFICE 3

125 MALL DR STE 211B, HANFORD CA 93257

559-625-4118

559-625-6004

OFFICE 4

**7045 N MAPLE AVE STE 107 & 108, FRESNO CA
93270**

559-746-9605

559-558-8183

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CAPOTE ALLAN, L

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

Language(s) **SPANISH TAGALO
TAGALOG**

Office #	Street:	Phone:	Fax:
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OFFICE 1	4825 COFFEE RD , BAKERSFIELD CA 93308	661-387-8333	

CAMPBELL MATTHEW, P

Group Affiliation: **ALTURA CENTERS FOR HEALTH**

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	1101 N CHERRY ST , TULARE CA 93274	559-686-9097	559-366-7060

NGUYEN ALEXANDER, H

Group Affiliation: **BASS MEDICAL GROUP**

Language(s)

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OFFICE 1	7045 N MAPLE AVE STE 107 & 108, FRESNO CA 93270	559-746-9605	

Independent Medical Group - Tulare Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CAMPBELL MATTHEW, P

Group Affiliation: BASS MEDICAL GROUP

Language(s) **SPANISH**
SPANISH

Office #	Street:	Phone:	Fax:
OFFICE 1	820 S AKERS ST STE 120, VISALIA CA 93277	559-625-4118	559-625-6004
OFFICE 1	384 PEARSON DR , PORTERVILLE CA 93257	559-625-4118	
OFFICE 3	7045 N MAPLE AVE STE 107 & 108, FRESNO CA 93270	559-746-9605	559-558-8183
OFFICE 4	820 S AKERS ST STE 100, VISALIA CA 93277	559-625-4118	559-625-6004

ARAIM OMAR, A

Group Affiliation: BASS MEDICAL GROUP

Language(s) **SPANISH**

Office #	Street:	Phone:	Fax:
OFFICE 1	820 S AKERS ST STE 120, VISALIA CA 93277	559-625-4118	559-558-8183
OFFICE 1	384 PEARSON DR , PORTERVILLE CA 93257	559-625-4118	
OFFICE 3	7045 N MAPLE AVE STE 107 & 108, FRESNO CA 93270	559-746-9605	559-558-8183
OFFICE 4	820 S AKERS ST STE 100, VISALIA CA 93277	559-625-4118	559-625-6004
